

## **Laboratory Service Report**

## 1-800-533-1710

Patient Name SAMPLEREPORTS,TRAM POS	Patient ID NA00026220	Age 23	Gender M	Order # NA00026220
Ordering Phys CLIENT, CLIENT		·	·	<b>DOB</b> 05/05/1990
Client Order # NA00026220	Account Information			Report Notes
<b>Collected</b> 10/08/2013 10:26	C7028847-DLMP New England SDSC 2 - Client Support			
<b>Printed</b> 10/22/2013 08:49	Rochester, MN 55901			

Test	Flag Results	Unit	Reference Value	Perform Site*
Tramadol and Metabolite, U RECEIVED: 10/08/2013 09:33	<b>REPORTED:</b> 10/08/2013 09:35			
Tramadol	50	ng/mL	Cutoff:<50	NEL
O-desmethyltramadol	50	ng/mL	Cutoff:<50	NEL

## \* Performing Site:

NEL	Mayo Medical Laboratories New England 160 Dascomb Road Andover, MA 01810	Lab Director: Lynn A. Cheryk, Ph.D.	

Patient Name	Collection Date and Time	Report Status	
SAMPLEREPORTS,TRAM POS	10/08/2013 10:26	Final	
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