

## **Laboratory Service Report**

## 1-800-533-1710

Patient Name TESTINGRNV,CHSUP2	Patient ID SA00064451	<b>Age</b> 32	Gender M	<b>Order #</b> SA00064451	
Ordering Phys CLIENT,CLIENT		·		<b>DOB</b> 10/10/1981	
Client Order # SA00064451	Account Information			Report Notes	
<b>Collected</b> 11/13/2013 00:00	C7028846-DLMP Roc SDSC 2 - Client Suppo				
<b>Printed</b> 11/19/2013 12:56	Rochester, MN 55901				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Chronic Hepatitis Prof (Unknown) RECEIVED: 11/14/2013 12:23 REPORT	<b>TED:</b> 11/14/20	13 12:46			
HBs Antigen, S	AB	Positive		Negative	SDL
Reportable Disease					
S/CO ratio is $> 50$ . Confin	rmatory test	-	d.		
HBs Antibody, S		Positive			NEL
Patient is considered to k	pe immune to	infection with	HBV.		
REFERENCE VALUE					
Unvaccinated: Negative Vaccinated: Positive					
HBs Antibody, Quantitative, S		26.3	mIU/mL		NEL
REFERENCE VALUE		20.5	mio/mi		NDD.
Unvaccinated: <10.0					
Vaccinated: >=10.0					
HBc Total Ab, S	AB	Positive		Negative	SDL
If clinically indicated, t	esting for H	epatitis B Core	2		
IgM antibody is necessary and past HBV infection.	to different	iate between ac	cute		
HCV Ab Screen, S	AB	Reactive		Negative	SDL
Supplemental testing for F active HCV infection. Signal-to-cutoff ratio is		commended to ru	ale out		

## \* Performing Site:

SDL	Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901	Lab Director:
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
TESTINGRNV,CHSUP2	11/13/2013 00:00	Final
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<sup>\*</sup> Report times for Mayo performed tests are CST/CDT