Eosinophil Count, Nasal

No Eosinophils Seen

None Seen 01
<table>
<thead>
<tr>
<th>Specimen Number</th>
<th>Patient ID</th>
<th>Control Number</th>
<th>Account Number</th>
<th>Account Phone Number</th>
<th>Route</th>
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<td>90000999</td>
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<td>336–436–8645</td>
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**SAMPLE REPORT**

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<th>Sample Report 008581</th>
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**Patient Information**

- **Patient Last Name**: LabCorp Test Master
- **Test Account**: LabCorp Test Master
- **Address**: 3060 South Church Street, Burlington NC 27215

**Test Information**

- **Age (Y/M/D)**: 56/08/28
- **Date of Birth**: 01/01/60
- **Sex**: F
- **Fasting**: Yes
- **Patient Address**: 3060 South Church Street, Burlington NC 27215

**ABNORMAL REPORT**

- **Additional Information**: Eosinophil Count, Nasal

**Tests Ordered**

<table>
<thead>
<tr>
<th>Tests Ordered</th>
<th>Result</th>
<th>Flag</th>
<th>Units</th>
<th>Reference Interval</th>
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<tbody>
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<td>Eosinophils 4+</td>
<td>None Seen</td>
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</tbody>
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**For inquiries, the physician may contact**

- **Branch**: 800–222–7566
- **Lab**: 800–762–4344