

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 8/25/1956
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Ammonia, Plasma

ARUP test code 0020043

Ammonia, Plasma

117 umol/L H (Ref Interval: 0-72)

Performed At: U HOSPITAL LAB (ARUP)
UNIVERSITY HOSPITAL
CLINICAL LABORATORY
SALT LAKE CITY, UT 84132
Medical Director: LAUREN NICHOLE PEARSON, DO
CLIA Number: 46D0678613

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Ammonia, Plasma	22-308-705770	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: