

Patient Name SAMPLEREP,COXIS_ABNORMAL	Patient ID SA00065500	Age 31	Gender F	Order # SA00065500
Ordering Phys CLIENT,CLIENT				DOB 08/30/1982
Client Order # SA00065500	Account Information			Report Notes
Collected 02/06/2014 00:00	C7028846-DLMP Rochester SDSC 2 - Client Support			
Printed 03/28/2014 14:17	Rochester, MN 55901			

Test	Flag	Results	Unit	Reference Value	Perform Site*
Coccidioides Ab w/ Reflex, S					
RECEIVED: 02/06/2014 13:45 REPORTED: 02/06/2014 13:49					
Coccidioides Ab Screen, S		Reactive		Negative	SDL
Confirmatory testing by complement fixation and immunodiffusion has been ordered.					
Coccidioides Ab, CF/ID, S					
RECEIVED: 02/06/2014 13:49 REPORTED: 02/06/2014 13:58					
Cocci Ab, CF (Serum)		Negative		Negative	SDL
Cocci ID-IgG (Serum)		Negative		Negative	SDL
Cocci ID-IgM (Serum)		Negative		Negative	SDL
The EIA may be reactive prior to complement fixation and immunodiffusion (CF/ID), or may be falsely-reactive. Repeat testing by CF/ID in 2-3 weeks if clinically indicated.					

* Performing Site:

SDL	Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901	Lab Director:
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Patient Name SAMPLEREP,COXIS_ABNORMAL	Collection Date and Time 02/06/2014 00:00	Report Status Final
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* Report times for Mayo performed tests are CST/CDT