

	n	Specimen Inform	ation	Client Information	
DOB: Gender: Phone: Patient ID:	AGE:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:			
OMMENTS:	FASTING:NO	I			
Test Name CARBAMAZEPII		<b>In Range</b> 5.2	Out Of Range	Reference Range 4.0-12.0 mg/L	La
ERFORMING S	ITE:				