



Patient ID <b>SA00059645</b>	Patient Name <b>SAMPLEREPORT, FUSM N</b>	Birth Date <b>1966-06-10</b>	Gender <b>F</b>	Age <b>47</b>
Order Number <b>SA00059645</b>	Client Order Number <b>SA00059645</b>	Ordering Physician <b>Client, Client</b>	Report Notes	
Account Information <b>C7028846 DLMP Rochester</b>		Collected <b>01 Jul 2013 00:00</b>		

**Fusarium Moniliforme, IgE**

SDL

<0.35 kU/L

Class 0 (Negative <0.35)

**Received:** 02 Jul 2013 11:16

**Reported:** 02 Jul 2013 11:16

QA Environment

**Performing Site Legend**

Code	Laboratory	Address
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901