

Patient ID:
Specimen ID: :

DOB:
Age:
Sex:

Patient Report

Ordering Physician:



Ordered Items: **Amylase Isoenzymes**

Date Collected:

Date Received:

Date Reported:

Fasting:

Amylase Isoenzymes

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|-------------------------------------|-------------------------|--------------------------|-------|--------------------|
| Amylase ⁰¹ | 81 | | U/L | 31-110 |
| Pancreatic Amylase, S ⁰² | 41 | | U/L | 14-55 |
| Salivary Amyl. Calc. | 40 | | U/L | 11-83 |



Date Created and Stored

Final Report