





Patient Information	Specimen Information	Client Information
DOB: AGE: Gender: Fasting: Y Phone: Patient ID: Health ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

COMMENTS: FASTING:YES

Test Name In Range Out Of Range Reference Range Lab
ALPHA-1-ANTITRYPSIN ON 106 83-199 mg/dL EN

PERFORMING SITE:

EN QUEST DIAGNOSTICS-WEST HILLS, 8401 FALLBROOK AVENUE, WEST HILLS, CA 91304-3226 Laboratory Director: TAB TOOCHINDA,MD, CLIA: 05D0642827