DOB:

Patient ID: Specimen ID:

Age: Sex: Account Number:

Ordering Physician:

Ordered Items: Endomysial Antibody IgA; Venipuncture

Date Received: Date Reported: Fasting: Date Collected:

Endomysial Antibody IgA

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Endomysial Antibody IgA ⁰¹	Negative			Negative

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 3 years where there is sufficient patient demographic data to match the result to the patient.

Icon Legend

▲ Out of reference range

Critical or Alert

Performing Labs

Physician Details Patient Details Specimen Details

Specimen ID: Control ID:

Alternate Control Number:

Phone: Date of Birth: Account Number: Date Collected: Age: Physician ID: Date Received: NPI: Sex: Date Entered: Patient ID: Date Reported:

Alternate Patient ID:

Phone:

Rte:

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