

Patient ID: Specimen ID:

DOB:  
Age:  
Sex:

## Patient Report

Ordering Physician:



Ordered Items: **Fluoride, Urine**

Date Collected:	Date Received:	Date Reported:	Fasting:
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### Fluoride, Urine

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Fluoride, Urine <sup>01</sup>	0.8		mg/L Detection Limit = 0.2	0.2-3.2
Creatinine(Crt),U <sup>01</sup>	2.35		g/L Detection Limit = 0.10	0.30-3.00
Fluoride/Crt Ratio	0.3		mg/g creat Environmental Exposure: 0.1 - 0.5 Occupational Exposure: BEI 10.0	0.0-3.0

#### 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

#### Patient Details

Phone:  
Date of Birth: Age:  
Sex:  
Patient ID:  
Alternate Patient ID:

#### Physician Details

Phone:  
Physician ID:  
NPI:

#### Specimen Details

Specimen ID:  
Control ID:  
Alternate Control Number:  
Date Collected:  
Date Received:  
Date Entered:  
Date Reported:  
Rte: