

1-800-533-1710

<b>PATIENT NAME</b> TESTING, SHEILA		<b>PATIENT NUMBER</b> L3MRNG9153268		<b>AGE</b> 35	<b>SEX</b> F	<b>ACCESSION #</b> G9153268
<b>ORDERING PHYSICIAN</b>			<b>CLIENT ORDER #</b>		<b>ACCOUNT #</b> LIAISONS	
<b>COLLECTION</b> 07/19/10 08:38 A	<b>RECEIVED</b> 07/19/10 08:38 A	<b>REPORT PRINTED</b> 08/09/10 11:28 A		<b>SPECIMEN INFORMATION</b> DATE OF BIRTH:		
<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>				
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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**Urinalysis Complete w/ Microscopic**

<b>Source</b>	<b>Void</b>			<b>MCR</b>
<b>Appearance</b>	<b>Normal</b>		<b>Normal</b>	<b>MCR</b>
<b>Osmolality</b>	<b>555</b>	<b>mOsm/kg</b>	<b>150-1150</b>	<b>MCR</b>
<b>pH</b>	<b>5.0</b>			<b>MCR</b>
<b>Glucose</b>	<b>5</b>	<b>mg/dL</b>	<b>&lt;25</b>	<b>MCR</b>
<b>Protein</b>	<b>5</b>	<b>mg/dL</b>		<b>MCR</b>
<b>Protein/Osmolality</b>	<b>0.09</b>	<b>Ratio</b>	<b>&lt;0.12</b>	<b>MCR</b>
<b>Predicted 24 Hr Protein</b>	<b>75</b>	<b>mg/24 h</b>		<b>MCR</b>
<b>Predicted Range</b>	<b>19-304</b>	<b>mg/24 h</b>		<b>MCR</b>
<b>Hemoglobin, QL</b>	<b>Negative</b>		<b>Negative</b>	<b>MCR</b>
<b>Microscopy</b>	<b>Normal</b>		<b>Normal</b>	<b>MCR</b>
<b>RBC</b>	<b>21-30</b>	<b>/hpf</b>	<b>&lt;3</b>	<b>MCR</b>
<b>Dysmorphic RBC</b>	<b>&lt;25</b>	<b>%</b>	<b>&lt;25</b>	<b>MCR</b>
<b>Squamous Epithelial Cells</b>	<b>11-20</b>	<b>/hpf</b>		<b>MCR</b>
<b>Yeast</b>	<b>Present</b>			<b>MCR</b>

## \* PERFORMING SITE

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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<b>PATIENT NAME</b> TESTING, SHEILA	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 07/19/10 08:38 A
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