

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB** 8/21/1938

**Gender:** Male

**Patient Identifiers:** 01234567890ABCD, 012345

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

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

**Beta-2 Microglobulin, CSF**

ARUP test code 0080054

Beta-2-Microglobulin, CSF

**6.2 mg/L H (Ref Interval: 0.0-2.4)**

INTERPRETIVE INFORMATION: Beta-2-Microglobulin, CSF

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

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Beta-2-Microglobulin, CSF	20-223-132106	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