



Patient ID <b>0000180960</b>	Patient Name <b>SAMPLEREPORT, TCPT</b>	Birth Date <b>1966-06-10</b>	Gender <b>F</b>	Age <b>46</b>
Order Number <b>0000180960</b>	Client Order Number <b>0000180960</b>	Ordering Physician ,	Report Notes	
Account Information <b>C7028846 DLMP Rochester</b>		Collected <b>14 Mar 2013 22:40</b>		

**Trichophyton Rubrum, IgE**

SDL

<0.35 kU/L

Class 0 (Negative <0.35)

**Received:** 14 Mar 2013 22:40

**Reported:** 12 Jun 2013 11:06

QA Environment

**Performing Site Legend**

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