



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

Physician: Doctor, Example

UNITED STATES

Patient: Patient, Example

DOB 5/14/1995
Gender: Female

Patient Identifiers: 01234567890ABCD, 012345

Visit Number (FIN): 01234567890ABCD **Collection Date:** 00/00/0000 00:00

Acetylcholinesterase and Fetal Hemoglobin, Amniotic Fluid

ARUP test code 2006848

Acetylcholinesterase, Amniotic Fluid Negative (Ref Interval: Negative)

INTERPRETIVE INFORMATION: Acetylcholinesterase and Fetal HGB, AF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for

clinical purposes.

Fetal Hemoglobin, Amniotic Fluid Negative (Ref Interval: Negative)

Acetylcholinesterase/Fetal HGB Interp See Note

Acetylcholinesterase and fetal hemoglobin are not detected in the amniotic fluid. The likelihood of a neural tube defect is low. Medical management should rely on clinical findings.

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Acetylcholinesterase, Amniotic Fluid	22-132-401975	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Fetal Hemoglobin, Amniotic Fluid	22-132-401975	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Acetylcholinesterase/Fetal HGB Interp	22-132-401975	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

Patient: Patient, Example
ARUP Accession: 22-132-401975
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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