

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 5/18/1947
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 01/01/2017 12:34

Arbovirus Antibodies, IgG, Serum

ARUP test code 2001593

West Nile Virus Ab, IgG, Ser

0.44 IV (Ref Interval: <=1.29)
INTERPRETIVE INFORMATION: West Nile Virus Ab, IgG by ELISA, Serum

| | |
|--------------------|--|
| 1.29 IV or less | Negative - No significant level of West Nile virus IgG antibody detected. |
| 1.30 - 1.49 IV | Equivocal - Questionable presence of West Nile virus IgG antibody detected. Repeat testing in 10-14 days may be helpful. |
| 1.50 IV or greater | Positive - Presence of IgG antibody to West Nile virus detected, suggestive of current or past infection. |

This test is intended to be used as a semi-quantitative means of detecting West Nile virus-specific IgG in serum samples in which there is a clinical suspicion of West Nile virus infection. This test should not be used solely for quantitative purposes, nor should the results be used without correlation to clinical history or other data. Because other members of the Flaviviridae family, such as St. Louis encephalitis virus, show extensive cross-reactivity with West Nile virus, serologic testing specific for these species should be considered.

Seroconversion between acute and convalescent sera is considered strong evidence of current or recent infection. The best evidence for infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Calif Encephalitis Antibody IgG

< 1:16 (Ref Interval: < 1:16)
INTERPRETIVE DATA: California Encephalitis Antibody, IgG by IFA

A positive result for IgG may suggest a current or recent infection. LaCrosse virus is related to viruses within the California Encephalitis Group and, generally, is reactive with antibody to other viruses within this group.

Eastern Equine Enceph Ab, IgG

< 1:16 (Ref Interval: < 1:16)

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

Unless otherwise indicated, testing performed at:

INTERPRETIVE DATA: Eastern Equine Encephalitis Antibody, IgG by IFA

A positive result for IgG may suggest current or recent infection. Eastern equine encephalitis and western equine encephalitis viruses are both related and will show cross-reactivity. Initial infection by one of these viruses will show a specific rise in titer which is higher than titers against any other viruses of the group. A subsequent infection by another virus within this group, however, will boost the titer against the initial infecting virus (anamnestic response) and make a specific diagnosis difficult.

Western Equine Enceph Ab, IgG, Serum

< 1:16 (Ref Interval: < 1:16)

INTERPRETIVE DATA: Western Equine Encephalitis Antibody, IgG by IFA

A positive result for IgG may indicate current or past infection. Eastern equine encephalitis and western equine encephalitis viruses are both related and will show cross-reactivity. Initial infection by one of these viruses will show a specific rise in titer which is higher than titers against any other viruses of the group. A subsequent infection by another virus within this group, however, will boost the titer against the initial infecting virus (anamnestic response) and make a specific diagnosis difficult.

St. Louis Encephalitis Ab, IgG, Serum

< 1:16 (Ref Interval: < 1:16)

INTERPRETIVE DATA: St. Louis Encephalitis Antibody, IgG BY IFA

A positive result for IgG may suggest current or recent St. Louis encephalitis viral antigen and, therefore, cannot be differentiated further. The specific virus responsible for such a titer must be deduced by the travel history of the patient, along with available medical and epidemiological data, unless the virus can be isolated.

VERIFIED/REPORTED DATES

| Procedure | Accession | Collected | Received | Verified/Reported |
|---------------------------------------|---------------|----------------------|----------------------|-----------------------|
| West Nile Virus Ab, IgG, Ser | 19-233-100966 | 8/21/2019 3:44:00 AM | 8/22/2019 7:03:18 AM | 8/22/2019 10:33:00 PM |
| Calif Encephalitis Antibody IgG | 19-233-100966 | 8/21/2019 3:44:00 AM | 8/22/2019 7:03:18 AM | 8/26/2019 5:42:00 AM |
| Eastern Equine Enceph Ab, IgG | 19-233-100966 | 8/21/2019 3:44:00 AM | 8/22/2019 7:03:18 AM | 8/26/2019 5:42:00 AM |
| Western Equine Enceph Ab, IgG, Serum | 19-233-100966 | 8/21/2019 3:44:00 AM | 8/22/2019 7:03:18 AM | 8/26/2019 5:42:00 AM |
| St. Louis Encephalitis Ab, IgG, Serum | 19-233-100966 | 8/21/2019 3:44:00 AM | 8/22/2019 7:03:18 AM | 8/26/2019 5:42:00 AM |

END OF CHART

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

Unless otherwise indicated, testing performed at:

ARUP LABORATORIES | 800-522-2787 | aruplab.com
500 Chipeta Way, Salt Lake City, UT 84108-1221
Tracy I. George, MD, Laboratory Director

Patient: Patient, Example
ARUP Accession: 19-233-100966
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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