

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 2/22/1968  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Coccidioides Antibodies Panel, Serum by CF, ID, ELISA**

ARUP test code 0050588

**Coccidioides Antibody by CF** <1:2 (Ref Interval: <1:2)  
 INTERPRETIVE INFORMATION: Coccidioides Ab by Complement Fixation (CF)  
 Any titer suggests past or current infection. However, greater than 30 percent of cases with chronic residual pulmonary disease have negative Complement Fixation (CF) tests. Titers of less than 1:32 (even as low as 1:2) may indicate past infection or self-limited disease; anticoccidioidal CF antibody titers in excess of 1:16 may indicate disseminated infection. CF serology may be used to follow therapy. Antibody in CSF is considered diagnostic for coccidioidal meningitis, although 10 percent of patients with coccidioidal meningitis will not have antibody in CSF.

**Coccidioides Antibody, IgG by ELISA** 0.1 IV (Ref Interval: <=0.9)  
 INTERPRETIVE INFORMATION: Coccidioides Antibody, IgG:  
 0.9 IV or less: Negative - No significant level of Coccidioides IgG antibody detected.  
 1.0 - 1.4 IV: Equivocal - Questionable presence of Coccidioides IgG antibody detected. Repeat testing in 10-14 days may be helpful.  
 1.5 IV or greater: Positive - Presence of IgG antibody to Coccidioides detected, suggestive of current or past infection.  
 IgG antibody usually appears by the third week of infection and may persist for years. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

**Coccidioides Antibody, IgM by ELISA** 0.2 IV (Ref Interval: <=0.9)

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

Unless otherwise indicated, testing performed at:

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgM:

0.9 IV or less: Negative - No significant level of Coccidioides IgM antibody detected.  
1.0 - 1.4 IV: Equivocal - Questionable presence of Coccidioides IgM antibody detected. Repeat testing in 10-14 days may be helpful.  
1.5 IV or greater: Positive - Presence of IgM antibody to Coccidioides detected, suggestive of current or recent infection.

In most symptomatic patients, IgM antibody usually appears by the second week of infection and disappears by the fourth month. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

Coccidioides immitis Abs, Precipitin

None Detected (Ref Interval: None Detected)

INTERPRETIVE INFORMATION: Coccidioides immitis Antibodies by Immunodiffusion

Coccidioides infection is demonstrated by the detection of IgM antibody to the Immunodiffusion Tube Precipitin (IDTP) antigen. IgM antibody may be detected 1 to 3 weeks after the onset of primary infection and may suggest active or recent infection. IgM antibody is rarely detected 6 months after infection but may reappear with relapse and may persist in disseminated cases.

IgG antibody may also be demonstrated in response to the Immunodiffusion Complement Fixation (IDCF) antigen and may represent active or past infection. Negative fungal serology does not rule out current infection.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Coccidioides Antibody by CF	19-018-120332	1/18/2019 12:42:00 PM	1/19/2019 2:10:57 PM	1/22/2019 8:02:00 AM
Coccidioides Antibody, IgG by ELISA	19-018-120332	1/18/2019 12:42:00 PM	1/19/2019 2:10:57 PM	1/21/2019 11:45:00 AM
Coccidioides Antibody, IgM by ELISA	19-018-120332	1/18/2019 12:42:00 PM	1/19/2019 2:10:57 PM	1/21/2019 11:45:00 AM
Coccidioides immitis Abs, Precipitin	19-018-120332	1/18/2019 12:42:00 PM	1/19/2019 2:10:57 PM	1/22/2019 3:53:00 PM

END OF CHART

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

Unless otherwise indicated, testing performed at: