



Patient ID <b>RVMICMY129</b>	Patient Name <b>REPORTVALIDATION, AUTOMATION MICMY</b>	Birth Date <b>1981-09-01</b>	Gender <b>M</b>	Age <b>30</b>
Order Number <b>RVMICMY129</b>	Client Order Number <b>RVMICMY129</b>	Ordering Physician <b>,</b>	Report Notes	
Account Information <b>C7028846 DLMP Rochester</b>		Collected <b>01 Nov 2011 16:57</b>		

**Fungal Culture, Vaginal**

**MCR**

**SOURCE:**

**FUNGAL CULTURE, VAGINAL**

**FINAL**

No growth after 7 days of incubation.

**Received:** 02 Nov 2011 15:57

**Reported:** 03 Nov 2011 12:41

QA Environment

**Performing Site Legend**

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