

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

**COMMENTS:**        SPLIT 11/22/2019 FROM 0004110  
FASTING:NO

**Urine Volume (mL) / Duration (HR):**                      3000/24

Test Name	In Range	Out Of Range	Reference Range	Lab
POTASSIUM W/O CREATININE, 24 HOUR URINE				TP
POTASSIUM, 24 HOUR URINE	99		22-160 mmol/24 h	
Urine Volume (mL) / Duration (HR):			3000/24	

**PERFORMING SITE:**

TP      QUEST DIAGNOSTICS-TAMPA, 4225 E. FOWLER AVE, TAMPA, FL 33617-2026 Laboratory Director: GLEN L HORTIN,MD,PHD, CLIA: 10D0291120