### Test Information

**Specimen Number:** 336-988-9036-0  
**Account Number:** 90000999  
**Account Phone Number:** 336-436-8645  
**Route:** 00

**Patient Information**

- **Patient Last Name:** LabCorp Test Master  
- **Patient First Name:** Test Account  
- **Patient Middle Name:** 3060 South Church Street  
- **Address:** Burlington NC 27215

**Test Details**

- **Date and Time Collected:** 12/01/16 00:00  
- **Date and Time Reported:** 12/01/16 14:32 ET

---

# Test Results

## Citric Acid(Citrate), Random U

- **Result:** 754 mg/L  
- **Reference Interval:** 9 - 864  
- **Flag:** 01

**Disclaimer:**

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

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### Additional Information

- **Dir:** William F Hancock, MD  
- **Branch:** 800-222-7566  
- **Lab:** 336-436-2762

---

**Duplicate Final Report**

This document contains private and confidential health information protected by state and federal law. If you have received this document in error, please call 800-222-7566.
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<tr>
<th>Specimen Number</th>
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<th>Control Number</th>
<th>Account Number</th>
<th>Account Phone Number</th>
<th>Route</th>
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**SAMPLE REPORT**

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<th>Patient SS#</th>
<th>Patient Phone</th>
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<td>12/18/92</td>
<td>M</td>
<td>Fasting</td>
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**Patient Address**

3060 South Church Street
Burlington NC 27215

**Date and Time Collected**

12/01/16 00:00

**Physician Name**

LabCorp Test Master
Test Account
3060 South Church Street
Burlington NC 27215

**Test Account**

LabCorp Test Master

**Sample Report**

**ABNORMAL REPORT**

**Tests Ordered**

Citric Acid(Citrate), Random U

<table>
<thead>
<tr>
<th>Tests Ordered</th>
<th>RESULT</th>
<th>FLAG</th>
<th>UNITS</th>
<th>REFERENCE INTERVAL</th>
<th>LAB</th>
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</thead>
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<td>High</td>
<td>mg/L</td>
<td>9 - 864</td>
<td>01</td>
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**Disclaimer:**

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01 BN LabCorp Burlington
1447 York Court, Burlington, NC 27215-3361

For inquiries, the physician may contact Branch: 800-222-7566  Lab: 336-436-2762

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