

Patient Name SAMPLEREP, HIVFA A	Patient ID SA00046031	Age 40	Gender F	Order # SA00046031
Ordering Phys				DOB 09/28/1971
Client Order # SA00046031	Account Information			Report Notes
Collected 06/06/2012 09:30	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER, MN 55901			
Printed 09/25/2012 14:58				

Test	Flag	Results	Unit	Reference Value	Perform Site*
HIV-1 Ab Confirm by IFA, S	AB	Positive		REPORTED 09/25/2012 10:28 Negative	SDL
REPORTABLE DISEASE. The U.S. Association of Public Health Laboratories recommends verification of positive test results for the diagnosis of HIV infection. A second specimen should be submitted for testing to verify all such positive results.					

* Performing Site:

SDL	Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901	Lab Director:
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Patient Name SAMPLEREP, HIVFA A	Collection Date and Time 06/06/2012 09:30	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT