Client #: 0009000	*		Quest
Vendor Information:	A		Diagnostics
Lab Testing API *	XO ^Y		Diagnostics
1 03 10045	¢Y		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Client #: 0009000 Req	#: 1060748	
Lab Approving Fortey: REOUTST	This order expires 201	9-11-27	
			Patient Information
······································			Patient Name:
Lab Approving Entry:	For La	b Use	Laxman, vvs
PWNHealth LLC			
888-362-432			
Collection Date:	Time:	Pat ID #: 1060748	State: AK SSN:
Urine Volume: Hours:		DOB: 12-31-1991	Sex: M Room/Loc:
Lab Reference ID: 1060748		Result Notificati	on:
UP10 45678			
NPI: 1059221			
Ref Physician Provider ID: Staging	Physician AK CO HI UT		
Responsible Party: Laxman, vvs		1	
Bill Type: Client			
			CLIENT BILL ONLY.
			IT OR THIRD PARTY BILLING ON THIS ACCOUNT.
		1	

Profiles/Tests		
ORDER #	TEST NAME/DESCRIPTION	
7788	ABO GROUP AND RH TYPE	

EMPLOYER SOLUTIONS NATIONAL CLINICAL ACCOUNT MUST BE TESTED IN A QLS LABORATORY. FOR QUEST DIAGNOSIS USE ONLY - QUESTIONS PLEASE CALL 866-226-8046