**Patient Report** 

**Rte:** 00

Specimen ID: 057-374-0001-0 Control ID:

## SAMPLE REPORT, 006530

Acct #: 90000045 Phone: (336) 436-8645 Test Master Test Account 3060 South Church Street Burlington NC 27215

## Ռովոիդովիկուկկակուհկոկրիդիկիկիներել

Patient Details DOB: Age(y/m/d): 000/00/00 Gender: N SSN: Patient ID: Ordered Items Hepatitis B Surf Ab Quant	Specimen Details Date collected: 02/2 Date received: 02/2 Date entered: 02/2 Date reported: 02/2	7/2018 7/2018		Orde	sician Details pring: rring:		
TESTS	RESULT	FLAG	UN	ITS	REFERENCE	INTERVAL	LAB
Incons	25.2 cus of Immunity sistent with Im stent with Immu	munity	mI	U/mL	Anti-HE	ty>9.9 3s Level ) - 9.9 >9.9	01

	01	HD	Houston 7207 North Gessner, Houston, TX 77040-3143	Dir: Kyle Eskue, MD		
-	For inquiries, the physician may contact Branch: 800-222-7566 Lab: 713-856-8288					

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If you have received this document in error, please call 713-856-8288