

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

Physician: Doctor, Example

**Patient: Patient, Example**

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

**Wr(a) Antigen Typing, Patient**

ARUP test code 2013508

Wr(a)\_Antigen Typing, Patient

Positive

This patient appears to be positive for the wr(a) (DI3) antigen.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Wr(a)_Antigen Typing, Patient	24-080-102773	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