

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 12/26/1981  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Histoplasma Antigen by EIA, Serum**

ARUP test code 0092522

Histoplasma Antigen, Serum <2.0 U/mL

Histoplasma Antigen, Serum Interp

Negative (Ref Interval: Negative)

REFERENCE INTERVAL: Histoplasma Antigen, Serum By EIA  
 Less than 2.0 U/mL ..... Negative.  
 2.0 - 4.0 U/mL ..... Weak Positive.  
 Greater than 4.1 U/mL ..... Positive.

INTERPRETIVE INFORMATION: Histoplasma Antigen, Serum

This EIA test should be used in conjunction with other diagnostic procedures, including microbiological culture, histological examination of biopsy samples, and/or radiographic evidence, to aid in the diagnosis of histoplasmosis.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Histoplasma Antigen, Serum	19-140-112749	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Histoplasma Antigen, Serum Interp	19-140-112749	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