

Specimen ID:  
Control ID:

Acct #:  
Walk-In Lab, LLC  
VART verified

Phone: (800) 539-6119 Rte: 00

Patient Details

Specimen Details

Physician Details

General Comments & Additional Information  
Alternate Control Number:  
Total Volume: Not Provided

Alternate Patient ID:  
Fasting:

Ordered Items

Complement C4, Serum

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Complement C4, Serum	13	Low	mg/dL	14-44	01