



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

COMMENTS:              FASTING:NO

Test Name	In Range	Out Of Range	Reference Range	Lab
HETEROPHILE, MONO SCREEN	NEGATIVE		NEGATIVE	AT

PERFORMING SITE:

AT      QUEST DIAGNOSTICS-ATLANTA, 1777 MONTREAL CIRCLE, TUCKER, GA 30084-6802 Laboratory Director: WILLIAM M MILLER, MD, CLIA: 11D0255931