

Laboratory Report

SPECIMEN INFORMATION DONOR INFORMATION **CLIENT INFORMATION**

Name: Requisition #:

REQUEST A TEST LTD Accession #: Primary ID: 7027 MILL RD STE 201 Collected: Reason: BRECKSVILLE, OH 44141 Received: Collection

Site: Reported:

Specimen ID:

Seals Intact: Yes

Split Specimen Received: Y Tests Ordered: 35186N (SAP 9-50 W/NIT)

Urine Specimen Validity Testing Acceptable Range

>/= 20 mg/dL 4.5-8.9 CREATININE 146.1 mg/dL pH OXIDIZING ADULTERANTS 6.1 Negative

Urine Substance Abuse Panel Initial MS Confirm Test Level Test Level AMPHETAMINE/METHAMPHETAMINE Negative 1000 ng/mL 500 ng/mL 300 ng/mL 300 ng/mL 300 ng/mL 300 ng/mL 50 ng/mL 300 ng/mL 2000 ng/mL 25 ng/mL 300 ng/mL 200 ng/mL 200 ng/mL 150 ng/mL 15 ng/mL 200 ng/mL 200 ng/mL 25 ng/mL 200 ng/mL BARBITURATES BENZODIAZEPINES COCAINE METABOLITE (BZE) Negative Negative Negative Negative MARIJUANA METABOLITE (THCA) METHADONE Negative CODEINE/MORPHINE Negative PHENCYCLIDINE PROPOXYPHENE Negative Negative

CERTIFYING TECHNICIAN/SCIENTIST: KPVC02

SPECIMEN RECEIVED AND PROCESSED IN THE NORRISTOWN DHHS CERTIFIED LABORATORY.

LAB: Quest Diagnostics Incorporated-Norrist

400 Egypt Rd Norristown PA 19403

>> END OF REPORT <<