

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

Physician: Doctor, Example

## Patient: Patient, Example

DOB	5/2/2006
Gender:	Male
<b>Patient Identifiers:</b>	01234567890ABCD, 012345
Visit Number (FIN):	01234567890ABCD
<b>Collection Date:</b>	00/00/0000 00:00

Adipon	ectin. (	Juantitative	Serum	/Plasma
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ARUP test code 3017195

Adiponectin, Quantitative Serum/Plasma	9.30 ug/mL INTERPRETIVE INFORMATION: /	(Ref Interval: 2.74-13.30) Adiponectin, Quantitative Serum/Plasma
	determined by ARUP Laborate	d its performance characteristics ories. It has not been cleared or and Drug Administration. This test was ied laboratory and is intended for

VERIFIED/REPORTED DATES					
Procedure	Accession	Collected	Received	Verified/Reported	
Adiponectin, Quantitative Serum/Plasma	24-124-101116	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: