

LABORATORY REPORT

Example Client, XYZ123 1234 Warde Road Ann Arbor MI 48108 **EXAMPLE, REPORT W**

WX0000003827 M 07/08/1978 45 Y

Referral Testing

Collected: 09/05/2023 09:45 Received: 09/05/2023 09:45

<u>Test Name</u> <u>Result</u> <u>Flag Ref-Ranges</u> <u>Units</u> <u>Site</u>

CNS Demyelinating Disease Eval, Serum

CNS Demyelinating Disease Interp SEE BELOW MMRL

No informative autoantibodies were detected in this evaluation. A negative result does not preclude a diagnosis of an inflammatory CNS demyelinating disorder.

MOG FACS, S Negative Negative MMRL

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.

Test Performed by:

Mayo Clinic Laboratories - Rochester Main Campus 200 First Street SW, Rochester, MN 55905

Lab Director: William G. Morice M.D. Ph.D.; CLIA# 24D0404292

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the U.S. Food and Drug Administration.

Performing Site:

MMRL: MAYO MEDICAL REFERENCE LAB 3050 Superior Drive NW Rochester MN 55901

Reported Date: 2023.09.05 9:45 CDS1

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, $\,$. - NOT TESTED

F305000019 WX0000003827 Printed D&T: 09/05/23 09:45 Ordered By: KAJAL SITWALA, MD, PhD WX0000000002365

Kajal V. Sitwala, MD, PhD - Medical Director Form: MM RL1 PAGE 1 OF 1