

Laboratory Service Report

| 1-80 | 0-533 | -1710 |
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| Patient Name SAMPLEREPORTS, HIVE ABNORMAL | Patient ID NA00025329 | Age 22 | Gender M | Order # NA00025329 |
|--|--|-----------|-------------|-----------------------|
| Ordering Phys CLIENT,CLIENT | | | | DOB 05/05/1990 |
| Client Order # NA00025329 | Account Information | | | Report Notes |
| Collected 02/08/2013 08:36 | C7028847-DLMP New England SDSC 2 - Client Support | | | |
| Printed 05/22/2013 12:26 | Rochester, MN 55901 | | | |

Reference Perform Unit Flag Results Value Site* Test

REPORTED 02/08/2013 07:46

HIV-1/-2 Ab Evaluation, S AΒ Reactive NEL

Result is not diagnostic (considered preliminary), and diagnosis of HIV infection must be based on confirmatory test results. Western blot confirmatory testing ordered. -- REFERENCE VALUE --

Negative

Testing is performed using the Ortho Vitros Anti-HIV 1+2chemiluminescence immunoassay.

HIV-1/-2 Ab Confirm Eval, S

REPORTED 05/14/2013 08:23

Negative

HIV-1 Ab Confirm Western Blot, S

Negative

SDL

* Performing Site:

| NEL | Mayo Medical Laboratories New England 160 Dascomb Road Andover, MA 01810 | Lab Director: Lynn A. Cheryk, Ph.D. |
|-----|--|--|
| SDL | Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901 | Lab Director: Franklin R. Cockerill, III, M.D. |

| Patient Name | Collection Date and Time | Report Status |
|-----------------------------|--------------------------|---------------------|
| SAMPLEREPORTS,HIVE ABNORMAL | 02/08/2013 08:36 | Final |
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