



Testmaster Testing
3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 334-988-9533-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 002014		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex F		Fasting	
Patient Address				Additional Information			
				NORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	NPI
						Physician ID	

Tests Ordered							
Folate (Folic Acid), Serum							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Folate (Folic Acid), Serum					
Folate (Folic Acid), Serum	5.2		ng/mL	>3.0	01
Note:					01

A serum folate concentration of less than 3.1 ng/mL is considered to represent clinical deficiency.

01	\$\$	Testmaster Testing	Dir: Report Testing, PhD
		3060 S Church Street, Burlington, NC 27215	
For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762			

SAMPLE, 002014		334-988-9533-0	Seq # 0000
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12/01/16 08:37 ET

DUPLICATE FINAL REPORT

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Testmaster Testing
3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 334-988-9534-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 002014		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex F		Fasting	
Patient Address				Additional Information			
				ABNORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	NPI
						Physician ID	

Tests Ordered							
Folate (Folic Acid), Serum							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Folate (Folic Acid), Serum					
Folate (Folic Acid), Serum	19.4		ng/mL	>3.0	01
Note:					01

A serum folate concentration of less than 3.1 ng/mL is considered to represent clinical deficiency.

01	\$\$	Testmaster Testing	Dir: Report Testing, PhD
		3060 S Church Street, Burlington, NC 27215	
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SAMPLE, 002014		334-988-9534-0	Seq # 0000
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