

1-800-533-1710

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| PATIENT NAME TESTING, 91994 | | PATIENT NUMBER L3MRNW3906060 | | AGE 50 | SEX F | ACCESSION # W3906060 |
| ORDERING PHYSICIAN | | CLIENT ORDER # | | | ACCOUNT # LIAISONS | |
| COLLECTION 08/27/10 11:54 A | RECEIVED 08/27/10 11:54 A | REPORT PRINTED 08/30/10 10:13 A | | SPECIMEN INFORMATION DATE OF BIRTH: 6/19/1960 | | |
| DATE TIME | DATE TIME | DATE TIME | | | | |
| Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202 | | | | | | |

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| TEST REQUESTED | HI LO | REF RANGE | PERFORM SITE * |
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Amphotericin B (AMB)

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| Source | Nares right | REF |
| Received as | Paecilomyces lilacinus | REF |
| Result | >16 ug/mL | REF |
| Interpretation | | REF |

No Established Guidelines

 Test Performed by: U.T. Health Science Ctr San Antonio
 7703 Floyd Curl Drive
 Department of Pathology
 Fungus Lab
 San Antonio, TX 78229-3900

* PERFORMING SITE

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| PATIENT NAME TESTING, 91994 | ORDER STATUS Final | COLLECTION DATE AND TIME 08/27/10 11:54 A |
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