

1-800-533-1710

<b>PATIENT NAME</b> TESTING, 81090		<b>PATIENT NUMBER</b> L3MRNG9165380		<b>AGE</b> 15	<b>SEX</b> F	<b>ACCESSION #</b> G9165380
<b>ORDERING PHYSICIAN</b>		<b>CLIENT ORDER #</b>			<b>ACCOUNT #</b> LIAISONS	
<b>COLLECTION</b> 02/24/11 03:36 P <b>DATE</b> <b>TIME</b>	<b>RECEIVED</b> 02/24/11 03:36 P <b>DATE</b> <b>TIME</b>	<b>REPORT PRINTED</b> 03/10/11      02:17 P <b>DATE</b> <b>TIME</b>		<b>SPECIMEN INFORMATION</b> DATE OF BIRTH:		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
<b>C3 Complement, Functional, S</b>				<b>REPORTED: 02/24/11 03:36 P</b>
<b>C3 Complement, Functional, S</b>		26	21-50	MCR
<b>Analyte Specific Reagent</b> 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

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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<b>PATIENT NAME</b> TESTING, 81090	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 02/24/11 03:36 P
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