

ROCHESTER INSTITUTE OF TECHNOLOGY

Account #: 821076 Req/Control #: 821076	Collection Date: 01/01/0001 Collection Time: 00:00:00
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Client / Ordering Site Information:	Physician Information:
Account Name: RIT Student Health Center Address 1: 117 Lomb Memorial Drive Address 2: City, State, Zip: Rochester, New York 14623 Phone: 585-475-2255	Ordering Physician: Reilly, Maggie Physician Degree: Physician ID: 13923

Patient Information:	
Patient Name: MacDougall, Ryan Michael Gender: Female Date of Birth: 02/03/2000 Age: 20 Patient Address: Primary Address Not Provided City, State, Zip: Rochester, NY 14623	Patient ID: 224724 Phone: (607) 738-5933 Alt Control #: 821076 Alt Patient ID: 807001268

Primary Insurance Information	
Ins Co Name: United Health Care Policy Number: 911168978 Group #: 204781 Insured Name: MacDougall, Ryan	Ins Address 1: P.O. Box 740809 Ins Address 2: Ins City, State Zip: Atlanta, GA 30374 Relationship: Self

ORDER CODE	TESTS ORDERED (TOTAL: 3)	ORDER CODE	TESTS ORDERED
875	Estradiol, 17-Beta - 364455		
9119	AMA Comprehensive 14 - 364456		
10190	Testosterone; free + total LC-MS/MS - 364457		

Micro/Histo Information:
Source: 875 - Estradiol, 17-Beta 9119 - AMA Comprehensive 14 10190 - Testosterone; free + total LC-MS/MS

Diagnosis Codes:							
Z51.81	E34.8	E34.9					

This laboratory order was signed electronically by: **Maggie Reilly, PA-C**