

1-800-533-1710

PATIENT NAME TESTING, CONNI 90368				PATIENT NUMBER L3MRNG9152753		<b>AGE</b> 37	SEX F	<b>ACCESSION #</b> G9152753
ORDERING PHYSICIAN			CLIENT ORD	CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION	RECEIVED	RECEIVED REPORT PRINTED		INTED	SPECIMEN INFORMA	TION		
07/06/10 05:20 P	07/06/10 (	)5:20 P	07/13/10	08:03 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								

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TEST REQUESTED LO REF RANGE PERFORM SITE \*

**Phenelzine** 

PhenelzineH5000ng/mL1-100REFReporting Limit1.0ng/mLREF

Synonym(s): Nardil

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 90368	Final	07/06/10 05:20 P