

REPORTING CHANGE

NOTIFICATION DATE: September 30, 2009

EFFECTIVE DATE: November 4, 2009

CHROMIUM, RANDOM, URINE
#86153

EXPLANATION: Effective November 4, 2009, a reporting units change will take place on test #86153.

There will be no changes to the reference values, fee or CPT coding.

CURRENT REPORTING UNITS: ug/L

NEW REPORTING UNITS: mcg/L

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or
Jim Nielsen, Mayo Medical Laboratories' Technologist Support
Telephone: 800-533-1710



TEST DEFINITION

9/30/2009

MML NAME/ORDER CODE CROSS-REFERENCE

CODE NAME

86153 CHROMIUM, RANDOM, U

MML MML TEST SETUP INFORMATION

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
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86153	8/28/2009		CHROMIUM, RANDOM, U			SDL
			TRANSPORT TEMP : REFRIG\FROZEN OK\AMBIENT NO			
			31078 CHROMIUM, RANDOM, U			
			EXPECT RESULTS OF FORM : SHOULD BE LESS THAN OR GREATER THAN 1-3 DIGITS WITH 1 DECIMAL PLACE			
			UNITS: MCG/L			

*PERFORMING SITE LEGEND

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SDL	MAYO CLINIC DPT OF LAB MED & PATHOLOGY	LAB DIRECTOR:	FRANKLIN R. COCKERILL, III, M.D.
	SUPERIOR DR.		
	3050 SUPERIOR DR. NW		
	ROCHESTER, MN 55901		

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MML MESSAGES USED AS NORMALS

CODE TEXT

TOTAL OF 0 NORMALS CODES

*** END OF REPORT ***

1-800-533-1710

PATIENT NAME TESTING, DIANNA		PATIENT NUMBER		AGE 59	SEX F	ACCESSION # G9134266
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 09/01/09 02:07 P DATE TIME	RECEIVED 09/01/09 02:07 P DATE TIME	REPORT PRINTED 09/30/09 01:27 P DATE TIME		SPECIMEN INFORMATION DATE OF BIRTH:		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
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Chromium, Random, U				
Chromium, Random, U		7.5	mcg/L	SDL

* PERFORMING SITE

SDL	Mayo Clinic Dpt of Lab Med & Pathology Superior Dr 3050 Superior Dr. NW Rochester, MN 55901	Lab Director: Franklin R. Cockerill, III, M.D.
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PATIENT NAME TESTING, DIANNA	ORDER STATUS Final	COLLECTION DATE AND TIME 09/01/09 02:07 P
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