

Patient Report

Specimen ID:
Control ID:

Phone:

Rte:

Request A Test, LTD. 7027 Mill Road Suite 201 BRECKSVILLE OH 44141

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Patient Details DOB: Age(y/m/d): Gender: Patient ID: Specimen Details
Date collected:
Date received:
Date entered:
Date reported:

Physician Details Ordering: Referring:

ID: NPI:

General Comments & Additional Information

Alternate Control Number: Total Volume: Not Provided Alternate Patient ID: Fasting:

Ordered Items

Zinc, Plasma or Serum; Venipuncture

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Zinc, Plasma or Serum A	83		ug/dL	44-115 tection Limit = 5	01
	Please note reference interval change				

Comments:

A This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug Administration.

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For inquiries, the physician may contact Branch: 800-762-4344 Lab: 800-349-8586