

FAX

Date: 04/02/2024

Pages including cover sheet: 2

To:	
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NOTE:

Send Fax

Final Report



Hospital
123 Hospital Ave
Droidville Texas 22211
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Patient	Last Name	Owen	Status	Final	Provider Information	Ordering Physician	hospital prov (hospital loc 1)
	First Name	Hudson		Accession #		12	Referring Physician
	Gender	male	Collection Date	Mar 30 2024		Organization	Hospital
	Age	4	Received Date			Location	Hospital loc 1
	Date of Birth	Jan 01 2020	Report Date	Apr 02 2024			
	Patient ID#	33	Specimen Type				

SAMPLE RECEIVED:

A: Test 1
B: Test 2
C: Test 3

CLINICAL DATA:

Hudson Test Report

CPT CODE

GROSS DESCRIPTION

Hudson 1

hello world



FINAL DIAGNOSIS

Owen 1
ABCD



CPT CODES:

88104, 86153, 87164

COMMENT:

This test was developed and its performance and characteristics determined by the KC Pathology Laboratory LLC. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing)