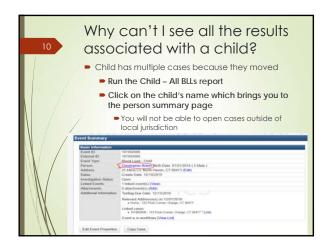


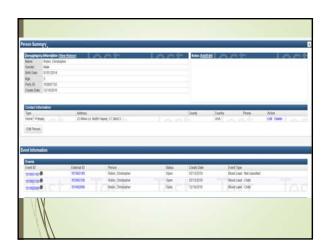




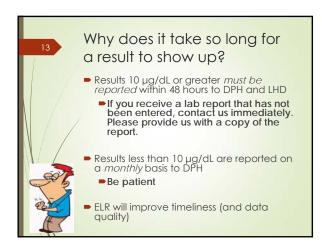
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	nis	IC	ry?				
	Child - A	II BI	LLs				
				erson Details			
	First Name:		-	Christopher			
	Last Name:	Last Name: Robin					
	Date of Both	Date of Barts: 01.01/2014 Home Address [01.01/1900 - 01.01/2018]: 123 Pools Corner, Oxange, CT 06477					
				1/2018]: 123 Pooli Corner, Oc 1/2019]: 987 Eeyore Ln, Guilt			
Ι,				1/2030] 25 Milne Ln, North F			
	Draw Date	BLL	Test Type	Ordering Provider Name	Ordering Provider Phone	Event ID	
/	12.01/2016	45	Venous	COLUMN TO STATE OF THE PARTY OF		101992908	
/	1000000	11	Venous			101992308	
		11	Venous				
	01/01/2018	-				101993140	
						101993140	
	03/01/2019	2	Tuivas			OI.	











Why is the Provider Information section in a lab result incomplete? • Electronic import: that is all the information we were provided • Manual entry: • It is all the information we were provided • It was an oversight on our part – we are human • Contact us if you have questions or concerns

