

Specimen ID:
Control ID:

Acct #:

Phone:

Rte:

Patient Details

DOB:
Age(y/m/d): Gender:
SSN:
Patient ID:

Specimen Details

Date collected:
Date received:
Date entered:
Date reported:

Physician Details

Ordering:
Referring:
ID:
NPI:

General Comments & Additional Information

Alternate Control Number:
Total Volume:

Alternate Patient ID:
Fasting:

Ordered Items

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
PE (Rfx IFE), S					
Protein, Total	6.2		g/dL	6.0 - 8.5	
Albumin	4.2		g/dL	2.9 - 4.4	
Alpha-1-Globulin	0.2		g/dL	0.0 - 0.4	
Alpha-2-Globulin	0.5		g/dL	0.4 - 1.0	
Beta Globulin	0.9		g/dL	0.7 - 1.3	
Gamma Globulin	0.4		g/dL	0.4 - 1.8	
M-Spike	Not Observed		g/dL	Not Observed	
Globulin, Total	2.0	Low	g/dL	2.2 - 3.9	
A/G Ratio	2.1	High		0.7 - 1.7	

Please note:

Protein electrophoresis scan will follow via computer, mail, or courier delivery.

PDF

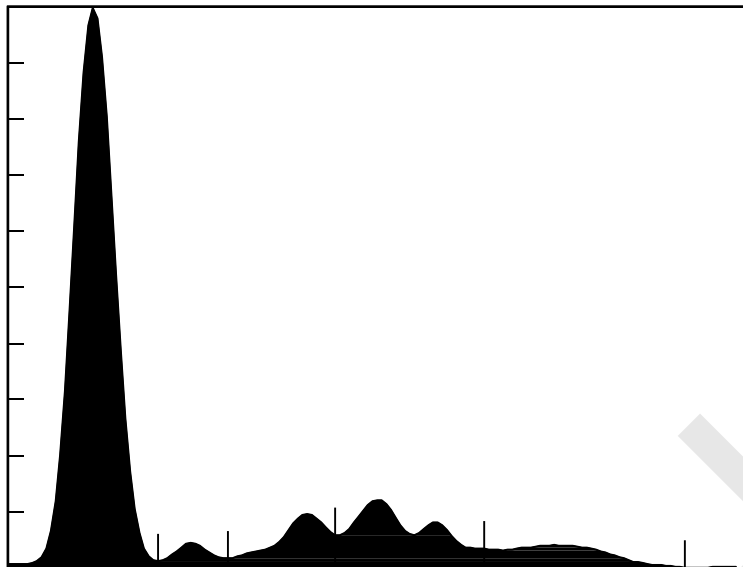
For inquiries, the physician may contact **Branch: 504-828-2666 Lab: 858-668-3700**

Laboratory Corporation of America
Special Chemistry Department
San Diego, Ca
Serum Protein Electrophoresis

Accession Number
Total
Patient Name
Cup
Birthdate

Account No./Name
Physician ID
Account Address 1
Account Address 2
Account Address 3

SPIFE Split Beta Serum Proteins Gel



Fraction	%	% Range	g/dL	g/dL Range
Albumin	67.2		4.2	3.2 to 5.6
Alpha-1	2.7		0.2	0.1 to 0.4
Alpha-2	8.1		0.5	0.4 to 1.2
Beta	15.0		0.9	0.6 to 1.3
Gamma	7.0		0.4-	0.5 to 1.6
Total Protein			6.2	
Ratio				
A/G	2.0			

Comments