

Specimen ID:
 Control ID:

Acct #:

Phone:

Rte:


Patient Details

 DOB:
 Age(y/m/d):
 Gender:
 Patient ID:

Specimen Details

 Date collected:
 Date received:
 Date entered:
 Date reported:

Physician Details

 Ordering:
 Referring:
 ID:
 NPI:

General Comments & Additional Information

 Alternate Control Number:
 Total Volume:

 Alternate Patient ID:
 Fasting:

Ordered Items

Copper, Serum

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Copper, Serum ^A	106	High	ug/dL	80-158 Detection Limit = 5	01

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.