## **LabCorp**Laboratory Corporation of America

## LabCorp Burlington 1447 York Court Burlington, NC 27215

					n, NC 27215	P	Phone: 336–584–5171		
Specimen Number Patient ID Control Number 12345678901					Account Number 9100130	Account Phone Number 336-436-8288	Account Delivery Route 50		
Patient Last Name BITTENCOURT					Account Address ISO PROGRAMMING DEPT				
Patient First Name Patient Middle Name <b>JOE</b> D				Middle Name	JOE BITTEN				
Patient SS# Patient Phone Total Volume  ***-**-2777 336-380-0701 1 ml				3060 S CHURCH ST BURLINGTON NC 27215-5820					
Age (Y/M/D) 31/05/02		te of Birth /10/72	Sex M	Fasting Yes	BURLINGTON NC 2/213-3020				
Patient Address  2504 MOUNT HOPE CHURCH ROAD Whitsett NC 27377-1234						Additional Information U	PIN: 666666666		
Date and Time Collect 11/12/03 10:		Date Entered 11/12/03		e and Time Reported 22/06 15:10ET	Physician Name NPI Physician ID TESTING 8888777777				

Tests Ordered

788872 10+Crt+pH+Bund; Urinalysis, Routine; Allergens(8); Basic Metabolic Panel (8); Amikacin , Serum, Peak/Trough; Varicella-Zoster Ab, IgM; Brucella abortus IgG, EIA; QA test with a very long name; Lead, Blood (Adult); Hep B Surface Ab

General Comments

COMMENTS LISTED HERE ARE PART OF THE GENERAL COMMENTS RELATIVE TO THE SPECIMEN.

DRUG	RESULT	FLAG	UNITS	SCREEN CONFIL	
788872 10+Crt+pH+Bund					
•				(ng/mL)	01
Amphetamines	Negative			1000	02
Barbiturate	Negative			300	02
Benzodiazepines	Negative			300	02
Cannabinoid	Negative			50	02
Cocaine Metabolite	Negative			300	02
Methaqualone	Negative			300	02
Opiates	Negative			2000	02
Phencyclidine	Negative			25	02
Methadone	Negative			300	02
Propoxyphene	Negative			300	02
pH, Urine	7.7				02
Creatinine, Urine	Negative		mg/dL		02
Comment:	Negative				02
Results reported for	r this specimen	are in	accordance w	ith the State o	f

Results reported for this specimen are in accordance with the State of Florida Agency for Health Care Administration (AHCA) Drug Free Workplace Standards.

TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Urinalysis, Routine	<b>a</b>					
Urinalysis Gross Ex						01
Specific Gravity 6.180		Alert	1.005 - 1			01
pН	3.3	Alert		5.0	7.5	01
Urine-Color	Negative			Υe	ellow	01
Appearance	Negative			(	Clear	01
WBC Esterase	Negative			Neg	gative	01
Protein	Negative			Negati	lve/Trace	01
Glucose	Positive	Abnormal		Neg	gative	01
Ketones	Test not performed			Neg	gative	01
BITTENCOURT, JOE	D		316-994	4-0001-0	Seq # 7609	

## DUPLICATE FINAL REPORT

**LabCorp**Laboratory Corporation of America

LabCorp Burlington 1447 York Court Burlington, NC 27215

Laboratory Corporation of	OF O		1447 Burlingt	York Court on, NC 27215			Phone: <b>336–584–5</b>	171
D.T.MMTD1G01TD		Patie	ent Name				Specimen Number	
Account Number	Patient ID	Control Number	Data or	nd Time Collected	Date Reported	Sex	316-994-0001-0 Age(Y/M/D) Date of Birth	
91000130	1 attent 1D	12345678901		2/03 10:03	08/22/06		31/05/02 06/10/7	
	TESTS	RES	ULT	FLAG	UNITS		REFERENCE INTERVAL	LAB
Occult Bl		est not per	formed				Negative	01
Bilirubin							Negative	01
		sufficient		alysis.				
	gen,Semi-Qn		0.8		mg/d	L	0.0 - 1.9	01
Nitrite,				Abnormal			Negative	01
Microscop	ic Examinat	ion Po	sitive	Abnormal				01
217	0.)							
Allergens(								03
		cific IgE k	U/I C	lass Desc	cription	of C	llass	03
		<0.05	(	)	Negative	<u> </u>		
	0.05 -	0.07	(	O/I	Equivoca	ıl		
	0.08 -		-	Ι	Increasi			
	0.16 -		-	II	levels	3		
	0.51 -			III	of			
	2.51 -				Specific			
	12.51 -			J	Antibod	ly		
F002 Milk		>100.00		VI Abnormal	1-TT /T (7	T 7 C C	III 0.51- 2.50	03
F002 Mirk				Abnormal		LASS LASS		
F004 Whea				Abnormal		LASS		
F026 Pork				Abnormal		LASS		
*F027 Bee				Abnormal		LASS		
	h/Shell Mix			Abnormal		LASS		
*F245 Egg	, Whole		1.25	Abnormal	kU/L C	LASS	III 0.51- 2.50	03
*F052 Cho	colate/Coco	a	2.35	Abnormal	kU/L C	LASS	III 0.51- 2.50	03
	bolic Panel	(8)	-1		/ 1	-	<b>6</b>	0.1
Glucose,	serum		51	Low	mg/d		65 - 99	01
<i>BUN</i> Creatinin	o Corum		0.0	Alert Low	mg/d mg/d		5 - 26 0.5 - 1.5	01 01
	e, serum inine Ratio			Abnormal	ilig/u	ш	8 - 27	01
Sodium, S			162		mEq/	Т.	135 - 145	01
Potassium				Critical	_		3.5 - 5.5	01
Chloride,			40		mmol		96 - 109	01
Carbon Di	oxide, Tota	1	5	Alert	mmol	/L	20 - 32	01
Calcium,	Serum		5.4	Critical	mg/d	L	8.5 - 10.6	01
	Serum, Pea							
Amikacin	Peak, Serum		25.0		ug/m			03
				,			on Limit = 0.8	
Amiles air	Though G		22.0				None Detected	0.3
Amikacin	Trough, Ser	шш	23.2	Alert			1.0 - 8.0 on Limit = $0.8$	03
				~ (			None Detected	
See below	:			~(	THAT	aces	, MOTIC DECECTED	01
								<u> </u>
BITTENCO	URT, JOE D				316-9	94-	0001-0 Seq # 7609	



