

1-800-533-1710

PATIENT NAME			PATIENT NUM	IBER		AGE	SEX	ACCESSION #
TESTING, DERLEN IS			3			55	F	G9154588
ORDERING PHYSICIAN DR OLDENBURG			CLIENT ORDE	R#				ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PRIN	ITED	SPECIMEN INFORMA	TION		
08/11/10 02:59 P	08/11/10 0	2:59 P	09/14/10	08:02 A	DATE OF BIRTH:			
DATE TIME	DATE	TIME	DATE	TIME				
Test Client					TESTING DERLEN			
Attn: Mayo Liaisons								
200 First Street SW								
Rochester, MN 55905								
507-284-8202								

	HI			
TEST REQUESTED	LO		REF RANGE	PERFORM SITE *
Antisperm Antibody, Semen				
Study Type	Direct			MCR
Head, IgA	0	%	0-49	MCR
Head, IgG	0	%	0-49	MCR
Midpiece, IgA	0	%	0-49	MCR
Midpiece, IgG	0	%	0-49	MCR
Tail, IgA	0	%	0-49	MCR
Tail, IgG	0	%	0-49	MCR
Tail Tip, IgA	0	%		MCR
Tail Tip, IgG	0	%		MCR
Comment				MCR

Analyte Specific Reagent

This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. This test has not been cleared or approved by the U.S. Food and Drug Administration.

* PERFORMING SITE

MCR	Mayo Clinic Dpt of Lab Med & Pathology	Lab Director: Franklin R. Cockerill, III, M.D.
	200 First Street SW Rochester, MN 55905	

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, DERLEN IS	Final	08/11/10 02:59 P