

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 8/6/1955
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 01/01/2017 12:34

Ganglioside (GM1, GD1b, and GQ1b) Antibodies, IgG and IgM

ARUP test code 2004998

GM1 Antibody, IgG	25 IV	(Ref Interval: 0-50)
GM1 Antibody, IgM	16 IV	(Ref Interval: 0-50)
<p>INTERPRETIVE INFORMATION: Ganglioside (GM1) Antibodies, IgG and IgM</p> <p>29 IV or less: Negative 30-50 IV: Equivocal 51-100 IV: Positive 101 IV or greater: Strong positive</p> <p>Ganglioside antibodies are associated with diverse peripheral neuropathies. Elevated antibody levels to ganglioside-monosialic acid (GM1) are associated with motor or sensorimotor neuropathies, particularly multifocal motor neuropathy. Anti-GM1 may occur as IgM (polyclonal or monoclonal) or IgG antibodies. These antibodies may also be found in patients with diverse connective tissue diseases as well as normal individuals. These tests by themselves are not diagnostic and should be used in conjunction with other clinical parameters to confirm disease.</p> <p>Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS</p>		
GD1b Antibody, IgG	66 IV H	(Ref Interval: 0-50)
GD1b Antibody, IgM	15 IV	(Ref Interval: 0-50)
GQ1b Antibody, IgG	241 IV H	(Ref Interval: 0-50)
GQ1b Antibody, IgM	74 IV H	(Ref Interval: 0-50)

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

Unless otherwise indicated, testing performed at:

INTERPRETIVE INFORMATION: Ganglioside (GD1b and GQ1b) Antibodies, IgG and IgM

29 IV or less: Negative
30-50 IV: Equivocal
51-100 IV: Positive
101 IV or greater: Strong positive

Ganglioside antibodies are associated with diverse peripheral neuropathies. GD1b antibodies are predominantly found in sensory ataxic neuropathy syndrome. GQ1b antibodies are seen in more than 80% of patients with Miller-Fisher syndrome and may be elevated in Guillain-Barre syndrome patients with ophthalmoplegia. These tests by themselves are not diagnostic and should be used in conjunction with other clinical parameters to confirm disease.

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

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
GM1 Antibody, IgG	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 AM
GM1 Antibody, IgM	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 AM
GD1b Antibody, IgG	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 AM
GD1b Antibody, IgM	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 AM
GQ1b Antibody, IgG	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 AM
GQ1b Antibody, IgM	20-036-402840	2/5/2020 10:30:00 AM	2/6/2020 4:56:45 AM	2/7/2020 11:49:00 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: 20-036-402840
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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