MAYO CLINIC LABORATORIES

1-800-533-1710

FHSPL

Histamine Plasma

Patient ID	Patient Name		Birth Date	Sex	Age
SA00178434	SAMPLEREPORT, FHSPL		2005-12-19	F	19
Order Number	**Client Order Number**	**Ordering Physician**	**Report Notes**		
SA00178434	SA00178434	CLIENT,CLIENT			
Account Information		**Collected**			
C7028846 DLMP Rochester		02 Dec 2025 09:45			

Histamine Plasma

Y165

Reference Value
0–1.0

⚠ 1.50 ng/mL

High

*This test was developed and its performance characteristics determined by Eurofins Viracor. It has not been cleared or approved by the U.S. Food and Drug Administration.

FLAG Interpretation: A = Abnormal, H = High, L = Low

Received: 04 Dec 2025 09:53 **Reported:** 04 Dec 2025 13:59

Performing Site Legend

Code	Laboratory	Address	Lab Director	CLIA Certificate
Y165	Eurofins Viracor	18000 W. 99th Street, Suite 10, Lenexa, KS 66219		