DR MOHANLALL

Practice Number: 0309168

CENTRE FOR ADVANCED MEDICINE SOUTH AFRICA

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| 3 | DIMENSIONAL VASCULOGRAPHY (3DVG)- PATIENT ASSESSMENT / TESTIMONIAL |
|-------|---|
| lame: | 696 Date: 06 04/18 |
| | |
| 1. | From where did you hear about 3DVG? |
| | DE HARIPERSAD |
| 2. | Can you give a brief overview about your opinion on the 3DVG assessment and the explanation of the results? |
| - | Its dear on explanation and win |
| _ | If the idea can be excalated |
| _ | Happy note the senice |
| | |
| | |
| 3. | Would you recommend this assessment to anybody else? Please tick the appropriate box. • Yes △ • No □ |
| 4. | Do you grant permission for the following to appear on our website and other sources for other patient's benefit? |
| | Yes NO |
| | Testimonial Name |