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Histamine

Test Code : 8308801 - Laboratory Services

Method : EIA - Performed : Thu 08:00 - Reported : Mon 18:00

Sample Name	Container	Amount	Transfer
Plasma (EDTA), Frozen	Lavender (EDTA)	2mL	<0°C

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Histamine/Creatinine Ratio, Urine (random)

Test Code : 8308804 - Laboratory Services

Method : EIA - Performed : Thu 08:00 - Reported : Mon 18:00

Sample Name	Container	Amount	Transfer
Urine, Random, Frozen	Plastic Collection Cup	10mL	<0°C

Reference Ranges

Normal Values

Gender	Lower Value	Unit
	<40	ug/g Kreatinin

3	Oligoclonal Band Profile Test Code : 8391601 - Laboratory Services			
	Method : IEF - Performed : Wed 08:00 Fri 08:00 - Reported : Mon 18:00 Wed 18:00			
	Sample Name	Container	Amount	Transfer
	Serum and CSF	Separator Tube+ Sterile CSF Tube	2mL	2-8°C
	Additional Information ▼ Serum and CSF Unacceptable Conditions:Hemolyzed specimens for serum.			

5	Copper [Mass/time] in 24 hour Urine Test Code : 8252506 - Laboratory Services			
	Method : AAS - Performed : Tue 08:00 Thu 08:00 - Reported : Wed 18:00 Fri 18:00			
	Sample Name	Container	Amount	Transfer
	24-hour Urine, HCl treated	Plastic 24-Hour Urine Container	10mL	2-8°C
	Reference Ranges ▼ Normal Values			
Gender	Lower Value	Upper Value	Unit	
	9	71	ug/24 sa	

6	Food Intolerance Test, FOX Test Code : 8019704 - Laboratory Services			
	Method : - Performed : Wed 08:00 - Reported : 1 week			
	Sample Name	Container	Amount	Transfer
Serum	Separator Tube	0,5mL	2-8°C	

Exom Sequencing (WES, Trio) with CNV

Test Code : **8392673** - Genetic Diagnosis Tests

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Method : **NEXT GENERATION SEQUENCING (NGS)** - Performed : **Mon-Sat** - Reported : **8 week**

Sample Name	Container	Amount	Transfer
Whole Blood	Lavender (EDTA)	3mL	18-24°C

*Genetic Approval Form must be filled in for this test.