





Patient ID SA00059299	Patient Name SAMPLEREPORT, SDEX A	Birth Date 1966-06-10	Gender F	Age 47
Order Number SA00059299	Client Order Number SA00059299	Ordering Physician Client, Client	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 24 Jun 2013 00:00		

Hemoglobin S, Scrn, B

Result Name	Value	Unit	Reference Value	Performing Site
  Hemoglobin S, Scrn, B	Positive			MCR
<p>This assay will not discriminate Hgb S trait from homozygous sickle cell disease (S/S), nor any of the following combinations: S/C, S/D, S/G, S/E, S/ beta-thalassemia, S/O-Arab, and C-Harlem trait. If definitive classification is needed, please order the hemoglobin electrophoresis test (test code 81626) and submit a new sample.</p> <p>REFERENCE VALUE Expected result is negative</p>				

Received: 25 Jun 2013 08:59

Reported: 25 Jun 2013 09:18

Performing Site Legend

Code	Laboratory	Address
MCR	Mayo Clinic Dept. of Lab Med and Pathology	200 First Street SW, Rochester, MN 55905