

**Patient Report**

CLIA ID# 24D2117720

Lab Director: Kendall Price, M.D.

**ELISA HER2 TEST**

Family Name:	Doctor:
Given Name:	Patient ID#:
Client #:	
Gender:	Collected:
DOB:	Received:

Time 001	Sample	Concentration	Normal Range

Assay Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_