

1-800-533-1710

PATIENT NAME TESTING, 8297			PATIENT NU L3MRNG91			AGE 34	SEX F	ACCESSION # G9165435
ORDERING PHYSICIAN			CLIENT ORD	CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 02/25/11 09:37 A DATE TIME Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202	RECEIVED 02/25/11 C DATE		REPORT PR 03/11/11 DATE	INTED 07:52 A TIME	SPECIMEN INFORMA DATE OF BIRTH:	ATION		

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TEST REQUESTED LO REF RANGE PERFORM SITE *

Galactosylcer B-Galactosidase,Fibro REPORTED: 02/25/11 10:26 A

Galactosylcer 15.1 mU/g Prot 10.3-89.7 MCR

B-Galactosidase,Fibro

Fibroblast Culture REPORTED: 02/25/11 10:42 A

Fibroblast Culture Not MCR

applicable

Fibroblasts successfully cultured.

Cryopreserve for Biochem Studies REPORTED: 02/25/11 10:42 A

TNP MCR

Cryopreserve for Biochem Studies

Fibroblasts successfully cryopreserved. Test cancelled per request of client.

* 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, 8297	Final	02/25/11 09:37 A