

<b>Patient Name</b> TESTING,505345	<b>Patient ID</b>	<b>Age</b>	<b>Gender</b>	<b>Order #</b> W2761904
<b>Ordering Phys</b>		<b>DOB</b>		
<b>Client Order #</b> W2761904	<b>Account Information</b> C7999998-STUSTEST 200 FIRST STREET SW ROCHESTER, MN 55901  (507)266-5730	<b>Report Notes</b>		
<b>Collected</b> 09/29/2009 06:00				
<b>Printed</b> 09/29/2009 11:19				

Test	Flag	Results	Unit	Reference Value	Perform Site*
<b>Drug of Abuse, Propoxyphene, U</b> Propoxyphene		Positive	ng/mL	REPORTED 09/29/2009 11:07 Cutoff: 300	NEL
Drug confirmation ordered by reflex. Specific gravity >1.030, specimen unusually concentrated. Results from this test are presumptive; for positive results refer to the corresponding drug confirmation for the definitive result.  This report is intended for use in clinical monitoring and management of patients. It is not intended for use in employment-related drug testing.					

\* Performing Site:

NEL	Mayo Medical Laboratories New England 160 Dascomb Road Andover, MA 01810	Lab Director: Lynn A. Cheryk, Ph.D.
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<b>Patient Name</b> TESTING,505345	<b>Collection Date and Time</b> 09/29/2009 06:00	<b>Report Status</b> Final
Page 1 of 1		** End of Report **

\* Report times for Mayo performed tests are CST/CDT