



Ordering Account: Mayo Medical Laboratories
Referral Testing
3050 Superior Drive NW
Rochester, MN 55901 US
Phone: 800-533-1710
Fax: 507-538-5340

Patient Name:

Accession #: Specimen ID: Ordering Physician: Mayo Medical Laboratories
Date of Birth: Date Collected: Fax: 507-538-5340
Age: Date Received:
Sex: Date Reported:
Submitter ID:

Tetrahydrobiopterin and Neopterin Profile

Sample Type: CSF

Test Code: NC03

Methodology: HPLC - Electrochemistry & Fluorescence

	Patient Result (nmol/L)	Reference Range (nmol/L)
Neopterin	13	7-65
Tetrahydrobiopterin	31	18-58

Interpretation:

The concentrations of tetrahydrobiopterin and neopterin in CSF were within our reference ranges.

Note: If test results are inconsistent with the clinical presentation, please call our laboratory to discuss the case and /or submit a second sample for confirmatory testing. An important consideration for false positive or false negative test results is the improper labeling of the patient sample.

DISCLAIMER required by the FDA for high complexity clinical laboratories: This test was developed and its performance characteristics determined by Medical Neurogenetics, LLC. It has not been cleared or approved by the U.S. FDA.

Performing Labs

Component Type	Performed At	Laboratory Director
Technical Component	Medical Neurogenetics, LLC, 5424 Glenridge Drive, Atlanta, GA 30342	Geraldine A. McDowell, PhD FACMG
Professional Component	Medical Neurogenetics, LLC, 5424 Glenridge Drive, Atlanta, GA 30342	Geraldine A. McDowell, PhD FACMG

For inquiries, the physician may contact the lab at 1-844-MNG-TEST.

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Reported By: Keith Levert, PhD, in consultation with Keith Hyland, PhD