MAYO CLINIC
Mayo Medical Laboratories

LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME	PATIENT NUMBER	AGE	SEX	ACCESSION #
TESTING, TOM	L3MRNG9158004	65	M	G9158004

ORDERING PHYSICIAN	CLIENT ORDER #	ACCOUNT #
		LIAISONS

COLLECTION DATE TIME	RECEIVED DATE TIME	REPORT PRINTED DATE TIME	SPECIMEN INFORMATION
10/18/10 11:32 A	10/18/10 11:32 A	12/23/10 01:07 P	DATE OF BIRTH: 2/10/1945

Test Client
Attn: Mayo Liaisons
200 First Street SW
Rochester, MN 55905
507-284-8202

TEST REQUESTED	HI LO		REF RANGE	PERFORM SITE *
Hemoglobin F, Red Cell Distrib, B				
Hemoglobin F, Red Cell Distrib, B		Homocellular distribution of Hb F		MCR
-- EXPECTED VALUES -- Reported as: Heterocellular or Homocellular				
Interpretation				MCR
Performed by flow cytometry.				
Hemoglobin, Unstable, B				
Hemoglobin, Unstable, B		Abnormal		MCR
PRECAUTIONS: False-positive results will be obtained in blood specimens that contain >5% fetal hemoglobin or in specimens that are received more than a week after the blood has been drawn. -- EXPECTED VALUES -- Reported as: Normal [stable] or Abnormal [unstable]				
Hemoglobin S, Scrn, B				
Hemoglobin S, Scrn, B		Positive	Negative	MCR
HGB Electrophoresis, Molecular				
Manual DNA Extraction		Performed		MCR
Alpha Globin Gene Sequencing		Performed		MCR

** Perform Site Legend on last page of report*

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TESTING, TOM	Final	10/18/10 11:32 A

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This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. It has not been cleared or approved by the U.S. Food and Drug Administration.			
Beta Globin Gene Sequencing	**TNP**		**MCR**
Reflexed test not required			
This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. It has not been cleared or approved by the U.S. Food and Drug Administration.			
Beta Globin Gene Sequence	**TNP**		**MCR**
Reflexed test not required			
Alpha Globin Gene Sequence	**Performed**		**MCR**
Beta Globin Gene Del/Dup	**Performed**		**MCR**
Hb Variant by Mass Spec, B			
Hb Variant by Mass Spec, B	**Performed**		**MCR**
This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. It has not been cleared or approved by the U.S. Food and Drug Administration.			
IEF Confirms			
IEF Confirms	**YES**		**MCR**
Methemoglobinemia Evaluation			
Methemoglobinemia Interpretation			**MCR**

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Reviewed by Dr. J.D. Hoyer.					
Increased values. Clinical correlation is necessary.					
Sulfhemoglobin, B	H	0.5	%	0.0-0.4	MCR
Methemoglobin Reductase, B	H	19.3	IU/g Hb	8.2-19.2	MCR
Hemoglobin Spectral Absorbance		Normal			MCR
Comment		Testing			MCR
Methemoglobin, B	H	1.6	%	0.0-1.5	MCR
Hemoglobin A	L	15.6	%	95.8-98.0	MCR
Variant		31.0 = Hb S	%	No abnormal variants	MCR
Variant 2		25.0 = Hb D	%	No abnormal variants	MCR
Variant 3		15.0 = Hb I	%	No abnormal variants	MCR
Interpretation					MCR
Reviewed by Dr. J.D. Hoyer.					
S/D transfused.					
Hemoglobin A2	H	3.4	%	2.0-3.3	MCR
Hemoglobin F	H	10.0	%	0.0-0.9	MCR

* 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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TESTING, TOM	Final	10/18/10 11:32 A