

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 11/18/1980  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Ceruloplasmin**

ARUP test code 0050160

Ceruloplasmin

**55 mg/dL H (Ref Interval: 17-54)**

REFERENCE INTERVAL: Ceruloplasmin

Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Ceruloplasmin	19-331-401450	11/27/2019 9:04:00 AM	11/28/2019 3:53:37 PM	11/29/2019 12:22:00 AM

END OF CHART

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

Unless otherwise indicated, testing performed at: