

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 10/24/1983
Gender: Female
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Acetylcholine Receptor Antibody Reflexive Panel

ARUP test code 2001571

Acetylcholine Binding Antibody 0.0 nmol/L (Ref Interval: 0.0-0.4)

Acetylcholine receptor binding antibody result is negative. Sample will not reflex to modulating antibody testing unless blocking result is 27 percent or greater.

INTERPRETIVE INFORMATION: Acetylcholine Binding Ab

Negative 0.0 - 0.4 nmol/L
Positive 0.5 nmol/L or greater

Approximately 85-90 percent of patients with myasthenia gravis (MG) express antibodies to the acetylcholine receptor (AChR), which can be divided into binding, blocking, and modulating antibodies. Binding antibody can activate complement and lead to loss of AChR. Blocking antibody may impair binding of acetylcholine to the receptor, leading to poor muscle contraction. Modulating antibody causes receptor endocytosis resulting in loss of AChR expression, which correlates most closely with clinical severity of disease. Approximately 10-15 percent of individuals with confirmed myasthenia gravis have no measurable binding, blocking, or modulating antibodies.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Acetylcholine Blocking Antibody 9 % (Ref Interval: 0-26)

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

INTERPRETIVE INFORMATION: Acetylcholine Blocking Ab

Negative 0-26 percent blocking
Indeterminate 27-41 percent blocking
Positive 42 percent or greater blocking

Approximately 85-90 percent of patients with myasthenia gravis (MG) express antibodies to the acetylcholine receptor (AChR), which can be divided into binding, blocking, and modulating antibodies. Binding antibody can activate complement and lead to loss of AChR. Blocking antibody may impair binding of acetylcholine to the receptor, leading to poor muscle contraction. Modulating antibody causes receptor endocytosis resulting in loss of AChR expression, which correlates most closely with clinical severity of disease. Approximately 10-15 percent of individuals with confirmed myasthenia gravis have no measurable binding, blocking, or modulating antibodies.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

VERIFIED/REPORTED DATES

| Procedure | Accession | Collected | Received | Verified/Reported |
|---------------------------------|---------------|------------------|------------------|-------------------|
| Acetylcholine Binding Antibody | 24-097-400436 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Acetylcholine Blocking Antibody | 24-097-400436 | 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: