

**Patient Report** 

Phone: (800) 539-6119

Specimen ID:
Control ID:

Acct #: Walk-In Lab, LLC VART verified

**Patient Details** 

DOB: Gender: 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**

Measles/Mumps/Rubella Immunity; Varicella-Zoster V Ab, IgG

TESTS	R	ESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Measles/Mumps/Rubella Immunity							
Rubella Antibodies,	IgG	25.60			nmune ocal 0.90	<0.90	01
Measles Antibodies,	IgG	>300.0		Negat	rocal 13.5	<13.5	01
	Presence of of immunity						
Mumps Abs, IgG		>300.0		Equivo Positi		<9.0 - 10.9 >10.9	01
A positive result generally indicates past exposure to Mumps virus or previous vaccination.							
Varicella-Zoster V Ab, IgG							
Varicella Zoster Iç	gG	>4000		index Negativ Equivoo Positiv	ve cal 135	e >165 <135 - 165 >165	01
A positive result generally indicates exposure to the pathogen or administration of specific immunoglobulins, but it is not indication of active infection or stage of disease.							

For inquiries, the physician may contact Branch: 504-828-2666 Lab: 800-282-7300