

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 7/17/1957  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Phospholipase A2 Receptor (PLA2R) Antibody, IgG with Reflex to Titer**

ARUP test code 2011828

Phospholipase A2 Receptor, IgG <1:10 (Ref Interval: <1:10)  
Phospholipase A2 Receptor Antibody, IgG is not detected. No further testing will be performed.

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Phospholipase A2 Receptor, IgG	22-233-400144	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: