



Patient Information	Specimen Information	Client Information
DOB: AGE: Gender: Phone: Patient ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

COMMENTS: FASTING:YES

 Test Name
 In Range
 Out Of Range
 Reference Range
 Lab

 MAGNESIUM
 2.3
 1.5-2.5 mg/dL
 AT