

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 10/14/2009
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Porphyryns, Total, Plasma or Serum

ARUP test code 0080429

Porphyryns, Total, Plasma/Serum <10 nmol/L (Ref Interval: 0-15)

Porphyryns, Total, Plasma/Serum, Interp. Negative

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Porphyryns, Total, Plasma/Serum	22-264-141507	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Porphyryns, Total, Plasma/Serum, Interp.	22-264-141507	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: