Patient Report

Patient ID: Specimen ID:

Age: Sex:

DOB:



Ordered Items: Allergens, Perennial; Venipuncture

Date Collected: Date Received: Date Reported: Fasting:

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interv
Class Description 01	Levels of Specific IgE	Class Description of Class		
	< 0.10			
	0.10 - 0.31	0/I Equivocal/Low		
	0.32 - 0.55	I Low		
	0.56 - 1.40	II Moderate		
	1.41 - 3.90 3.91 - 19.00	III High IV Very High		
	19.01 - 100.00	V Very High		
	>100.00	VI Very High		
Environmentals: 02				
D001-IgE D pteronyssinus 01	<0.10		kU/L	Class 0
D002-IgE D farinae ⁰¹	<0.10		kU/L	Class 0
E001-IgE Cat Dander ⁰¹	<0.10		kU/L	Class 0
E005-IgE Dog Dander ⁰¹	<0.10		kU/L	Class 0
E004-IgE Cow Dander ⁰¹	<0.10		kU/L	Class 0
E070-IgE Goose Feathers 01	<0.10		kU/L	Class 0
E085-IgE Chicken Feathers 01	<0.10		kU/L	Class 0
E086-IgE Duck Feathers 01	<0.10		kU/L	Class 0
M001-IgE Penicillium				
chrysogen 01	<0.10		kU/L	Class 0
M002-IgE Cladosporium				
herbarum 01	<0.10		kU/L	Class 0
M003-IgE Aspergillus				
fumigatus ⁰¹	<0.10		kU/L	Class 0
M004-IgE Mucor racemosus 01	<0.10		kU/L	Class 0
M005-IgE Candida albicans 01	<0.10		kU/L	Class 0
M006-IgE Alternaria alternata 01	<0.10		kU/L	Class 0
M008-IgE Setomelanomma				
rostrat ⁰¹	<0.10		kU/L	Class 0
M012-IgE Aureobasidi				
pullulans 01	<0.10		kU/L	Class 0
M013-IgE Phoma betae 01	<0.10		kU/L	Class 0
M010-IgE Stemphylium				
herbarum 01	<0.10		kU/L	Class 0
E072-IgE Mouse Urine 01	<0.10		kU/L	Class 0

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Patient Report

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Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
*				
	characteristics determined b cleared or approved by the U The FDA has determined that necessary. These tests are	developed and had performand y LabCorp. These tests have .S. Food and Drug Administrat such clearance or approval is used for clinical purposes. vestigational or for research	not been tion. s not These tests	

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend

Performing Labs

Patient Details Physician Details

Request A Test, LTD.
Phone: 7027 Mill Road Suite 201, BRECKSVILLE, OH,
44141

Date of Birth: 441
Age:

Sex: Phone: 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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