

Patient Name SAMPLEREP,PTOX A	Patient ID SA00050339	Age 46	Gender F	Order # SA00050339
Ordering Phys				DOB 06/10/1966
Client Order # SA00050339	Account Information			Report Notes
Collected 11/03/2012 23:00	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER,MN 55901			
Printed 11/05/2012 10:22				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Toxoplasma gondii PCR				REPORTED 11/05/2012 09:08	
Specimen Source		CEREBROSPINAL FLUID			MCR
Toxoplasma gondii PCR	AB	Positive		Negative	MCR
Laboratory developed test.					

* Performing Site:

MCR	Mayo Clinic Laboratories - Rochester Main Campus 200 First St SW Rochester, MN 55905	Lab Director:
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Patient Name SAMPLEREP,PTOX A	Collection Date and Time 11/03/2012 23:00	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT