Patient Report

Patient ID: Specimen ID: Age:

Age: Sex:

DOB:

Ordering Physician:



Ordered Items: GAD-65 Autoantibody; Venipuncture

Date Collected:	Date Received:	Date Reported:	Fasting:

GAD-65 Autoantibody

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
GAD-65 ⁰¹	<5.0		U/mL	0.0-5.0

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

Patient ID:

Patient Details Physician Details Specimen Details

Specimen ID:

Rte:

Control ID:

Phone: Phone: Alternate Control Number: Account Number: Date Collected:

Date of Birth:

Age:
Sex:

Account Number:
Date Collected:
Physician ID:
Date Received:
Date Entered:

Date Reported:

Alternate Patient ID:

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