

Client: Example Client ABC123  
123 Test Drive  
Salt Lake City, UT 84108  
UNITED STATES

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 5/7/1959  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Entamoeba histolytica (amebiasis), Antibody, IgG**

ARUP test code 0050070

E. histolytica (amebiasis), Ab, IgG

3 U

(Ref Interval: <=8)

INTERPRETIVE INFORMATION: E. Histolytica (Amebiasis) Ab

8 U or less ..... Negative - No significant level of detectable E. histolytica IgG antibody.  
9 - 11 U ..... Equivocal - Repeat testing in 10-14 days may be helpful.  
12 U or greater ..... Positive - IgG antibody to E. histolytica detected, suggestive of a current or past infection.

Seroconversion between acute and convalescent sera is considered strong evidence of recent infection. The best evidence for infection is a significant change on two appropriately timed specimens where both tests are done in the same laboratory at the same time.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
E. histolytica (amebiasis), Ab, IgG	23-100-146545	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

**H=High, L=Low, \*=Abnormal, C=Critical**

Unless otherwise indicated, testing performed at: