

1-800-533-1710

PATIENT NAME			PATIENT NU	MBER		AGE	SEX	ACCESSION #
TESTING, SHEILA			L3MRNG91	L3MRNG9165664			F	G9165664
ORDERING PHYSICIAN			CLIENT ORD	CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PR	INTED	SPECIMEN INFORMA	TION		
03/01/11 09:30 A	03/01/11	09:30 A	03/11/11	07:50 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 LO REF RANGE PERFORM SITE \*

## Maleic Anhydride, IgE

Maleic Anhydride, IgE

< 0.35

kU/L

REPORTED: 03/01/11 10:56 A

SDL

Class 0 (Negative <0.35)
Analyte Specific Reagent

This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. It has not been cleared or approved by the U.S. Food and Drug Administration.

## \* PERFORMING SITE

SDL Mayo Clinic Dpt of Lab Med & Pathology Superior Dr Lab Director: Franklin R. Cockerill, III, M.D. 3050 Superior Dr. NW Rochester, MN 55901

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, SHEILA	Final	03/01/11 09:30 A