

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 CCI:

Clinical Info:

Clinical Info:

Clinical Info:

Ordered Items

Chain-of-Custody Protocol; PSC Specimen Collection; Buprenorphine/Norbup, WB

TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Chain-of-Custody Protocol						
	Performed					01
Buprenorphine/Norbup, WB						
Buprenorphine	<0.10	Low	ng/mL	1.00-10.00		02
Norbuprenorphine	<0.10		ng/mL	Not Estab.		02
This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.						

