DOB:

Patient Report

Patient ID: Age: Ordering Physician:



Ordered Items: Melanocyte Stimulating Hormone; Venipuncture

Date Collected: Date Received: Date Reported: Fasting:

Melanocyte Stimulating Hormone

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Melanocyte Stimulating				
Hormone ⁰¹	33		pg/mL	0-40
	manufacturer. The performan not been established. Resu	or research purposes only by nce characteristics of this p lts should not be used as a d ion of the diagnosis by anoth uct or procedure.	roduct have liagnostic	

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

Age:

Performing Labs

Patient Details Physician Details

Request A Test, LTD.

Phone: 7027 Mill Road Suite 201, BRECKSVILLE, OH,

Date of Birth:

Sex: Phone: Patient ID: Physician ID:

Alternate Patient ID: NPI:

Specimen Details

Specimen ID: Control ID:

Alternate Control Number:

Date Collected: Date Received: Date Entered: Date Reported:

Rte:

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