

<b>Patient Name</b> TESTING,9812	<b>Patient ID</b>	<b>Age</b>	<b>Gender</b>	<b>Order #</b> W2934250
<b>Ordering Phys</b>		<b>DOB</b>		
<b>Client Order #</b> W2934250	<b>Account Information</b> C7999998-STUSTEST 200 FIRST STREET SW ROCHESTER, MN 55901  (507)266-5730	<b>Report Notes</b>		
<b>Collected</b> 10/15/2009 06:00				
<b>Printed</b> 10/15/2009 12:25				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Gomori's ST for Reticulum		Performed		REPORTED 10/15/2009 12:19	MCR

\* Performing Site:

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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<b>Patient Name</b> TESTING,9812	<b>Collection Date and Time</b> 10/15/2009 06:00	<b>Report Status</b> Final
Page 1 of 1		** End of Report **

\* Report times for Mayo performed tests are CST/CDT