



Testmaster Testing
3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 236-988-3229-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE REPORT				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 096719		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 36/07/13		Date of Birth 01/10/80		Sex F		Fasting	
Patient Address				Additional Information			
				NORMAL REPORT			
Date and Time Collected 08/23/16 00:00		Date Entered 08/23/16		Date and Time Reported		Physician Name	Physician ID

Tests Ordered							
Candida Antibodies, Qual							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Candida Antibodies, Qual	Negative			Negative	01

01	BN	LabCorp Burlington	Dir: William F Hancock, MD
		1447 York Court, Burlington, NC 27215-3361	
For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762			

SAMPLE REPORT, 096719		236-988-3229-0	Seq # 0000
------------------------------	--	-----------------------	------------

09/06/16 15:23 ET

DUPLICATE FINAL REPORT

Page 1 of 1

This document contains private and confidential health information protected by state and federal law.

©2004-16 Laboratory Corporation of America ® Holdings

If you have received this document in error, please call 800-222-7566

All Rights Reserved

DOC1 Ver: 1.49



Testmaster Testing
3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 236-988-3230-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE REPORT				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 096719		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 36/07/13		Date of Birth 01/10/80		Sex F	Fasting		
Patient Address				Additional Information			
				ABNORMAL REPORT			
Date and Time Collected 08/23/16 00:00		Date Entered 08/23/16		Date and Time Reported		Physician Name	Physician ID

Tests Ordered							
Candida Antibodies, Qual							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Candida Antibodies, Qual	Positive	Abnormal		Negative	01

01	BN	LabCorp Burlington	Dir: William F Hancock, MD
		1447 York Court, Burlington, NC 27215-3361	
For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762			

SAMPLE REPORT, 096719		236-988-3230-0	Seq # 0000
------------------------------	--	-----------------------	------------

09/06/16 15:23 ET

DUPLICATE FINAL REPORT

Page 1 of 1

This document contains private and confidential health information protected by state and federal law.

©2004-16 Laboratory Corporation of America ® Holdings

If you have received this document in error, please call 800-222-7566

All Rights Reserved

DOC1 Ver: 1.49