

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 9/27/1958  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Rickettsia typhi (Typhus Fever) Antibody, IgM by IFA**

ARUP test code 0050383

Typhus Fever Antibody, IgM

**>1:1024 H (Ref Interval: <1:64)**

INTERPRETIVE INFORMATION: Typhus Fever Antibody, IgM

Less than 1:64 ..... Negative-No significant level of IgM antibody detected.

1:64 or greater ..... Positive-Presence of IgM antibody detected, which may indicate a current or recent infection; however, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.

Antibody reactivity to Rickettsia typhi antigen should be considered group-reactive for the Typhus Fever group, which includes Rickettsia prowazekii.

Seroconversion between acute and convalescent sera is considered strong evidence of recent infection. The best evidence is a significant change (fourfold difference in titer) on two appropriately timed specimens, where both tests are done in the same laboratory at the same time. Acute-phase specimens are collected during the first week of illness and convalescent-phase samples are generally obtained 2-4 weeks after resolution of illness. Ideally these samples should be tested simultaneously at the same facility. If the sample submitted was collected during the acute-phase of illness, submit a marked convalescent sample within 25 days for paired testing.

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

Unless otherwise indicated, testing performed at:

**ARUP LABORATORIES | 800-522-2787 | aruplab.com**  
500 Chipeta Way, Salt Lake City, UT 84108-1221  
Tracy I. George, MD, Laboratory Director

Patient: Patient, Example  
ARUP Accession: 20-106-106688  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
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VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Typhus Fever Antibody, IgM	20-106-106688	4/15/2020 12:17:00 AM	4/16/2020 10:59:12 AM	4/18/2020 7:12:00 PM

END OF CHART

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

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