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**HELICOBACTER PYLORI BREATH TEST
REPORT SHEET**

Patient Name..... **DOE, JEFFERSON**
Patient Number..... **76767**
Date of Birth..... **9/4/1970**
Doctor..... **R. Physician, MD**
Address..... **Northland, CA**
Date Sample Collected..... **4/7/2009**
Date of Assay..... **4/8/2009**

RESULT

(Degradations Per Minute)

603

INTERPRETATION

**POSITIVE
FOR *HELICOBACTER PYLORI***

Guide to Interpretation:

< 50 DPM.....	Negative for <i>H. pylori</i>
50 - 199 DPM.....	Indeterminate for <i>H. pylori</i>
≥ 200 DPM.....	Positive for <i>H. pylori</i>

Comments: