



Patient ID <b>SA00054987</b>	Patient Name <b>SAMPLEREPORT, CABB A</b>	Birth Date <b>1966-06-10</b>	Gender <b>F</b>	Age <b>46</b>
Order Number <b>SA00054987</b>	Client Order Number <b>SA00054987</b>	Ordering Physician <b>Client, Client</b>	Report Notes	
Account Information <b>C7028846 DLMP Rochester</b>		Collected <b>12 Mar 2013 00:00</b>		

**Cabbage, IgE**

SDL

≥100 kU/L

Class 6 (Strongly Positive ≥100)

**Received:** 17 Apr 2013 10:46

**Reported:** 17 Apr 2013 10:46

QA Environment

**Performing Site Legend**

Code	Laboratory	Address
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901