Texas	TEXAS and Human Services	Physical Address: 1100 Au P Austir	ent of State Health S West 49th Street Aus Istin Laboratory O Box 149347 n, TX 78714-9347 63-7111 Ext. 7318	Services tin, TX 7875	6	
Health Services		CLIA: 45D0660644				
Provider:	TEXAS DEPT ( 1100 WEST 49 Austin, TX 787					
Physician:	TEST PRACT					
			Patient:	CCSC4 TE	ST 4	
				123 COLO		
				El Paso, TX	X, 79982	
LIMS Repo	rt #: 334074	1				
Collection Site:			Local Patient Id:			
			Date of Birth:		02/21/2004	
			Gender:		Male	
Sample #:		AHT2500024 (3396616)	Collected By:			
			Date Collected:	01/29/2025	5	
Source:		Dried Blood Spot	Date Received:	1/30/2025	3:54 pm	
Additional	Info:		Date Reported:	4/17/2025	8:19 am	
Billing Com	nment:	16 - No Match in Medicaid Database				
Specimen N	Note:					
Test			Result			
Hemoglobin Types			A,A; Normal			
	ected Range: h to ~6 months =	F,A				

Results for Hemoglobin Electrophoresis that are outside of the Expected Range should be confirmed with a second specimen at a different laboratory

~6 months to 1 year = A,F

Over 1 year = A,A

