Specimen ID:	C			Patient I	Report
Control ID:			Acct #: 17452095 Walk-In Lab, LLC 1645 Tiffany Lane Mandeville LA 7044&-	Phone: (800) 539-6119	Rte: 00
Patient Details DOB: Age(y/m/d): Gender: Patient ID:	SSN:	Specimen Details Date collected: Date received: Date entered: Date reported:	Physician Details Ordering: K CULLEN Referring: ID: 1619923927 NPI: 1619923927		
General Comment Alternate Control Fotal Volume: Not		ation	Alternate Patient ID Fasting: No	: Not Provided	
Ordered Items	ning (IgC (M): Vaninung	turo			
	niae(IgG/M); Venipunc CESTS		AG UNITS R	EFERENCE INTERVAL	L LAB
	neumoniae(IgG/N				
Chlamydia pneumoniae IgG <1:16				Neg:<1:16	01
Chlamydia pneumoniae IgM <1:10				Neg:<1:10	01
by LabO Adminis is not purpose procedu	Corp. It has no stration. The B necessary. Res es only. The r are without cor	bed and its perfor ot been cleared or FDA has determined sults of this test result should not if irmation of the ic product or prod	approved by the that such clear are for investi be used as a dia diagnosis by and	Food and Drug cance or approval gational gnostic	
	LabCorp Burlington		Dir: William	F Hancock, MD	
01 BN	1447 York Court, Bur				

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