

Specimen Number	Patient ID	Control Number	Account Number	Account Phone Number	Route
Patient Last Name			Account Address		
Patient First Name		Patient Middle Name			
Patient SS#	Patient Phone	Total Volume			
Age (Y/M/D)	Date of Birth	Sex	Fasting		
Patient Address			Additional Information		
Date and Time Collected	Date Entered	Date and Time Reported	Physician Name	NPI	Physician ID

C-Reactive Protein, Cardiac; Venipuncture	Tests Ordered
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TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
C-Reactive Protein, Cardiac	1.09		mg/L	0.00 - 3.00	02
	Relative Risk for Future Cardiovascular Event				
			Low	<1.00	
			Average	1.00 - 3.00	
			High	>3.00	

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