

Patient Information	Specimen Information	Client Information
<b>SHULIAK,</b> [REDACTED] <b>DOB:</b> [REDACTED] Gender: F Phone: [REDACTED] Patient ID: [REDACTED]	Specimen: MR780641K Requisition: 0006004  Collected: 08/03/2018 Received: 08/03/2018 / 21:34 EDT Reported: 08/05/2018 / 06:00 EDT	Client # [REDACTED] MOSKOWITZ, BRUCE W BRUCE MOSKOWITZ, MD Attn: NATIONWIDE ACCOUNT 1411 N FLAGLER DR STE 7100 WEST PALM BEACH, FL 33401-3418

Test Name	In Range	Out Of Range	Reference Range	Lab
[REDACTED]				

Patient Information	Specimen Information	Client Information
<b>SHULIAK, KARYNA</b>  <b>DOB:</b> [REDACTED] Gender: F Patient ID: [REDACTED]	Specimen: MR780641K Collected: 08/03/2018 Received: 08/03/2018 / 21:34 EDT Reported: 08/05/2018 / 06:00 EDT	Client #: [REDACTED] MOSKOWITZ, BRUCE W

Test Name	In Range	Out Of Range	Reference Range	Lab
[REDACTED]				

**PERFORMING SITE:**

MI QUEST DIAGNOSTICS-MIAMI, 10200 COMMERCE PARKWAY, MIRAMAR, FL 33025-3938 Laboratory Director: GLEN L. HORTIN MD PHD, CLIA: 10D0277334