LabCorp Burlington 1447 York Court Burlington, NC 27215

Laboratory Corporation of America			, 110 27213				330-304-317	
	Patient	Name					en Number	
BITTENCOURT, JOE D						316-99	4-0001-0	
Account Number Patient ID	Control Number		ime Collected	Date Reported	Sex	Age(Y/M/D)	Date of Birth	
91000130	12345678901	11/12/	03 10:03	08/22/06	M	31/05/02	06/10/72	
TESTS	RESUI	LT	FLAG	UNITS		REFERENCE 1	INTERVAL	LAB
Patient drug le	evel exceeds pub	olished	referen	nce range	. I	Evaluate		
clinically for	signs of potent	tial to	xicity.					
_	-		_					
Varicella-Zoster Ab	, IgM	0.75		AU		0.00	- 0.89	03
				Nega	tive	2	<0.90	
				Borde			- 1.10	
				Posi			>1.10	
				1001	C _ V (	-	, 1.10	
	**EFFECTIVE	ADRTT.	24 2006	the ref	oror	nce inter	:ral**	
	will be ch		•	Negati			<0.91	
	will be ci	langing				ine 0.91		
				Posi	CIVE	2	>1.09	
B	a ===	_		D D' 11	٠.	0	0	0.0
Brucella abortus Ig	G, EIA	5		PanBio U			- 8	03
				Equi			- 11	
				Posi	tive	2	> 11	
	_							
QA test with a very		_						
_	Test not perfo	ormed		ng/mL of	sai	m 567890	- 678912	04
For research us	se only							
- 7 -7 7 (- 7 7 )		2.0		/ 3-		0	1.0	0.0
Lead, Blood (Adult)		30	Alert	_ ug/dI			- 19	03
					nmer	ntal Expos		
				WHO			<20	
				_		nal Exposi	ure:	
				OSHA I	Lead	d Std	40	
				Det	ect:	ion Limit	= 1	
Hep B Surface Ab		54.0	High	mIU/m	L		- 8.9	03
	Status of Imm	nunity				Anti-HBs	Level	
	Transistant	 :-b						
	Inconsistent w	rcii TMM	untty				< 9.0	
	Indeterminate	_	1			9.0 -		
	Consistent with	n Immun	ity.			;	>10.9	
_								
*								

Tests with asterisk (\*) were developed and had performance characteristics determined by LabCorp. These tests have not been cleared or approved by the U.S. Food and Drug Administration.

The FDA has determined that such clearance or approval is not These tests are used for clinical purposes. These tests should not be regarded as investigational or for research.

BITTENCOURT, JOE D	316-994-0001-0	Seq # 7609

Phone: 336-584-5171



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Laboratory Corporation of	America	Burlington, NC 27215				Phone: <b>336–584–5171</b>		
	Patient Name						n Number	
BITTENCOU	RT, JOE D					316-99	4-0001-0	
Account Number	Patient ID	Control Number	Date and Time Collected	Date Reported	Sex	Age(Y/M/D)	Date of Birth	
91000130		12345678901	11/12/03 10:03	08/22/06	M	31/05/02	06/10/72	

01: BD LabCorp Burlington Dir: Jane Doe, VP 1447 York Court, Burlington, NC 27215 02: UI LabCorp OTS RTP 1904 Alexander Drive, RTP, NC 27709 03: BN LabCorp Burlington Frank Hancock, MD Dir: 1447 York Court, Burlington, NC 27215-2230 04: PO LabCorp Information Systems Dir: Lab Director, Dr 3060 S Church Street, Burlington, NC 27215 For inquiries, the physician may contact: Branch: 800-762-4344 Lab: 336-584-5171

BITTENCOURT, JOE D	316-994-0001-0	Seq # 7609