

Specimen ID:  
Control ID:

Acct #:

Rte: 00

**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:**

**Fasting:**

**Ordered Items**

Iodine, Random Urine

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
<b>Iodine, Random Urine</b>					
Iodine, Urine <sup>A</sup>	39.8		ug/L	28.0 - 544.0	
				Limit of quantitation = 20	

**Comments :**

<sup>A</sup> This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.