



V20230127

0000000538



PATIENT NAME

Gisel Gonzalez

D.O.B.

03/01/02

Date & Time of Collection

08/14/2023 1130 AM

LIFE
VERIFY



Interpret Results

C=Control T=Test

100730Mlife Rev A

Neg(-) Pos(+) Invalid

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C	T				