

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 4/14/1968  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Antimicrobial Level - Rifabutin by HPLC, Serum or Plasma**

ARUP test code 2009363

Antimicrobial Level - Rifabutin Ser/Pla

See Note

Performed By: National Jewish Center, Advanced Diag  
1400 Jackson St  
Denver, CO 80206

Rifabutin - Comment

See Note

**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: 23-300-402259  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
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4848

Drug Level	Conc.	Unit	Flags
Rifabutin Level by HPLC	0.42	mcg/mL	

Test Name: Rifabutin Level  
 Specimen Type: Serum  
 Time/Date of Last Dose: Not Provided  
 Dose: Not Provided  
 Rifabutin Level: 0.42 mcg/mL

**Interpretation:**  
 The target range for rifabutin when treating mycobacterial infections is 0.3 to 0.9 mcg/mL at 3 to 4 hours after oral dose. Samples drawn later than 4 hours after the dose may display concentrations below the stated range. Samples drawn earlier than 7 days into treatment with rifabutin may not represent steady-state concentrations.

Rifabutin may be given with food if necessary for patient tolerance. This may reduce the peak concentration, but total absorption does not appear to be significantly changed. If rifabutin must be taken with food, peak blood draws should be delayed until 4 to 5 hours post dose.

Although data are lacking, avoid antacids within 2 hours of rifabutin dosing if possible.

Elevated serum rifabutin concentrations have been reported with concomitant administration of macrolide antibiotics and/or fluconazole and itraconazole. Other medications that inhibit hepatic microsomal enzymes may cause the same interaction.

There is a potential association between uveitis and elevated serum rifabutin concentrations. If the patient reports eye pain, redness or loss of vision, discontinue rifabutin and obtain ophthalmic evaluation. Arthralgias, leukopenia, and skin discoloration also have been associated with elevated rifabutin concentrations.

If the time of the dose and the blood draw were not accurately recorded, accurate interpretation of the concentration is not possible.

For additional information, including methodology, please contact the laboratory.

The performance characteristics for this test have been validated by Advanced Diagnostic Laboratories at National Jewish Health. It has not been cleared or approved by the US Food and Drug Administration.

The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.

This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA 88) as qualified to perform high complexity clinical laboratory testing.

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 1400 Jackson St  
 Denver, CO 80206

Rifabutin - Specimen

See Note

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VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Antimicrobial Level - Rifabutin Ser/Pla	23-300-402259	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Rifabutin - Comment	23-300-402259	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Rifabutin - Specimen	23-300-402259	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

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