

Laboratory Service Report

1-800-533-1710

Patient Name TESTING,8022	Patient ID	Age	Gender	Order # W3073577
Ordering Phys		DOB		
Client Order # W3073577	Account Information C7999998-STUSTEST	Report N	lotes	
Collected 10/29/2009 06:00	200 FIRST STREET SW ROCHESTER, MN 55901			
Printed 10/29/2009 12:52	(507)266-5730			

Test	Flag	Results	Unit	Reference Value	Perform Site*
Lactate Dehydrogenase (LD), BF REFERENCE VALUE		76	REPORTED 10/29 U/L	/2009 10:48	MCR
No established normal value Fluid Type Spinal					MCR

Performance characteristics and reference ranges have not been verified. Results should be interpreted in conjunction

with clinical findings.

* Performing Site:

	_		
MCR		Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905	Lab Director:

Patient Name	Collection Date and Time	Report Status
TESTING,8022	10/29/2009 06:00	Final
Page 1 of 1		** End of Report **

^{*} Report times for Mayo performed tests are CST/CDT