

1-800-533-1710

PATIENT NAME TESTING, LEISHA		PATIENT NUMBER		AGE 25	SEX F	ACCESSION # G9140083
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 11/13/09 11:59 A	RECEIVED	REPORT PRINTED 11/17/09 02:18 P		SPECIMEN INFORMATION		
DATE TIME	DATE TIME	DATE TIME	DATE OF BIRTH:			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
Carbamazepine-10,11-Epoide, S				
Carb-10,11-Epoide, S		0.9	mcg/mL	MCR
-- EXPECTED VALUES --				
0.4-4.0 (Toxic > or = 8.0)				
Carbamazepine, Total,		5.0	mcg/mL	MCR
S				
-- EXPECTED VALUES --				
2.0-10.0 (Toxic > or = 12.0)				

* PERFORMING SITE

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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