

1-800-533-1710

PATIENT NAME			PATIENT NU	MBER		AGE	SEX	ACCESSION #
TESTING, EMIR IS			L3MRNG91	65368		40	М	G9165368
ORDERING PHYSICIAN	,		CLIENT ORD	ER#				ACCOUNT # LIAISONS
COLLECTION	RECEIVED	1	REPORT PR	INTED	SPECIMEN INFORMA	TION		
02/24/11 03:09 P	02/24/11 (03:09 P	03/03/11	09:38 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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LO PERFORM SITE * **TEST REQUESTED REF RANGE**

Myeloperoxidase Ab, S Myeloperoxidase Ab, S

0.3

U

REPORTED: 02/24/11 04:02 P < 0.4

MCR

(Negative)

* 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

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, EMIR IS	Final	02/24/11 03:09 P