

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

COMMENTS: FASTING:NO

Test Name	In Ran ge	Out Of Range	Reference Range	Lab MI		
SODIUM W/O CREATININE, RANDOM URINE	50		28-272 mmol/L	MI		
SODIUM RANDOM URINE						