



Patient ID 321	Patient Name TEST, IMPLEMENTATION TESTING	Birth Date 1956-05-23	Gender F	Age 56
Order Number X100061731	Client Order Number X100061731	Ordering Physician ,	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 12 Apr 2013 07:00		

Toxoplasma Ab, IgG, S

Toxoplasma Ab, IgG, S

SDL



Positive

Abn

REFERENCE VALUE
Negative

Toxoplasma IgG Value

SDL

13 IU/mL

REFERENCE VALUE
≤9 IU/mL (Negative)
10–11 IU/mL (Equivocal)
≥12 IU/mL (Positive)

Received: 12 Apr 2013 16:04

Reported: 12 Apr 2013 16:11

Performing Site Legend

Code	Laboratory	Address
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901