

Laboratory Service Report

1-800-533-1710

Patient Name TESTING,4993	Patient ID	Age	Gender	<b>Order #</b> W2918498
Ordering Phys		DOB		
Client Order # W2918498 Collected 10/14/2009 06:00	Account Information C7999998-STUSTEST 200 FIRST STREET SW ROCHESTER, MN 55901	Report N	lotes	
Printed 10/28/2009 11:58	(507)266-5730			

Test	Flag	Results	Unit	Reference Value	Perform Site*
Electron Microscopy			REDORTED 1	0/14/2009 08:11	
Accession Number		HR09-52947	REPORTED 1	0/14/2009 00:11	MCR
Referring Pathologist/Physician	1	111(0) 52547			MCR
Mercy, Medical Center					Here
Ref Path/Phys Address					MCR
Medical Center					Here
1111 6th Avenue					
Des Moines, IA 50314					
515-247-4439					
Fax Phone: 515-643-8911					
Specimen:					MCR
A:Consult Material					
Material:					MCR
left and right nasal - 2 we	t tissue (MS	5-09-0024926)			
SLIDE DISPOSITION:	· · · · · · · · · · · · · · · · · · ·	,			
14 EM prints (EM2009-06628)	and 32 EM p	prints (EM2009-0	6629) ret'd		
10/14/2009mjl	-				
Final Diagnosis:					MCR
EM2009-06628, left nasal (pr	rint tissue	is representati	ve and		
well-fixed. Cilia are norma	ally				
oriented relative to the ep:	ithelial sur	face. Basal bo	dies are		
normal in number and dispos	ition. Cros	s-sections of c	iliary		
axonemes show normal ciliary	y orientatic	on relative to c	entral		
microtubule pairs. Peripher		-			
normal-appearing as are rad	-	-	-		
considered normal and does n	not support	a clinical diag	nosis of		
immotile cilia syndrome.					
EM2009-06629, right nasal ()		e is representat	ive and		
well-fixed. Cilia are norma	-				
oriented relative to the ep					
normal in number and disposi					
axonemes show normal ciliary	•				
microtubule pairs. Peripher		-			
normal-appearing as are rad:	-	-	-		
considered normal and does	not support	a clinical diag	NOSIS OI		
immotile cilia syndrome. Signing Pathologist:		See Comment			MCR
	d beet D M C				MCR
10/13/2009 17:02 Interpreted Report electronically signed	-		•		
Transcribed by: mjl 10/13/20	-				
Transcribed by · mjl 10/13/20	UU9 10.30.30	,			

\* Performing Site:

MCR Mayo Clinic Dpt of Lab Med & Pathology 200 First St SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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Patient Name	<b>Collection Date and Time</b>	Report Status
TESTING,4993	10/14/2009 06:00	Final
Page 1 of 1		** End of Report **

\* Report times for Mayo performed tests are CST/CDT