

Specimen ID:  
Control ID:

Acct #: 17452095  
Walk-In Lab, LLC  
VART verified  
169 W Augusta Lane  
SLIDE 7045E

Phone: (800) 539-6119 Rte: 00

### Patient Details

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

### Specimen Details

Date collected:  
Date entered:  
Date reported:

### Physician Details

Ordering: C KARPILOW  
Referring:  
ID: A06835  
NPI: 1720176035

### General Comments & Additional Information

**Clinical Info:** SRC:ST

**Alternate Control Number:**  
**Total Volume:** Not Provided

**Alternate Patient ID:** Not Provided  
**Fasting:** No

### Ordered Items

Stool Culture

TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Stool Culture						
Salmonella/Shigella Screen	Final Report					01
Result 1	No Salmonella or Shigella recovered.					01
Campylobacter Culture	Final Report					01
Result 1	No Campylobacter species isolated.					01
E coli Shiga Toxin EIA	Negative			Negative		01

01	SE	LabCorp Seattle 550 17th Avenue Ste 300, Seattle, WA 98122-5789	Daniel Toweill, MD
----	----	--	--------------------

For inquiries, the physician may contact **Branch: 504-828-2666 Lab: 206-861-7000**