



Patient ID SA00106796	Patient Name SAMPLEREPORT, FDERM	Birth Date 1986-06-10	Gender M	Age 31
Order Number SA00106796	Client Order Number SA00106796	Ordering Physician CLIENT, CLIENT	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 20 May 2018 00:00		

Fungal Culture, Dermal

MCR



Abn

SOURCE: ARM, RIGHT, UPPER ARM
FUNGAL CULTURE, DERMAL

FINAL

TRICHOPHYTON RUBRUM

Received: 21 May 2018 11:10

Reported: 21 May 2018 11:17

Performing Site Legend

Code	Laboratory	Address	Lab Director	CLIA Certificate
MCR	Mayo Clinic Laboratories - Rochester Main Campus	200 First Street SW, Rochester, MN 55905	William G. Morice M.D. Ph.D	24D0404292