Sample results. Actual results may vary.

Flag

PATIENT INFORMATION

Clinical Info:

SPECIMEN INFORMATION

SPECIMEN:
REQUISITION:
LAB REF NO:

DOB:
AGE:
GENDER:
FASTING:

COLLECTED:
RECEIVED:
REPORTED:

REPORT STATUS: FINAL

ORDERING PHYSICIAN

CLIENT INFORMATION



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Test Name Result

FASTING:NO

DONOR, HTLV I/II ANTIBODY SCREEN

DONOR, HTLV I/II ANTIBODY SCREEN Nonreactive

This test is for eligibility determination of Donors of blood and blood components and human cells, tissues, and cellular and tissue based products (HCT/Ps). This test is not intended to be used for routine clinical or routine diagnostic evaluation.

Nonreactive

Reference Range

01

Performing Laboratory Information: