

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 8/14/1992  
**Gender:** Male  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Zika Virus IgM Antibody Capture (MAC), by ELISA**

ARUP test code 2013942

Zika Virus IgM Ab Capture (MAC), ELISA

**Presumpt Zika \* (Ref Interval: Negative)**

**PRESUMPTIVE ZIKA POSITIVE:** Presence of detectable Zika IgM antibody indicates presumptive recent infection. A result of Presumptive Zika should be confirmed according to the latest CDC guideline for the diagnosis of Zika virus infection, <http://www.cdc.gov/zika/laboratories/lab-guidance.html>. Testing for related viruses with known cocirculation should be considered (e.g., dengue virus, west Nile virus, chikungunya virus).

**INTERPRETIVE INFORMATION:** Zika Virus IgM Ab Capture (MAC), ELISA

The possibility of false-positive or false-negative results must be considered. RT-PCR testing on both a serum and urine specimen is recommended by the Centers for Disease Control and Prevention (CDC) to rule out false-negative IgM results in patients experiencing symptoms for less than 2 weeks. Specimens collected for IgM testing greater than or equal to 2 weeks after symptom onset do not require any additional testing. For more information, please review the current clinical guidelines for Zika virus testing at: [www.cdc.gov/zika/](http://www.cdc.gov/zika/)

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Zika Virus IgM Ab Capture (MAC), ELISA	23-321-107151	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: