

Patient Name SAMPLEREPORT,LEIS N	Patient ID SA00046195	Age 40	Gender F	Order # SA00046195
Ordering Phys				DOB 09/28/1971
Client Order # SA00046195	Account Information C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER,MN 55901			Report Notes
Collected 06/06/2012 08:45				
Printed 11/02/2012 10:58				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Leishmaniasis (Visceral) Ab, S		Negative		REPORTED 11/02/2012 10:35 Negative	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 SAMPLEREPORT,LEIS N	Collection Date and Time 06/06/2012 08:45	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT