

1-800-533-1710

<b>PATIENT NAME</b> TESTING, 8472		<b>PATIENT NUMBER</b> L3MRNG9165361		<b>AGE</b> 45	<b>SEX</b> F	<b>ACCESSION #</b> G9165361
<b>ORDERING PHYSICIAN</b>			<b>CLIENT ORDER #</b>		<b>ACCOUNT #</b> LIAISONS	
<b>COLLECTION</b> 02/24/11 02:57 P <b>DATE</b> <b>TIME</b>	<b>RECEIVED</b> 02/24/11 02:57 P <b>DATE</b> <b>TIME</b>	<b>REPORT PRINTED</b> 03/10/11      02:12 P <b>DATE</b> <b>TIME</b>		<b>SPECIMEN INFORMATION</b> DATE OF BIRTH:		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO		REF RANGE	PERFORM SITE *
<b>Creatinine with eGFR, S</b>				<b>REPORTED: 02/24/11 03:00 P</b>	
Creatinine, S		1.0	mg/dL	0.6-1.1	MCR
eGFR-Non African American	L	60	mL/min/BSA	>60	MCR
eGFR-African American		>60	mL/min/BSA	>60	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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<b>PATIENT NAME</b> TESTING, 8472	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 02/24/11 02:57 P
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