	DOB:	Patient Report	labcorp
Patient ID: Specimen ID:	Age: Sex:	Ordering Physician:	

Ordered Items: GGT; Venipuncture

Date Collected:	Date Received:	Date Reported:	Fasting:	
GGT				
Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
GGT ⁰¹	24		IU/L	0-65

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: Phone: Date Collected: Physician ID: Date of Birth: Date Received: NPI: Age: Date Entered: Sex: Date Reported: Patient ID: Rte: Alternate Patient ID:

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