

Client: Example Client ABC123  
123 Test Drive  
Salt Lake City, UT 84108  
UNITED STATES

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 12/23/1934  
**Gender:** Male  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Antigen Testing, Rh Phenotype**

ARUP test code 0013019

Probable Rh Phenotype R1R1

D (RH1) antigen: Positive  
 C (RH2) antigen: Positive  
 E (RH3) antigen: Negative  
 c (RH4) antigen: Negative  
 e (RH5) antigen: Positive

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Probable Rh Phenotype	22-258-135620	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

**H=High, L=Low, \*=Abnormal, C=Critical**

Unless otherwise indicated, testing performed at: