

Testmaster Testing 3060 S Church Street Burlington, NC 27215

Phone: 336-436-2762 Account Phone Number Patient ID Control Number Account Number Route 239-988-9507-0 90000999 336-436-8645 00 Patient Last Name Account Address LabCorp Test Master SAMPLE REPORT Patient First Name Patient Middle Name Test Account 001966 3060 South Church Street Patient SS# Patient Phone Total Volume Burlington NC 27215 Age (Y/M/D) 56/07/25 Date of Birth Fasting 01/01/60 М Patient Address Additional Information NORMAL REPORT Date and Time Collected Date Entered Date and Time Reported Physician Name NPI Physician ID 08/26/16 00:00 08/26/16

Tests Ordered
Leukocyte Alkaline Phos Score

TESTS RESULT FLAG UNITS REFERENCE INTERVAL LAB

Leukocyte Alkaline Phos Score

50 25 - 130

01 BN LabCorp Burlington Dir: William F Hancock, MD 1447 York Court, Burlington, NC 27215-3361 For inquiries, the physician may contact **Branch: 800-222-7566 Lab: 336-436-2762**

SAMPLE REPORT, 001966

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DUPLICATE FINAL REPORT

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