

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 7/24/1997  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Cytomegalovirus Antibodies, IgG and IgM**

ARUP test code 0050622

**CMV Antibody IgG**

<0.20 U/mL

INTERPRETIVE INFORMATION: Cytomegalovirus Antibody, IgG

0.59 U/mL or less..... Not Detected  
0.6 - 0.69 U/mL..... Indeterminate-Repeat testing in  
10-14 days may be helpful.  
0.70 U/mL or greater..... Detected

In immunocompromised patients, CMV serology (IgG or IgM antibody titers) may not be reliable and may be misleading in the diagnosis of acute or reactivation CMV disease. The preferred method for diagnosis is culture of virus and/or demonstration of viral antigen in peripheral white cells (buffy coat), bronchoalveolar lavage (BAL) cells, or tissue biopsies.

This test should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cell, Tissues and Cellular and Tissue-Based Products (HCT/P).

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

**CMV Antibody IgM**

<8.0 AU/mL (Ref Interval: <=29.9)

INTERPRETIVE INFORMATION: Cytomegalovirus Antibody, IgM

29.9 AU/mL or Less ..... Not Detected  
30.0-34.9 AU/mL..... Indeterminate-Repeat testing  
in 10-14 days may be helpful.  
35.0 AU/mL or Greater .... Detected-IgM antibody to CMV  
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.

CMV serology is not useful for the evaluation of active or reactivated infection in immunocompromised patients. Molecular diagnostic tests (i.e. PCR) are preferred in these cases.

This test should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cell, Tissues and Cellular and Tissue-Based Products (HCT/P).

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

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
CMV Antibody IgG	20-115-122042	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CMV Antibody IgM	20-115-122042	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