

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 8/14/1939
Gender: Female
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Herpes Simplex Virus Type 1 Glycoprotein G-Specific Antibody, IgG by CIA

ARUP test code 0050292

HSV 1 Glycoprotein G Ab, IgG

8.80 IV H (Ref Interval: <=0.89)

REFERENCE INTERVAL: HSV 1 Glycoprotein G Ab, IgG

- 0.89 IV or less Negative - No significant level of detectable IgG antibody to HSV type 1 glycoprotein G.
- 0.90 - 1.09 IV Equivocal - Questionable presence of IgG antibody to HSV type 1 glycoprotein G. Repeat testing in 10 - 14 days may be helpful.
- 1.10 IV or greater ... Positive - IgG antibody to HSV type 1 glycoprotein G detected, which may indicate a current or past HSV infection.

Individuals infected with HSV may not exhibit detectable IgG antibody to type-specific HSV antigens 1 and 2 in early stages of infection. Detection of antibody presence in these cases may only be possible using a non-type specific screening test.

Herpes Simplex Virus Type 2 Glycoprotein G-Specific Antibody, IgG by CIA

ARUP test code 0050294

HSV 2 Glycoprotein G Antibody, IgG

1.16 IV H (Ref Interval: <=0.89)

REFERENCE INTERVAL: HSV 2 Glycoprotein G Ab, IgG

- 0.89 IV or less Negative - No significant level of detectable IgG antibody to HSV type 2 glycoprotein G.
- 0.90 - 1.09 IV Equivocal - Questionable presence of IgG antibody to HSV type 2 glycoprotein G. Repeat testing in 10 - 14 days may be helpful.
- 1.10 IV or greater Positive - IgG antibody to HSV type 2 glycoprotein G detected, which may indicate a current or past HSV infection.

Individuals infected with HSV may not exhibit detectable IgG antibody to type-specific HSV antigens 1 and 2 in early stages of infection. Detection of antibody presence in these cases may only be possible using a non-type specific screening test.

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

Encephalitis Panel with Reflex to Herpes Simplex Virus Types 1 and 2 Glycoprotein G-Specific Antibodies, IgG, Serum

ARUP test code 2008915

HSV Type 1/2 Combined Ab, IgG

14.60 IV

Specimen tested positive for Herpes Simplex Virus Type 1 and/or 2 Antibodies, IgG. ARUP test codes 0050292 and 0050294 will be added. Additional charges apply.

INTERPRETIVE INFORMATION: HSV 1/2 COMBINED Ab SCREEN, IgG
0.89 IV or less.....Not Detected
0.90-1.09 IV.....Indeterminate- Repeat testing
in 10-14 days may be helpful.
1.10 IV or greater.....Detected

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

HSV 1 and/or 2 Abs, IgM by ELISA

1.19 IV H (Ref Interval: <=0.89)

INTERPRETIVE INFORMATION: Herpes Simplex Virus Type 1 and/or 2 Antibodies, IgM by ELISA

0.89 IV or Less Not Detected
0.90 - 1.09 IV Indeterminate- Repeat testing in
10-14 days may be helpful.
1.10 IV or Greater Detected-IgM antibody to HSV
detected, which may indicate a
current or recent infection.
However, low levels of IgM
antibodies may occasionally
persist for more than 12
months post-infection.

West Nile Virus Ab, IgG, Ser

4.01 IV H (Ref Interval: <=1.29)

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

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.

West Nile Virus Ab, IgM, Ser

0.00 IV (Ref Interval: <=0.89)

INTERPRETIVE INFORMATION: West Nile Virus Ab, IgM by ELISA, Serum

- 0.89 IV or less Negative - No significant level of West Nile virus IgM antibody detected.
- 0.90-1.10 IV Equivocal - Questionable presence of West Nile virus IgM antibody detected. Repeat testing in 10-14 days may be helpful.
- 1.11 IV or greater ... Positive - Presence of IgM antibody to West Nile virus detected, suggestive of current or recent infection.

This test is intended to be used as a semi-quantitative means of detecting West Nile virus-specific IgM 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.

Mumps Virus Antibody, IgG

<5.0 AU/mL

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

INTERPRETIVE INFORMATION: Mumps Ab, IgG by CIA

- 8.9 AU/mL or less Negative - No significant level of detectable IgG mumps virus antibody
- 9.0-10.9 AU/mL Equivocal - Repeat testing in 10-14 days may be helpful
- 11.0 AU/mL or greater: Positive - IgG antibody to mumps virus detected, which may indicate a current or past exposure/immunization to mumps virus.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Mumps Virus Antibody, IgM

0.11 IV (Ref Interval: <=0.79)

INTERPRETIVE INFORMATION: Mumps Virus Antibody, IgM

- 0.79 IV or less: Negative - No significant level of detectable IgM antibody to mumps virus.
- 0.80 - 1.20 IV: Equivocal - Borderline levels of IgM antibody to mumps virus. Repeat testing in 10-14 days may be helpful.
- 1.21 IV or greater: Positive - Presence of IgM antibody to mumps virus detected, which may indicate a current or recent infection. However, low levels of IgM antibody may occasionally persist for more than 12 months post-infection or immunization.

Measles, Rubeola, Antibody IgG

>300.0 AU/mL

INTERPRETIVE INFORMATION: Measles (Rubeola) Antibody, IgG

- 13.4 AU/mL or less..... Negative - No significant level of detectable measles (rubeola) IgG antibody.
- 13.5-16.4 AU/mL Equivocal - Repeat testing in 10-14 days may be helpful.
- 16.5 AU/mL or greater Positive - IgG antibody to measles (rubeola) detected which may indicate a current or past exposure/immunization to measles (rubeola).

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Measles, Rubeola, Antibody IgM

0.12 AU (Ref Interval: 0.00-0.79)

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

INTERPRETIVE INFORMATION: Measles (Rubeola) Antibody, IgM

0.79 AU or less Negative - No significant level of IgM antibody to measles (Rubeola) virus detected.
 0.80 - 1.20 AU Equivocal - Repeat testing in 10-14 days may be helpful.
 1.21 AU or greater Positive - IgM antibody to measles (Rubeola) virus detected. Suggestive of a current or recent infection or immunization. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection or immunization.

Varicella-Zoster Virus Ab, IgG

744.0 IV

INTERPRETIVE INFORMATION: VZV Ab, IgG

134.9 IV or less Negative - No significant level of detectable IgG varicella-zoster antibody.
 135.0 - 164.9 IV Equivocal - Repeat testing in 10-14 days may be helpful.
 165.0 IV or greater Positive - IgG antibody to varicella-zoster detected, which may indicate a current or past varicella-zoster infection.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Varicella-Zoster Virus Antibody, IgM

0.11 ISR

(Ref Interval: <=0.90)

INTERPRETIVE INFORMATION: Varicella-Zoster Virus Antibody, IgM

0.90 ISR or less Negative - No significant level of detectable varicella-zoster virus IgM antibody.
 0.91-1.09 ISR Equivocal - Repeat testing in 10-14 days may be helpful.
 1.10 ISR or greater Positive - Significant level of detectable varicella-zoster virus IgM antibody. Indicative of current or recent infection. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection or immunization.

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

VERIFIED/REPORTED DATES

| Procedure | Accession | Collected | Received | Verified/Reported |
|--------------------------------------|---------------|------------------|------------------|-------------------|
| HSV Type 1/2 Combined Ab, IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| HSV 1 and/or 2 Abs, IgM by ELISA | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| West Nile Virus Ab, IgG, Ser | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| West Nile Virus Ab, IgM, Ser | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Mumps Virus Antibody, IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Mumps Virus Antibody, IgM | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| HSV 1 Glycoprotein G Ab, IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| HSV 2 Glycoprotein G Antibody, IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Measles, Rubeola, Antibody IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Measles, Rubeola, Antibody IgM | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Varicella-Zoster Virus Ab, IgG | 22-124-143467 | 00/00/0000 00:00 | 00/00/0000 00:00 | 00/00/0000 00:00 |
| Varicella-Zoster Virus Antibody, IgM | 22-124-143467 | 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:

ARUP LABORATORIES | 800-522-2787 | aruplab.com
500 Chipeta Way, Salt Lake City, UT 84108-1221
Jonathan R. Genzen, MD, PhD, Laboratory Director

Patient: Patient, Example
ARUP Accession: 22-124-143467
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Page 6 of 6 | Printed: 6/1/2022 2:14:13 PM
4848