

Specimen ID:
Control ID:

Acct #:

Phone:

Rte:

**Patient Details**DOB:
Age(y/m/d):
Gender: SSN:
Patient ID:**Specimen Details**Date collected:
Date received:
Date entered:
Date reported:**Physician Details**Ordering:
Referring:
ID:
NPI:**General Comments & Additional Information**

Clinical Info: NORMAL

Ordered Items

Gabapentin (Neurontin), Serum

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Gabapentin (Neurontin), Serum					
Gabapentin, Serum	8.4		ug/mL	4.0 - 16.0	01
				Detection Limit = 1.0	