

FAX

Date: 07/12/2024

Pages including cover sheet: 2

To:	
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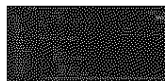
From:	Sofilite
	Sofilite LLC
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NOTE:

Send Fax

Preliminary Report

Hospital
123 Hospital Ave
Droidville Texas 22211
Phone: +19492883527
Fax: 12345678



Patient	Last Name	patient (hospital loc 1)	Status	Final	Provider Information	Ordering Physician	hospital prov (hospital loc 1)
	First Name	hospital		Accession #		5	Referring Physician
	Gender	male	Collection Date	Feb 29 2024		Organization	Hospital
	Age	0	Received Date			Location	Hospital loc 1
	Date of Birth	Jan 02 2024	Report Date	Jun 17 2024			
	Patient ID#	1	Specimen Type				

SAMPLE RECEIVED:

CLINICAL DATA:

asdfsadf

CPT CODE

GYNECOLOGIC PAP TEST,LIQUID BASED

GROSS DESCRIPTION

Gross desc

FINAL DIAGNOSIS

Final diagnosis

CPT CODES:

COMMENT:

asdf

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)