

Patient Name TESTING,8029	Patient ID	Age	Gender	Order # W3073610
Ordering Phys		DOB		
Client Order # W3073610	Account Information C7999998-STUSTEST 200 FIRST STREET SW ROCHESTER, MN 55901	Report Notes		
Collected 10/29/2009 06:00				
Printed 10/29/2009 12:52	(507)266-5730			

Test	Flag	Results	Unit	Reference Value	Perform Site*
Phosphorus, BF Fluid Type Synovial		3.4	mg/dL	REPORTED 10/29/2009 10:50 Not established	MCR MCR

* Performing Site:

MCR	Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905	Lab Director:
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Patient Name TESTING,8029	Collection Date and Time 10/29/2009 06:00	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT