

Patient Information	Specimen Information	Client Information
DOB: AGE: Gender: Phone: Patient ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

Test Name	In Range	Out Of Range	Reference Range	Lab
T4, FREE	1.2	Out Of Range	0.8-1.8 ng/dL	

PERFORMING SITE:

Walk-In Lab