

Specimen ID:
Control ID:

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

Reason for testing:
Collectors Name:
Collectors Phone #:
MRO Name from CCF:

Clinical Info:

Clinical Info:

Ordered Items

Chain-of-Custody Protocol; 2nd Sample Handling; PSC Specimen Collection; 725675 U9-Bund+Alc+SVT

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Chain-of-Custody Protocol					
	Performed				01
725675 U9-Bund+Alc+SVT					
.					01
Amphetamines, Urine	Negative		ng/mL	Cutoff=1000	01
Amphetamine test includes Amphetamine and Methamphetamine.					
Barbiturates	Negative		ng/mL	Cutoff=200	01
Benzodiazepines	Negative		ng/mL	Cutoff=300	01
Cannabinoid	Negative		ng/mL	Cutoff=50	01
Cocaine (Metab.)	Negative		ng/mL	Cutoff=300	01
Opiates	Negative		ng/mL	Cutoff=300	01
Opiate test includes Codeine and Morphine only.					
6-Acetylmorphine, Urine	Negative		ng/mL	Cutoff=10	01
Phencyclidine	Negative		ng/mL	Cutoff=25	01
Methadone Screen, Urine	Negative		ng/mL	Cutoff=300	01
Ethanol, Urine	Negative		%	Cutoff=0.020	01
Creatinine, Urine	41.0		mg/dL	20.0-300.0	01
Nitrite, Urine	Negative		mcg/mL	Cutoff=200	01
pH, Urine	5.7			4.5-8.9	01

FINAL REPORT

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