Patient ID : p\_id Name : p\_name Age/Sex : age\_sex
Ref. by : doctor\_ref Lab no : Date : test\_date
SPECIAL PATHOLOGY
ACTH Plasma\*
Primary sample type : EDTA blood
Test Name Result Units Reference Range
ACTH-Adreno Corticotropic Hormone (Plasma, CLIA) 22.00 pg/mL 0-46
NOTE : This test was processed at third party lab.
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