



Testmaster Testing  
 3060 S Church Street  
 Burlington, NC 27215

Phone: 336-436-2762

Specimen Number <b>334-988-9507-0</b>		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
Patient Last Name <b>SAMPLE</b>				Account Address LabCorp Test Master			
Patient First Name <b>001974</b>		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex F		Fasting	
Patient Address				Additional Information NORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	Physician ID

Tests Ordered Thyroxine (T4) Free, Direct, S							
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TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
<b>Thyroxine (T4) Free, Direct, S</b>					
T4, Free (Direct)	1.11		ng/dL	0.82 - 1.77	01

01	\$\$	Testmaster Testing 3060 S Church Street, Burlington, NC 27215	Dir: Report Testing, PhD
For inquiries, the physician may contact <b>Branch: 800-222-7566 Lab: 336-436-2762</b>			

<b>SAMPLE, 001974</b>		<b>334-988-9507-0</b>	Seq # 0000
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12/01/16 08:25 ET

**DUPLICATE FINAL REPORT**

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Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex M	Fasting		
Patient Address				Additional Information ABNORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	NPI
						Physician ID	

Tests Ordered							
Thyroxine (T4) Free, Direct, S							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Thyroxine (T4) Free, Direct, S					
<b>T4, Free (Direct)</b>	<b>5.25</b>	<b>High</b>	ng/dL	0.82 - 1.77	01

01	\$\$	Testmaster Testing	Dir: Report Testing, PhD
		3060 S Church Street, Burlington, NC 27215	
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<b>SAMPLE, 001974</b>		<b>334-988-9508-0</b>	Seq # 0000
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