

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 5/21/1989

**Gender:** Female

**Patient Identifiers:** 01234567890ABCD, 012345

**Visit Number (FIN):** 01234567890ABCD

**Collection Date:** 00/00/0000 00:00

**Transforming Growth Factor beta, Serum**

ARUP test code 0051694

Transforming Growth Factor beta, Serum

7602 pg/mL (Ref Interval: 3465-13889)

INTERPRETIVE INFORMATION: Transforming Growth Factor beta, Serum Results are intended for research purposes or in attempts to understand the pathophysiology of unusual immune or inflammatory disorders.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Transforming Growth Factor beta, Serum	20-025-401200	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