

1-800-533-1710

PATIENT NAME TESTING, 57140		PATIENT NUMBER L3MRNW3747457		AGE 49	SEX F	ACCESSION # W3747457
ORDERING PHYSICIAN		CLIENT ORDER #			ACCOUNT # LIAISONS	
COLLECTION 05/17/10 04:11 P DATE TIME	RECEIVED 05/17/10 04:11 P DATE TIME	REPORT PRINTED 05/18/10 01:56 P DATE TIME		SPECIMEN INFORMATION DATE OF BIRTH: 6/19/1960		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
Propoxyphene (Darvon)				
Propoxyphene	L	100	ng/mL 200 - 800	REF
Norpropoxyphene		500	ng/mL 200 - 2200	REF
Propoxyphene + Norpropoxyphene		600	ng/mL 400 - 3000	REF
Test Performed by: Medtox Laboratories, Inc. 402 W. County Road D St. Paul, MN 55112				

* PERFORMING SITE

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