

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

Physician: Doctor, Example

Patient: Patient, Example

DOB 12/31/1969 **Gender:** Female

Patient Identifiers: 01234567890ABCD, 012345

Visit Number (FIN): 01234567890ABCD **Collection Date:** 00/00/0000 00:00

Toxoplasma gondii Antibody, IgG

ARUP test code 0050770

Toxoplasma gondii Ab, IgG

9.6 IU/mL H (Ref Interval: <=8.8)

INTERPRETIVE INFORMATION: Toxoplasma Ab, IgG

7.1 IU/mL or less..... Not Detected

7.2-8.7 IU/mL Indeterminate-Repeat testing in 10-14 days may be helpful.

8.8 IU/mL or greater ... Detected

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.

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 magnitude of the measured result is not indicative of the amount of antibody present.

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Toxoplasma gondii Ab, IgG	24-009-118955	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

4848