

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

Physician: Doctor, Example

Patient: Patient, Example

6/5/1996
Female
01234567890ABCD, 012345
01234567890ABCD
00/00/0000 00:00

Alpha Fetoprotein (Amniotic Fluid) with Reflex to Acetylcholinesterase and Fetal Hemoglobin

ARUP test code 3000142

AFP, Amniotic Fluid	773 ng/mL			
AFP, AF MoM	0.52	(Ref Interval: <=1.99)		
AFP AF Interpretation	determined by ARU approved by the U performed in a CL	Negative 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.		
Gestational Age Calculated at Collection	28 wks, 4 days			

VERIFIED/REPORTED DATES						
Procedure	Accession	Collected	Received	Verified/Reported		
AFP, Amniotic Fluid	23-146-400181	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00		
AFP, AF MoM	23-146-400181	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00		
AFP AF Interpretation	23-146-400181	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00		
Gestational Age Calculated at Collection	23-146-400181	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: