

Patient Report



Specimen ID: 269-988-9001-0
Control ID:

Acct #: 90000999
LabCorp Test Master
Test Account
5450 Millstream Road
MCLEANSVILLE NC 27301

Phone: (336) 436-8645 Rte: 00

SAMPLE REPORT, 001032



Patient Details

DOB: 02/14/1987
Age(y/m/d): 035/07/12
Gender: F
Patient ID:

Specimen Details

Date collected: 09/26/2022 0000 Local
Date received: 09/26/2022
Date entered: 09/26/2022
Date reported: 09/26/2022 0000 ET

Physician Details

Ordering:
Referring:
ID:
NPI:

Ordered Items

Glucose

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Glucose	84		mg/dL	70 - 99	01

01	\$\$	Testmaster Testing 3060 S Church Street, Burlington, NC 27215	Dir: Report Testing, PhD
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For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762

Patient Report



Specimen ID: 269-988-9002-0
Control ID:

Acct #: 90000999
LabCorp Test Master
Test Account
5450 Millstream Road
MCLEANSVILLE NC 27301

Phone: (336) 436-8645 Rte: 00

SAMPLE REPORT, 001032



Patient Details

DOB: 02/14/1987
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Physician Details

Ordering:
Referring:
ID:
NPI:

Ordered Items

Glucose

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Glucose	107	High	mg/dL	70-99	01

01	\$\$	Testmaster Testing 3060 S Church Street, Burlington, NC 27215	Dir: Report Testing, PhD
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For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762