

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 1/11/1949  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Gyn SurePath +HPV Cytology Final Report**

ARUP test code 2000131

SurePath Pap Specimen Source Cervical, vaginal

Specimen Adequacy Satisfactory for evaluation.

Interpretation Atypical squamous cells of undetermined significance.

02/01/24 Cytotechnologist: Brett N Lund, CT (ASCP)  
Reviewed by: SK,EM

02/02/24 Verified By: Evan M Raps, M.D.  
electronic signature

University of Utah Health Care, Department of Pathology  
Huntsman Cancer Institute  
2000 Circle of Hope, RM 3100  
Salt Lake City UT 84112

CPT Code(s) 88142 / 88141

Clinical History Clinical Information: No clinical information provided.  
Pregnant: No  
Postpartum: No  
IUD: No  
Hormone Therapy: No  
Postmenopausal: Yes  
Hysterectomy: No  
DES Exposure: No  
Radiation: No  
Previous Abnormal Pap? Details: Hx of LEEP  
Diagnostic or Screening Pap Test: Screening  
ICD Code(s): Z01.419

Resident [REDACTED]

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

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
SurePath Pap Specimen Source	GH-240-004593	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Specimen Adequacy	GH-240-004593	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Interpretation	GH-240-004593	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CPT Code(s)	GH-240-004593	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Clinical History	GH-240-004593	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Resident	GH-240-004593	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: