

1-800-533-1710

PATIENT NAME TESTING, NEDSDNA		PATIENT NUMBER L3MRNG9168759		AGE 34	SEX F	ACCESSION # G9168759
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 04/25/11 07:12 A	RECEIVED 04/25/11 07:12 A	REPORT PRINTED 04/28/11 03:24 P		SPECIMEN INFORMATION DATE OF BIRTH:		
DATE TIME	DATE TIME	DATE TIME				
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
DNA Double-Stranded Ab, IgG, S				
DNA Double-Stranded Ab, IgG, S	H	75.0	IU/mL	
Interpretation: Positive (>=30.0)			REPORTED: 04/25/11 07:16 A	
			<30.0	NEL
			(Negative)	

* PERFORMING SITE

NEL Mayo Medical Laboratories New England 160 Dascomb Road Andover, MA 01810	Lab Director: Lynn A. Cheryk, Ph.D.
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PATIENT NAME TESTING, NEDSDNA	ORDER STATUS Final	COLLECTION DATE AND TIME 04/25/11 07:12 A
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