



Patient Information	Specimen Information	Client Information
DOB: AGE: Gender: Phone: Patient ID: Health ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	REQUEST A TEST - PW N HEALTH 7027 MILL RD STE 201 BRECKSVILLE, OH 44141-1852

Test Name	In Range	Out Of Range	Reference Range	Lab
HCG, QL, URINE	NEGATIVE		NEGATIVE	CB

PERFORMING SITE:

CB QUEST DIAGNOSTICS WOOD DALE, 1355 MITTEL BOULEVARD, WOOD DALE, IL 60191-1024 Laboratory Director: ANTHONY V. THOMAS, MD, CLIA: 14D0417052