

1-800-533-1710

PATIENT NAME TESTING, CONNI 91719		PATIENT NUMBER		AGE 36	SEX F	ACCESSION # G9142206
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 01/15/10 03:41 P DATE TIME	RECEIVED 01/15/10 03:41 P DATE TIME	REPORT PRINTED 01/29/10 04:22 P DATE TIME		SPECIMEN INFORMATION 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 *
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Interleukin 1-Beta

Interleukin 1-Beta	0.35	pg/mL	Up to 1.00	REF
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This test was performed using a kit that has not been cleared or approved by the FDA and is designated as research use only. The analytic performance characteristics of this test have been determined by Inter Science Institute. This test is not intended for diagnosis or patient management decisions without confirmation by other medically established means.

Test Performed by: Inter Science Institute
 944 West Hyde Park
 Inglewood, CA 90302

* PERFORMING SITE

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