



**PORTOFINO IV CENTER
901-A SW 87 AVE**

MIAMI, FL 33174

TEL: 305-225-6266

FAX: 305-225-6296

INFO@FAMILYREHAB.US

CLIA: 24

CLINICAL LABORATORY REPORT

Account# 1659461101

REFER# 88611

PASSPORT# (123) 456-7890

INTI FERNANDEZ MD

PATIENT: my full name my full name

2100 NW 42 AVE

DOB: 2022-01-06

SEX: male

MIAMI, FLORIDA 33126

ORDER#: 5591

TEL: 305-869-1161 FAX: 305-869-1167

COLLECTED: 2022-01-25 06:42:14

DOCTOR: INTI FERNANDEZ MD

REPORTED: 2022-01-25 06:45:05

Description	Result
Method: antigen	Testing Platform: ABBOTT IDNOW
Procedure: NAAT - RNA	
Specimen Type: Nasopharyngeal Swab	NEGATIVE for antigen

This test has been performed following RT-PCR - Abbott ID Now methodology. This test has been authorized by FDA. This test has been validated in accordance with the FDA's Guidance Document (Policy for diagnostics testing in laboratories certified to perform testing under CLIA waiver prior to Emergency Use Authorization for coronavirus Disease-2019 during the public health Emergency)

A handwritten signature in black ink, appearing to read "Raul", written in a cursive style.

**inti Fernandez M.D.
Miami International
Airport Ground Level
Miami,FL 33142**