

Patient Name TESTING,LIZ	Patient ID C7028846-001686	Age 59	Gender F	Order # X100061427
Ordering Phys UNKNOWN,PROVIDER				DOB 06/02/1953
Client Order # X100061427	Account Information			Report Notes
Collected 04/10/2013 08:00	C7028846-DLMP Rochester 3050 Superior Drive Rochester, MN 55901			
Printed 05/08/2013 15:22				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Varicella-Zoster Ab, IgM and IgG, S					
Varicella-Zoster Ab, IgM, S	AB	Positive		REPORTED 04/11/2013 07:22 Negative	SDL
Results suggest recent infection.					
Varicella-Zoster Ab, IgG, S		Positive			SDL
Results suggest response to immunization or prior exposure to the virus.					
-- REFERENCE VALUE --					
Vaccinated: Positive					
Unvaccinated: Negative					
Varicella IgG Antibody Index		15.0			SDL

* Performing Site:

SDL	Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901	Lab Director:
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Patient Name TESTING,LIZ	Collection Date and Time 04/10/2013 08:00	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT