

Client: Rockford IL			
Client Code: OUT	Supervised By: Manager on duty		
Address: 2358 Hassell Rd. Hoffman Estates, IL 60169	Phone: 847-636-2667	Fax:	

, ladic	.33. 2330 Hassell Ra. Holli	Harr Estates, IE 00105	1 Hone: 047 030 2007		TUX.
Patient: Burns,Rachel		Order ID: MK-1642706094838			
ID:	DOB: 07/16/1992	Gender: Female	Collected: 01/20/2022 01:12 PM	Reported: 01/20/2022 15:5	51 PM
Unit:		Room:			
Phone: (815) 793-3146		Specimen Type: NASAL SWAB			
Address: 1228 N Court Street, Rockford, IL, 61103		Physicians:			

Test	Result	Flag	Unit	Ref Range
COVID- 19 SARS -COV- 2, RAPID ANTIGEN	NEGATIVE	NORMAL		NEGATIVE

This test is performed using COVID-19 Antigen Test kit by Access Bio for the Detection of COVID-19 (SARS-CoV-2) RNA. The test has been received Emergency Use Authorization (EUA) by US Food and Drug Administration. The test performance characteristics were determined by the M K LABS INC, Hoffman Estates, Illinois. The laboratory is certified under CLIA Wavier to perform testing on human clinical specimens.

CLIA ID# 14D22 38829

This test was validated, and its performance determined by M K LABS INC. It has not been cleared or approved by FDA. Since FDA clearance is not required for clinical use of this laboratory developed test, this laboratory has established and validated the test's accuracy and precision, pursuant to the requirements of CLIA'88. Presumptive tests are indicated as (EUA). All other tests are confirmatory LCMS tests.

Lab Tech: SUPERVISOR Report Date: 01/20/2022 15:51 PM Lab Director: Samira Syed