

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 2/17/1982
Gender: Female
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Epithelial Cell Surface Antibody IgG

ARUP test code 0090266

Epithelial Cell Surface Ab IgG

See Note
IMMUNODERMATOLOGY REPORT

Specimen(s):
1. Serum specimen

Clinical/Diagnostic Information:
No clinical information provided.

DIAGNOSTIC INTERPRETATION

Negative IgG cell surface antibodies by indirect immunofluorescence with incidentally observed positive, potentially obfuscating, IgG antinuclear antibodies by indirect immunofluorescence

(See Results, Comments, separate concurrent IgG Desmoglein 1 and IgG Desmoglein 3 Antibodies, IgA Pemphigus Antibody, Paraneoplastic Pemphigus Antibody Screen, and IgA Epidermal Transglutaminase (eTG or transglutaminase type 3, TG3) Antibody testing reports with negative/normal findings and additional comments, and Concurrent Cell Surface Antibody Test Results Summary Chart)

RESULTS

Indirect Immunofluorescence

Cell surface IgG Antibodies

IgG: Negative, monkey esophagus substrate
Negative, intact human skin substrate

Positive IgG antinuclear antibodies, monkey esophagus and intact human skin substrates

Reference Range:

Positive - Titer greater than 1:10
Borderline - Titer 1:10
Negative - Titer less than 1:10

(H = high/positive)

COMMENTS

Specific

These negative indirect immunofluorescence results for IgG cell surface antibodies are against, but do not rule out, the diagnosis of pemphigus vulgaris, pemphigus foliaceus, or other

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

IgG pemphigus variants.

IgG antinuclear antibody staining incidentally is observed in this indirect immunofluorescence testing. Although the substrates and methodology used here are not standard for antinuclear antibody testing, such staining may indicate antinuclear antibodies in standard test assays and/or such staining may obfuscate other antibody staining. Recommend consideration for further testing and clinical correlation for relevance.

In certain patients with pemphigus foliaceus and pemphigus vulgaris, IgG desmoglein 1 and/or IgG desmoglein 3 antibody levels by ELISAs may be more sensitive diagnostic markers than indirect immunofluorescence. Concurrent IgG Desmoglein 1 and IgG Desmoglein 3 Antibodies, IgA Pemphigus Antibody, Paraneoplastic Pemphigus Antibody Screen, and IgA Epidermal Transglutaminase (eTG or transglutaminase type 3, TG3) Antibody testing results demonstrate negative/normal findings (separate reports with additional comments). See chart (below) for summary of concurrent test results.

CONCURRENT TEST RESULTS SUMMARY CHART

Cell Surface Antibodies

Serum Number	Date of Specimen	IgG CS Titers	IgA CS Titers	DSG 1	DSG 3
18-4774 (See Notes 1,2,3)	10/10/18	ME: Neg NS: Neg	ME: NA NS: NA	NA	NA
18-4775 (See Notes 2, 3)	10/10/18	ME: NA NS: NA	ME: NA NS: NA	1	3
18-4776 (See Notes 2, 3)	10/10/18	ME: NA NS: NA	ME: Neg NS: Neg	NA	NA

Note 1: Incidentally observed positive, potentially obfuscating, IgG antinuclear antibodies by indirect immunofluorescence

Note 2: Negative IgG paraneoplastic pemphigus antibodies on rodent substrates with incidentally observed positive IgG antinuclear antibodies by indirect immunofluorescence in concurrent Paraneoplastic Pemphigus Antibody Screen (serum 18-4777) testing

Note 3: Normal IgA epidermal transglutaminase antibody level by ELISA in concurrent IgA Epidermal Transglutaminase (eTG or transglutaminase type 3, TG3) Antibody (serum 18-4778) testing

Chart Key:

IgG CS = IgG cell surface (CS) antibodies by indirect immunofluorescence with titer if positive

IgA CS = IgA cell surface (CS) antibodies by indirect immunofluorescence with titer if positive

ME = Antibody absence (negative) or antibody presence (positive endpoint titer) on monkey esophagus (ME) substrate

NS = Antibody absence (negative) or antibody presence (positive endpoint titer) on intact human normal skin (NS) substrate

DSG 1 = IgG desmoglein 1 antibody level (Units/mL) by ELISA

DSG 3 = IgG desmoglein 3 antibody level (Units/mL) by ELISA

Neg = Negative

NA = Not Assayed

COMMENTS

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General

Greater than 80 percent of patients with pemphigus have positive epithelial cell surface antibodies in their sera identified by indirect immunofluorescence. Serum antibody titers correlate with disease activity. Cell surface antibodies are implicated in the pathophysiology of pemphigus and are not typically detected in normal individuals, in patients with other diseases or in patients with pemphigus whose disease activity is minimal and/or under therapeutic control.

TESTING METHODS

Indirect Immunofluorescence

Cell Surface IgG Antibodies

The patients serum is progressively diluted in calcium-containing buffer beginning at 1:10 in three two-fold screening dilutions, layered on sections of intact normal human skin and monkey esophagus substrates, and stained with fluorescein-conjugated anti-IgG using Analyte Specific Reagents (ASRs). When positive, the serum is further diluted in two-fold reductions to the limiting dilution of antibody detection or to a maximum dilution of 1:40,960. These tests were developed and their performance characteristics determined by the Immunodermatology Laboratory at the University of Utah. They have not been cleared or approved by the U.S. Food and Drug Administration. ASRs are used in many laboratory tests necessary for standard medical care and generally do not require FDA approval. These tests should not be regarded as investigational or for research only. [Immunofluorescence studies, one antibody on two substrates]

Kristin M Leiferman, MD
 Immunodermatologist
 Electronically signed 10/17/2018 11:36:47PM
 Performed at: ARUP - University Hospital Laboratory 50 N.
 Medical Drive Salt Lake City UT 84132

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Epithelial Cell Surface Ab IgG	18-285-400095	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