

Datum:  
Date

Chargen-Nr.:  
Lot No.

Durchführende Person:  
Testing person

Antikörper-Subklasse:  
Antibody subclass

  
IgG  
IgM

# recomWell FSME / TBE Virus

Art.Nr. 6504 / 6505

Art.No.

**MIKROGEN**  
D I A G N O S T I K

Floriansbogen 2-4  
D-82061 Neuried  
Tel. +49 89 54801-0  
Fax +49 89 54801-100

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A												
B												
C												
D												
E												
F												
G												
H												