

<b>Patient Name</b> REPORTVALIDATION,AUTOMATION D...	<b>Patient ID</b> RVDMOHB038	<b>Age</b> 40	<b>Gender</b> F	<b>Order #</b> RVDMOHB038
<b>Ordering Phys</b>				<b>DOB</b> 01/01/1971
<b>Client Order #</b> RVDMOHB038	<b>Account Information</b> C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER,MN 55901			<b>Report Notes</b>
<b>Collected</b> 11/14/2011 16:24				
<b>Printed</b> 11/15/2011 12:30				

Test	Flag Results	Unit	Reference Value	Perform Site*
<b>KIT Asp816Val Mutation Analysis</b>			REPORTED 11/15/2011 08:01	
Specimen Type	Peripheral blood			MCR
Final Diagnosis:				MCR
Peripheral blood, KIT Asp816Val gene mutation analysis:				
Positive for KIT Asp816Val mutation.				
Signing Pathologist: Carey Lueck				
Method summary - KIT Genomic DNA was extracted and a qualitative, allele-specific polymerase chain reaction (PCR) assay used to evaluate for the point mutation causing KIT Asp816Val (see Mayo Medical Laboratories Interpretive Handbook for method details). Laboratory developed test.				

\* Performing Site:

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905	Lab Director:
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<b>Patient Name</b> REPORTVALIDATION,AUTOMATION D...	<b>Collection Date and Time</b> 11/14/2011 16:24	<b>Report Status</b> Final
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\* Report times for Mayo performed tests are CST/CDT