

Patient Information	Specimen Information	Client Information
<p>DOB:                      AGE:</p> <p>Gender:</p> <p>Phone:</p> <p>Patient ID:</p> <p>Health ID:</p>	<p>Specimen:    ↓</p> <p>Requisition: ↓</p> <p>Lab Ref #:</p> <p>Collected:  ↓</p> <p>Received:    ↓</p> <p>Reported:    ↓</p>	

Test Name	In Range	Out Of Range	Reference Range	Lab
LIPOPROTEIN (a)	18		<75 nmol/L	EN