

1-800-533-1710

PATIENT NAME TESTING, SHEILA ORDERING PHYSICIAN			_			AGE 35	SEX F	ACCESSION # G9158692
			CLIENT ORDER #					ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PR	NTED	SPECIMEN INFORMA	ATION		
10/26/10 11:15 A	10/26/10 1	1:15 A	11/15/10	10:06 A	DATE OF BIRTH:			
DATE TIME	DATE	TIME	DATE	TIME				
Test Client								
Attn: Mayo Liaisons								
200 First Street SW								
Rochester, MN 55905								
507-284-8202								
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TEST REQUESTED L	.0		REF RANGE PE	RFORM SIT
ugs of Abuse Screen, Meconium	4			
Amphetamine	Reflex*	ng/g	Cutoff: 50	MCR
*Drug confirmation	ordered by reflex.			
Refer to confirmat	ion result to follow			
for the definitive	result.			
Methamphetamine	Negative	ng/g	Cutoff: 100	MCR
Cocaine	Reflex*	ng/g	Cutoff: 50	MCR
*Drug confirmation	ordered by reflex.			
Refer to confirmat	ion result to follow			
for the definitive	result.			
Opiate	Negative	ng/g	Cutoff: 50	MCR
Tetrahydrocannabinol	Reflex*	ng/g	Cutoff: 10	MCR
	ordered by reflex.			
	ion result to follow			
for the definitive	result.			
caine and Metabolites, Confirm, I	М			
Cocaine	450	ng/g	Cutoff: 50	MCR
Benzoylecgonine	450	ng/g	Cutoff: 50	MCR
Cocaethylene	450	ng/g	CUtoff: 50	MCR
m-Hydroxybenzoylecgo	450	ng/g	Cutoff: 50	MCR
nine				
Interpretation	Positive			MCR
rboxy-THC Confirmation, M				
THC	350	ng/g	Cutoff: 10	MCR
Interpretation	Positive			MCR
nphetamines, Confirmation, M				
Amphetamine	500	ng/g	Cutoff: 50	MCR
Methamphetamine	500	ng/g	Cutoff: 50	MCR
3,4-methylenedioxyamp	500	ng/g	Cutoff: 50	MCR
hetamine				

renomi Site Legend on last page of report

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, SHEILA	Final	10/26/10 11:15 A



1-800-533-1710

PATIENT NAME			PATIENT NU	MBER		AGE	SEX	ACCESSION #
TESTING, SHEILA			L3MRNG91	L3MRNG9158692			F	G9158692
ORDERING PHYSICIAN			CLIENT ORD	CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PR	INTED	SPECIMEN INFORMA	TION		
10/26/10 11:15 A	10/26/10	11:15 A	11/15/10	10:06 A	DATE OF BIRTH:			
DATE TIME	DATE	TIME	DATE	TIME				
Test Client								
Attn: Mayo Liaisons								
200 First Street SW								
Rochester, MN 55905								
507-284-8202								

н LO PERFORM SITE * **TEST REQUESTED REF RANGE** 3,4-methylene-dioxyeth 500 ng/g Cutoff: 50 **MCR** ylamphetamine CUtoff: 50 3,4-methylene-dioxy-me 500 ng/g **MCR** thamphetamine Interpretation **Positive MCR**

* PERFORMING SITE

MCR	Mayo Clinic Dpt of Lab Med & Pathology	Lab Director: Franklin R. Cockerill, III, M.D.
	200 First Street SW Rochester, MN 55905	

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TESTING, SHEILA	Final	10/26/10 11:15 A