



Patient ID RVMICVP049	Patient Name REPORTVALIDATION, AUTOMATION MICVP	Birth Date 1961-01-01	Gender F	Age 50
Order Number RVMICVP049	Client Order Number RVMICVP049	Ordering Physician	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 12 Oct 2011 14:08		

Malaria/Babesia Smear

MCR

SOURCE:

MALARIA/BABESIA SMEAR

FINAL

Negative

Single negative specimen does not rule out
parasitic infection.

Received: 12 Oct 2011 14:09

Reported: 12 Oct 2011 14:34

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