

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 11/18/1992  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Hepatitis A Virus Panel**

ARUP test code 0020597

Hepatitis A Antibodies, Total Negative (Ref Interval: Negative)

Hepatitis A Antibody, IgM Negative (Ref Interval: Negative)

Hepatitis A Panel Interpretation See Note

There is no serological evidence of acute or prior Hepatitis A infection or evidence of antibody response to HAV vaccination.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Hepatitis A Antibodies, Total	23-024-106057	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis A Antibody, IgM	23-024-106057	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis A Panel Interpretation	23-024-106057	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: