DOB:

Patient Report



Patient ID: Specimen ID:

Age: Sex:

Ordered Items: Pregnancy Test, Urine

Date Collected: Date Received: Date Reported: Fasting:

Pregnancy Test, Urine

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Pregnancy Test, Urine 01	Negative			Negative

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 Specimen Details Specimen ID:

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

44141 Date of Birth:

NPI:

Age: Phone: Sex: Patient ID: Physician ID: Alternate Patient ID:

Alternate Control Number: Date Collected: Date Received:

Date Entered: Date Reported: Rte:

labcorp Final Report Page 1 of 1