



29580 Northwestern Hwy
Suite 120, Southfield, MI 48034
(248) 301-6917
nwlab.com

LAB DIRECTOR Eugene Olsowka, MD
CLIA ID# 23D2126347

FINAL

Dr. Test Test
123 Main St.
Southfield, MI 48034

Patient: #: 0000
DOB: 01/01/2001

TEST, TEST
MRN:
Sex: Female

Accession: XXXXXX
Collected Date: 01/01/2021 2:05 PM OFC
Received Date: 01/01/2021 9:00 PM

Organization: EXAMPLE TEST

| Test Name | Result | Units | Flag | Reference Range/Cutoff |
|----------------------------|----------|-------|----------|-------------------------------------|
| Molecular | | | | |
| HPV PANEL [HPV] | | | | Run by ME on XX/XX/XXXX 11:50:21 PM |
| HPV Genotype 16 | NEGATIVE | | | |
| HPV Genotype 18 | NEGATIVE | | | |
| HPV Genotype 31 | NEGATIVE | | | |
| HPV Genotype 45 | POSITIVE | | ABNORMAL | |
| HPV Genotype 51 | NEGATIVE | | | |
| HPV Genotype 52 | NEGATIVE | | | |
| HPV Genotype P1 (33/58) | NEGATIVE | | | |
| HPV Genotype P2 (56/59/66) | NEGATIVE | | | |
| HPV Genotype P3 (35/39/68) | NEGATIVE | | | |

| | | | | |
|--|---|--|--|-------------------------------------|
| GYNECOLOGIC PAP TEST, LIQUID BASED (IMAGE-GUIDED) | | | | Run by ME on XX/XX/XXXX 11:50:21 PM |
| Specimen Received: ThinPrep Vial | | | | |
| Specimen Source: CERVICAL. | | | | |
| Report Status | NORMAL | | | F |
| INTERPRETATION: | | | | F |
| NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY. | | | | |
| Additional Comments: | INFLAMMATION PRESENT. | | | F |
| Specimen Adequacy | | | | F |
| Satisfactory for evaluation. An endocervical component is identified. | | | | |
| COMMENTS: | | | | F |
| (a) The Pap smear is a screening test designed to aid in the detection of premalignant and malignant conditions of the uterine cervix. It is not a diagnostic procedure and should not be used as the sole means of detecting cervical cancer. Both false-positive and false-negative reports do occur. (b) This liquid based Thin Prep (R) pap test was screened with the use of an image guided system. | | | | |
| Performed by: | TES TEST , CT (ASCP). | | | F |
| Electronically signed by: | TES TEST , CT (ASCP). | | | F |
| Performing Site: | | | | F |
| Technical and professional Components Performed at: KC Pathology Laboratory, LLC,: 44400 Van Dyke Ave, Suite 102, Sterling Heights MI 48314-2370. CLIA# 23D2276072. Medical Director: Faye Daaboul, MD This test was developed and its performance and characteristics determined by the KC Pathology Laboratory LLC. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing. | | | | |
| Location 1000B: | NORTH WEST LABS 29580 Northwestern HWY Suite-120, Southfield, MI 48034 T: (248) 301-6917 www.nwlab.com Lab Director: Eugene Olsowka MD CLIA ID# 23D2126347 | | | |
| StratusDX [KC] performing site: | KC PATHOLOGY LABORATORY LLC 44400 VAN DYKE AVE STE 102A STERLING HEIGHTS, MI 48314-2370 | | | |

All tests are performed at Northwest Labs, 29580 Northwestern Hwy Suite 120, Southfield, MI 48034 except some are performed at LabCorp