

Patient Report



Specimen ID:
Control ID:

Request A Test, LTD.
7027 Mill Road Suite 201
BRECKSVILLE OH 44141

Phone: (888) 732-2348

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:
Clinical Info:

Ordered Items

Chain-of-Custody Protocol; 2nd Sample Handling; PSC Specimen Collection; Fentanyl, Urine

TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Chain-of-Custody Protocol	Performed					01
2nd Sample Handling	Split specimen bottle has been received.					01
Fentanyl, Urine						01
Fentanyl, Urine	Negative		pg/mL	Cutoff=2000		01
Test includes Fentanyl and Norfentanyl This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.						

For inquiries, the physician may contact **Branch:**

Lab:

Date Issued:

FINAL REPORT

Page 1 of 1

This document contains private and confidential health information protected by state and federal law.
If you have received this document in error, please call 800-833-3984

© 1995-2024 Laboratory Corporation of America® Holdings
All Rights Reserved - Enterprise Report Version: 1.00

