

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 8/10/1941  
**Gender:** Male  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Toxigenic Clostridium difficile by LFA with Reflex to PCR, Stool**

ARUP test code 3001801

Toxigenic C. difficile Interpretation

**Detected \***

C. difficile infection is likely to be present.

Results of individual Clostridioides difficile test components:

C. difficile GDH antigen: Detected  
C. difficile Toxin: Detected

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Toxigenic C. difficile Interpretation	22-186-132048	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: