Japanese Encephalitis Virus Antibodies, IgG and IgM by ELISA  
ARUP test code 2005689

Japanese Encephalitis Virus Antibody IgG

1.3 IV (Ref Interval: <=5.0)

INTERPRETIVE INFORMATION: Japanese Encephalitis Virus Antibody, IgG by ELISA

1.9 IV or less ....... Negative - No significant level of detectable Japanese encephalitis virus (JEV) IgG antibody.

2.0 - 5.0 IV ......... Equivocal - Questionable presence of JEV IgG antibody. Repeat testing in 10-14 days may be helpful.

5.1 IV or greater .... Positive - JEV IgG antibody detected, which may indicate a current or past infection.

Patients in the early stage of JEV infection may not have a detectable level of IgG antibody; IgG response may take several days or weeks to develop. In the absence of detectable IgG, testing for IgM-class antibody is strongly recommended. A positive result (5.1 IV or greater) indicates the presence of IgG antibodies to a Flavivirus in the Japanese encephalitis serogroup or dengue. Cross-species plaque reduction neutralization tests on paired acute and convalescent sera are an acceptable means of determining which Flavivirus has caused this antibody production.

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.

Japanese Encephalitis Virus Antibody IgM

0.9 IV (Ref Interval: <=6.0)
INTERPRETIVE INFORMATION: Japanese Encephalitis Virus Antibody, IgM by ELISA

3.9 IV or less ....... Negative - No significant level of detectable Japanese encephalitis virus (JEV) IgM antibody.

4.0 - 6.0 IV ........ Equivocal - Questionable presence of JEV IgM antibody. Repeat testing in 10-14 days may be helpful.

6.1 IV or greater .... Positive - JEV IgM antibody detected, which may indicate a current or recent infection. A low IgM antibody level may occasionally persist for more than 12 months post-infection.

A positive result (6.1 IV or greater) indicates the presence of IgM antibody to a flavivirus in the Japanese encephalitis serogroup or the dengue virus serogroup. The best evidence of current infection is a significant change on two appropriately timed specimens with both tests performed in the same laboratory at the same time.

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VERIFIED/REPORTED DATES

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