

Acct #

Phone:

Rte: 00



**Patient Details**

DOB:  
Age(y/m/d):  
Gender:  
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: Not Provided

Alternate Patient ID  
Fasting: No

*Numerical result*

Ordered Items

Hepatitis B Surf Ab Quant; Varicella-Zoster V Ab, IgG; Venipuncture

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Hepatitis B Surf Ab Quant	322.3		mIU/mL	Immunity >9.9 Anti-HBs Level	01
Status of Immunity				0.0 - 9.9 >9.9	
Inconsistent with Immunity					
Consistent with Immunity					
Varicella-Zoster V Ab, IgG	824		index	Immune >165	01
Varicella Zoster IgG			Negative	<135	
			Equivocal	135 - 165	
			Positive	>165	

A positive result generally indicates exposure to the pathogen or administration of specific immunoglobulins but it is not indication of active infection or stage of disease.

*REFERENCE RANGE*

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1447 York Court, Burlington, NC 27215-3361

For inquiries, the physician may contact Branch: 800-859-0391 Lab: 800-762-4344