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|--------------------------------------|---|---------------------|---------------|----------------------------|
| Patient Name TESTING,82844 | Patient ID | Age | Gender | Order # W3049567 |
| Ordering Phys | | DOB | | |
| Client Order # W3049567 | Account Information C7999998-STUSTEST 200 FIRST STREET SW ROCHESTER, MN 55901 | Report Notes | | |
| Collected 10/27/2009 06:00 | | | | |
| Printed 10/29/2009 08:27 | (507)266-5730 | | | |

| Test | Flag | Results | Unit | Reference Value | Perform Site* |
|---|------|---------|------|---------------------------|---------------|
| Green Nemitti, IgE Class 0 (Negative <0.35) | | <0.35 | kU/L | REPORTED 10/27/2009 12:08 | SDL |

* Performing Site:

| | | |
|-----|--|---------------|
| SDL | Mayo Clinic Dpt of Lab Med & Pathology Superior Dr 3050 Superior Dr. NW Rochester, MN 55901 | Lab Director: |
|-----|--|---------------|

| | | |
|--------------------------------------|---|-------------------------------|
| Patient Name TESTING,82844 | Collection Date and Time 10/27/2009 06:00 | Report Status Final |
| Page 1 of 1 | | ** End of Report ** |

* Report times for Mayo performed tests are CST/CDT