



Patient ID SA00108879	Patient Name SAMPLEREPORT, VEDOLIZUMAB	Birth Date 1997-07-07	Gender F	Age 21
Order Number SA00108879	Client Order Number SA00108879	Ordering Physician CLIENT, CLIENT	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 19 Jul 2018 08:08		

Vedolizumab QN, S

1 SDL

47.0 mcg/mL

For concentrations of vedolizumab less than or equal to 15.0 mcg/mL, reflex testing for antibodies-to-vedolizumab will be performed.

REFERENCE VALUE

Lower limit of quantitation = 2.0 mcg/mL

Received: 19 Jul 2018 14:41

Reported: 19 Jul 2018 16:11

Laboratory Notes

- 1 This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Performing Site Legend

Code	Laboratory	Address	Lab Director	CLIA Certificate
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901	William G. Morice M.D. Ph.D	24D1040592