

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

Physician: Doctor, Example

Patient: Patient, Example

DOB: 3/5/1976
Gender: Female
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Hepatitis Panel, Acute with Reflex to HBsAg Confirmation and Reflex to HCV by Quantitative NAAT

ARUP test code 3002989

Hepatitis A Antibody, IgM	Negative	(Ref Interval: Negative)
Hepatitis B Core Antibody, IgM	Positive *	(Ref Interval: Negative) The POSITIVE anti-HBc IgM indicates recent Hepatitis B infection and a possibly infectious patient. INTERPRETIVE INFORMATION: Hepatitis B Core Ab, IgM This assay should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cells, Tissues and Cellular and Tissue-Based Products (HCT/P).
Hepatitis B Surface Antigen	Positive *	(Ref Interval: Negative) The HBsAg screening test is strongly reactive. Therefore, confirmatory testing is not necessary but is available upon request. False positives can occur. If the result is not supported by clinical evidence, repeat testing of a new sample usually helps clarify the diagnosis. INTERPRETIVE INFORMATION: Hepatitis B Surface Ag This assay should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cells, Tissues and Cellular and Tissue-Based Products (HCT/P).
Hepatitis C Antibody by CIA Index	0.06 IV	
Hepatitis C Antibody by CIA Interp	Negative	(Ref Interval: Negative) Based on the anti-HCV (CIA) screen, the HCV RNA by Quantitative NAAT test is not indicated and therefore not performed.

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

REFERENCE INTERVAL: Hepatitis Panel, Acute w/ HCV NAAT Rflx

0.79 IV or less Negative
 0.80 to 0.99 IV Equivocal
 1.00 to 10.99 IV Low Positive
 11.00 IV or greater High Positive
 Index Value (IV) = Anti-HCV signal to cutoff (S/C) ratio

This assay should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cells, Tissues and Cellular and Tissue-Based Products (HCT/P).

Hepatitis, Acute Panel w/ Rflx Interp

See Note

The acute hepatitis panel indicates that the patient has acute hepatitis B infection. There is no evidence of acute hepatitis A or C infection.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Hepatitis A Antibody, IgM	23-083-101598	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis B Core Antibody, IgM	23-083-101598	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis B Surface Antigen	23-083-101598	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis C Antibody by CIA Index	23-083-101598	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis C Antibody by CIA Interp	23-083-101598	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis, Acute Panel w/ Rflx Interp	23-083-101598	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: