

MOLLY GRAY ND LM, LLC • 6300 9TH AVE NE, SEATTLE WA 98115-8516

ZZZTESTCASE, TCEIGHT (id #16057, dob: 08/08/1976)

Interpath Lab Order

20915,126CE4621

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 Interpath Laboratory

EREQ

**Account #:20915**

Account Name: MOLLY GRAY ND LM, LLC -  
 ONE SKY FAMILY MEDICINE  
 Address: 6300 9TH AVE NE SUITE 300  
 City, State Zip: SEATTLE, WA 98115-8516  
 Phone: (206) 363-5555

For lab use only

Patient Information
ZZZTESTCASE, TCEIGHT 1 MAIN ST EUGENE, OR 97402 (325) 664-4223

To INTERPATH LABORATORY - EUGENE 1(10 COBURG RD. STE 200, EUGENE,OR, 97401)

<b>Requisition #:</b> 126CE4621 <b>Collection Date: Time:</b>	<b>Pat ID:</b> 16057 <b>DOB:</b> 08/08/1976 <b>Sex:</b> F
<b>Ordering Provider:</b> MOLLY GRAY, ND <b>NPI:</b> 1639256027  <b>Responsible Party:</b> ZZZTESTCASE, TCEIGHT <b>Phone:</b> (325) 664-4223 1 MAIN ST EUGENE, OR 97402	<b>Bill Type:</b> Patient Bill  <b>Primary Insurance:</b> *SELF PAY* <b>Insurance #:</b> <b>Group #: Relation:</b> Other <b>DOB:</b> <b>Address:</b> , , ,  <b>Secondary Insurance:</b> <b>Insurance #:</b> <b>Group #: Relation:</b> <b>DOB:</b> <b>Address:</b> , , ,

## Profiles/Tests

Order generated: 04/08/2015 04:56 PM

Orders included: 2

**Fatigue**

ICD-9: 780.79: Other malaise and fatigue

- 2046 - [ALT(SGPT)] ALT (SGPT) Bill [Patient Bill]  
Note to Lab: interface test
- 1010 - [AST(SGOT)] AST (SGOT) Bill [Patient Bill]  
Note to Lab: interface test

End of Requisition