

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 1/27/2002  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Oxycodone/Oxymorphone Screen Only, Urine**

ARUP test code 2005103

Oxycodone/Oxymorphone, Urn, Screen      Negative ng/mL      (Ref Interval: Cutoff 100)

Screening results are obtained by immunoassay. Results obtained by immunoassay are not confirmed unless confirmation testing is specifically requested.

The absence of expected drug(s) and/or drug metabolite(s) may indicate non-compliance, inappropriate timing of specimen collection relative to drug administration, poor drug absorption, diluted/adulterated urine, or limitations of testing. The concentration at which the screening test can detect a drug or metabolite varies. The concentration value must be greater than or equal to the cutoff to be reported as positive. Interpretive questions should be directed to the laboratory.  
For medical purposes only; not valid for forensic use.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Oxycodone/Oxymorphone, Urn, Screen	20-068-400478	3/4/2020 4:46:00 PM	3/9/2020 5:59:48 AM	3/9/2020 6:26:00 PM

END OF CHART

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

Unless otherwise indicated, testing performed at: