Patient Report DOB:

Patient ID: Age: Specimen ID: Sex:

Ordering Physician:



Ordered Items: Aldosterone LCMS, Serum; Drawing Fee

Date Collected: Date Reported: Fasting: Date Received:

Aldosterone LCMS, Serum

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Aldosterone ^{A, 01}	5.1		ng/dL	0.0-30.0

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend

Out of Reference Range Critical or Alert

Comments

A: This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug Administration.

Performing Labs

Patient Details Physician Details Specimen Details

Specimen ID: **Request A Test** Control ID:

Phone: 7027 Mill Road Suite 201, BRECKSVILLE, OH, Alternate Control Number: Date Collected:

Date of Birth: 44141

Age: Date Received: Sex: Phone: 888-732-2348 Date Entered: Patient ID: Physician ID:

Date Reported: Alternate Patient ID: NPI: Rte: