

Patient ID:                      DOB:  
Specimen ID:                    Age:  
  Sex:

# Patient Report



Ordering Physician:

## Ordered Items: **Dihydrotestosterone; Drawing Fee**

Date Collected:	Date Received:	Date Reported:	Fasting: <b>No</b>
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## Dihydrotestosterone

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Dihydrotestosterone <sup>01</sup>	6.9		ng/dL	

This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.  
Reference Range:  
Adult Female: 4 - 22

**Disclaimer**  
The Previous Result is listed for the most recent test performed by Labcorp in the past 3 years where there is sufficient patient demographic data to match the result to the patient.

**Icon Legend**  
▲ Out of reference range    ■ Critical or Alert

### Performing Labs

#### Patient Details

Phone:  
Date of Birth:  
Age:  
Sex:  
Patient ID:  
Alternate Patient ID:

#### Physician Details

**Request A Test, LTD.**  
**7027 Mill Road Suite 201, BRECKSVILLE, OH, 44141**  
  
Phone: **888-732-2348**  
Physician ID:  
NPI:

#### Specimen Details

Specimen ID:  
Control ID:  
Alternate Control Number:  
Date Collected:  
Date Received:  
Date Entered:  
Date Reported:  
Rte: