

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 8/20/2004  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Epstein-Barr Virus Antibody Panel I**

ARUP test code 0050600

**EBV Antibody to Viral Capsid Antigen IgG** <10.0 U/mL (Ref Interval: 0.0-21.9)  
 INTERPRETIVE INFORMATION: Epstein-Barr Virus Antibody to Viral Capsid Antigen, IgG  
 17.9 U/mL or less.....Not Detected  
 18.0-21.9 U/mL.....Indeterminate - Repeat testing in 10-14 days may be helpful.  
 22.0 U/mL or greater....Detected

**EBV Antibody to Viral Capsid Antigen IgM** <10.0 U/mL (Ref Interval: 0.0-43.9)  
 INTERPRETIVE INFORMATION: Epstein-Barr Virus Antibody to Viral Capsid Antigen, IgM  
 35.9 U/mL or less.....Not Detected  
 36.0-43.9 U/mL.....Indeterminate - Repeat testing in 10-14 days may be helpful.  
 44.0 U/mL or greater....Detected

**EBV Antibody to Nuclear Antigen IgG** <3.0 U/mL (Ref Interval: 0.0-21.9)  
 INTERPRETIVE INFORMATION: Epstein-Barr Virus Antibody to Nuclear Antigen, IgG  
 17.9 U/mL or less.....Not Detected  
 18.0-21.9 U/mL.....Indeterminate - Repeat testing in 10-14 days may be helpful.  
 22.0 U/mL or greater....Detected

**EBV Antibody to Early (D) Antigen IgG** <5.0 U/mL (Ref Interval: 0.0-10.9)  
 INTERPRETIVE INFORMATION: Epstein-Barr Virus Antibody to Early D Antigen (EA-D), IgG  
 8.9 U/mL or less.....Not Detected  
 9.0-10.9 U/mL.....Indeterminate - Repeat testing in 10-14 days may be helpful.  
 11.0 U/mL or greater....Detected

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

Unless otherwise indicated, testing performed at:

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
EBV Antibody to Viral Capsid Antigen IgG	24-199-143276	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
EBV Antibody to Viral Capsid Antigen IgM	24-199-143276	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
EBV Antibody to Nuclear Antigen IgG	24-199-143276	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
EBV Antibody to Early (D) Antigen IgG	24-199-143276	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:

ARUP LABORATORIES | 800-522-2787 | aruplab.com  
500 Chipeta Way, Salt Lake City, UT 84108-1221  
Jonathan R. Genzen, MD, PhD, Laboratory Director

Patient: Patient, Example  
ARUP Accession: 24-199-143276  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
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