

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: Unknown
Gender: Unknown
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Muscle-Specific Kinase (MuSK) Antibody, IgG by CBA-IFA with Reflex to Titer, Serum

ARUP test code 3006198

MuSK Ab IgG CBA IFA Screen, Serum

<1:10 (Ref Interval: <1:10)
MuSK Antibody, IgG is not detected. No further testing will be performed.

INTERPRETIVE INFORMATION: MuSK IgG Ab CBA, Serum, with Rflx
Muscle-specific kinase (MuSK) antibody is found in a subset of patients with myasthenia gravis, primarily those seronegative for muscle acetylcholine receptor (AChR) antibody. Decreasing antibody levels may be associated with therapeutic response; therefore, clinical correlation must be strongly considered. A negative test result does not rule out a diagnosis of myasthenia gravis.

This indirect fluorescent antibody cell-based assay (CBA) utilizes muscle-specific kinase (MuSK) transfected cells for the detection of the MuSK IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

Myasthenia Gravis Reflexive Panel

ARUP test code 3001869

Acetylcholine Binding Antibody

0.0 nmol/L (Ref Interval: 0.0-0.4)

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

INTERPRETIVE INFORMATION: Acetylcholine Binding Ab

Negative 0.0 - 0.4 nmol/L
Positive 0.5 nmol/L or greater

Approximately 85-90 percent of patients with myasthenia gravis (MG) express antibodies to the acetylcholine receptor (AChR), which can be divided into binding, blocking, and modulating antibodies. Binding antibody can activate complement and lead to loss of AChR. Blocking antibody may impair binding of acetylcholine to the receptor, leading to poor muscle contraction. Modulating antibody causes receptor endocytosis resulting in loss of AChR expression, which correlates most closely with clinical severity of disease. Approximately 10-15 percent of individuals with confirmed myasthenia gravis have no measurable binding, blocking, or modulating antibodies.

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Acetylcholine Blocking Antibody

10 % (Ref Interval: 0-26)

INTERPRETIVE INFORMATION: Acetylcholine Blocking Ab

Negative 0-26 percent blocking
Indeterminate 27-41 percent blocking
Positive 42 percent or greater blocking

Approximately 85-90 percent of patients with myasthenia gravis (MG) express antibodies to the acetylcholine receptor (AChR), which can be divided into binding, blocking, and modulating antibodies. Binding antibody can activate complement and lead to loss of AChR. Blocking antibody may impair binding of acetylcholine to the receptor, leading to poor muscle contraction. Modulating antibody causes receptor endocytosis resulting in loss of AChR expression, which correlates most closely with clinical severity of disease. Approximately 10-15 percent of individuals with confirmed myasthenia gravis have no measurable binding, blocking, or modulating antibodies.

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.

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

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
MuSK Ab IgG CBA IFA Screen, Serum	23-220-119942	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Acetylcholine Binding Antibody	23-220-119942	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Acetylcholine Blocking Antibody	23-220-119942	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: 23-220-119942
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Page 3 of 3 | Printed: 8/9/2023 12:35:35 PM
4848