

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

Physician: Doctor, Example

## **Patient: Patient, Example**

DOB	3/12/1990
Gender:	Unknown
<b>Patient Identifiers:</b>	01234567890ABCD, 012345
Visit Number (FIN):	01234567890ABCD
<b>Collection Date:</b>	00/00/0000 00:00

## Hepatitis B Virus Surface Antigen Confirmation, Prenatal

ARUP test code 2007575

Hepatitis B Surface Ag Confirm, Prenatal	anti-HBs. This positives can o	specimen is t occur. If the	<b>(Ref Interval: Non Confirmed)</b> (HBSAg) did neutralize using therefore POSITIVE for HBSAg. False result is not supported by clinical a new sample usually helps clarify
	INTERPRETIVE IN Confirmation, P		epatitis B Virus Surface Antigen
	associated re-e	entry protoco	ed for blood donor screening, ls, or for screening Human Cell, ssue-Based Products (HCT/P).

VERIFIED/REPORTED DATES							
Procedure	Accession	Collected	Received	Verified/Reported			
Hepatitis B Surface Ag Confirm, Prenatal	24-073-109860	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: