

Laboratory Report DONOR INFORMATION

CLIENT INFORMATION

SPECIMEN INFORMATION

Requisition #:

Name:

Accession #:

Primary ID:

Collected:

Reported:

Reason:

Received:

Collection

Site:

Specimen ID:

Seals Intact: Yes Tests Ordered: 19533N (SAP 7-50/2K +ALC/NIT)

Urine Specimen Validity Testing

Acceptable Range >/= 20 mg/dL

4.5-8.9

CREATININE 24.7 mg/dL 6.0 OXIDIZING ADULTERANTS Negative

Urine Substance Abuse Panel Initial MS Confirm Test Level Test Level 1000 ng/mL**AMPHETAMINES** 500 ng/mL Negative 300 ng/mL 200 ng/mL **BARBITURATES** Negative 200 ng/mL **BENZODIAZEPINES** Negative 300 ng/mL 150 ng/mL 15 ng/mL COCAINE METABOLITES Negative 300 ng/mL MARIJUANA METABOLITES Negative 50 ng/mL 2000 ng/mL 2000 ng/mL **OPIATES** Negative 25 ng/mL .02 * (1) Negative 25 ng/mL PHENCYCLIDINE ALCOHOL, ETHYL (U) Negative

CERTIFYING TECHNICIAN/SCIENTIST: KPVM01

SPECIMEN RECEIVED AND PROCESSED IN THE NORRISTOWN DHHS CERTIFIED LABORATORY.

LAB: Quest Diagnostics-Norristown

400 Egypt Rd Norristown PA 19403

>> END OF REPORT <<

^{* (1)} Test confirmed by GC