DOB:

**Patient Report** 

Age: Sex: Account Number:



Ordered Items: Protein Total, Qn, 24-Hr Urine

Date Collected: Date Received: Date Reported: Fasting:

## **General Comments & Additional Information**

Total Volume: 1650 ml

Patient ID: Specimen ID:

## Protein Total, Qn, 24-Hr Urine

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Protein,Total,Urine <sup>01</sup>	<4.0 **Verified by repeat analysi	S**	mg/dL	Not Estab.
Prot,24hr calculated	<66		mg/24 hr	30-150

## 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,

Date of Birth:

Age: Sex:

Patient ID: Account Number:

Alternate Patient ID: Physician ID:

NPI:

Phone:

Specimen Details Specimen ID:

Control ID:

Alternate Control Number:

Date Collected: Date Received: Date Entered: Date Reported:

Rte:

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