



 Name:
 Smith, John
 Printed Date:
 6/30/2023

 SSN:
 xxx-xx-6789
 Completed Date:
 6/30/2023

**Customer Location:** ABC101#00001 **Control Code:** 

SSN: 295-80-0051 Account Number: 107632583

Patient Name: SMITH, JOHN ID: QD19858697

Collection Date: 6/21/2023

Spec Date: 06/21/2023 Date Sent: 06/21/2023

Clin Info: Test Reason: PRE-EMPLOYMENT

871809Q DRUG RESULTS

Substance: Amphetamines Negative
Substance: Barbiturates Negative
Substance: Cocaine Metabolites Negative
Substance: Phencyclidine Negative
Substance: Marijuana Metabolites Positive
Substance: Benzodiazepines Negative
Substance: Methadone Negative
Substance: Methaqualone Negative
Substance: Propoxyphene Negative
Substance: Opiates Negative

NOTES

MR0 INTERVIEW CONDUCTED-- At the donor's request, we are advising you that the donor claimed to have a Medical Marijuana Card or Recommendation during their interview. We do not consider Medical Marijuana in determining final results and no verification of the donor's claim was made.

NOTE: PLEASE REFER TO CCF FOR COLLECTOR COMMENTS

## Fair Credit Reporting Act Notice

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