

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 9/17/1979  
**Gender:** Male  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Hemoglobin S, Evaluation with Reflex to RBC Solubility**

ARUP test code 0050520

Hemoglobin S, Evaluation (Sickle Cell)                      Negative                      (Ref Interval: Negative)

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Hemoglobin S, Evaluation (Sickle Cell)	20-129-108036	5/8/2020 7:04:00 AM	5/9/2020 9:29:43 AM	5/10/2020 1:18:00 PM

END OF CHART

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

Unless otherwise indicated, testing performed at:

**ARUP LABORATORIES | 800-522-2787 | aruplab.com**  
500 Chipeta Way, Salt Lake City, UT 84108-1221  
Tracy I. George, MD, Laboratory Director

Patient: Patient, Example  
ARUP Accession: 20-129-108036  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
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