

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 9/15/1960  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Troponin T (cTnT) 5th Generation**

ARUP test code 3001831

Troponin T 5th Generation

**33 ng/L H**

(Ref Interval: <=10)

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Troponin T 5th Generation	20-223-401175	8/8/2020 2:28:00 AM	8/11/2020 11:51:56 PM	8/12/2020 11:56:00 AM

END OF CHART

**H=High, L=Low, \*=Abnormal, C=Critical**

Unless otherwise indicated, testing performed at: