

1-800-533-1710

PATIENT NAME TESTING, CONNI 90363				PATIENT NUMBER L3MRNG9152793		AGE 37	SEX F	ACCESSION # G9152793
ORDERING PHYSICIAN			CLIENT ORD	CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PR	INTED	SPECIMEN INFORMA	TION		
07/07/10 04:03 P	07/07/10 0	04:03 P	07/13/10	08:01 A	DATE OF BIRTH:			
DATE TIME	DATE	TIME	DATE	TIME				
Test Client								
Attn: Mayo Liaisons								
200 First Street SW								
Rochester, MN 55905								
507-284-8202								

н

TEST REQUESTED LO REF RANGE PERFORM SITE *

Dantrolene

 Dantrolene
 H
 5000
 mcg/mL
 0.2-3.5
 REF

 Reporting Limit
 0.20
 mcg/mL
 REF

Synonym(s): Dantrium
Test Performed By: NMS Labs

3701 Welsh Road P.O. Box 433A

Willow Grove, PA 19090-0437

* PERFORMING SITE

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, CONNI 90363	Final	07/07/10 04:03 P