

Patient ID:  
Specimen ID:  
DOB:  
Age:  
Sex:

## Patient Report

Ordering Physician:



Ordered Items: **Chain-of-Custody Protocol; 2nd Sample Handling; PSC Specimen Collection; Ethanol, Urine**

Date Collected:                      Date Received:                      Date Reported:                      Fasting:

### General Comments & Additional Information

Clinical Info:  
Clinical Info:  
Reason for testing:  
Collectors Name:  
Collectors Phone #:  
MRO Name from CCF:

### Chain-of-Custody Protocol

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Chain-of-Custody Protocol <sup>01</sup>	Performed			

### 2nd Sample Handling

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
2nd Sample Handling <sup>01</sup>	.			

Split specimen bottle has been received.

### Ethanol, Urine

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Ethanol, Urine <sup>01</sup>	Negative		%	Cutoff=0.020

**Disclaimer**  
The Previous Result is listed for the most recent test performed by Labcorp in the past 3 years where there is sufficient patient demographic data to match the result to the patient.

**Icon Legend**  
▲ Out of reference range    ■ Critical or Alert

### Performing Labs

#### Patient Details

Phone:  
Date of Birth:  
Age:  
Sex:  
Patient ID:  
Alternate Patient ID:

#### Physician Details

**Request A Test, LTD.**  
**7027 Mill Road Suite 201, BRECKSVILLE, OH,**  
**44141**  
  
Phone: **888-732-2348**  
  
Physician ID:  
NPI:

#### Specimen Details

Specimen ID:  
Control ID:  
Alternate Control Number:  
Date Collected:  
Date Received:  
Date Entered:  
Date Reported:  
Rte: