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

Autoimmune Neurologic Disease Reflexive Panel, Serum

ARUP test code 3004070

Neuronal Antibody (Amphiphysin)	**Positive** *	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: Amphiphysin Antibody, IgG

Amphiphysin antibody is present in about 5 percent of patients with stiff-person syndrome and is found variably in other causes of paraneoplastic neurological syndrome (PNS). Amphiphysin antibody is mainly associated with small-cell lung cancer and breast tumors.

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.

Purkinje Cell/Neuronal Nuclear IgG Scrn	**PCCA Detected** *	**(Ref Interval: None Detected)**

Antibodies detected, therefore IFA titer and Immunoblot testing to be performed.

INTERPRETIVE INFORMATION: Purkinje Cell/Neuronal Nuclear IgG Scrn

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.

N-methyl-D-Aspartate Receptor Ab, Serum	1:80 *	**(Ref Interval: <1:10)**

Antibodies to NMDA were detected; titer was performed at an additional charge.

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

INTERPRETIVE INFORMATION: N-methyl-D-Aspartate Receptor Ab, Serum
Anti-NMDA receptor IgG antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. 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 autoimmune limbic encephalitis.

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.

CASPR2 Ab IgG Screen by IFA, Serum	**Detected**	*	**(Ref Interval: <1:10)**

CASPR2 Antibody, IgG is detected. Titer results to follow.

INTERPRETIVE INFORMATION: CASPR2 Ab IgG w/Reflex to Titer, Serum
Contactin-associated protein-2 (CASPR2) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of CASPR2 IgG antibody is associated with a wide spectrum of clinical manifestations, including acquired neuromyotonia, limbic encephalitis, painful neuropathy and Morvan syndrome. Tumors such as thymoma, small-cell lung cancer, and other rarer tumors may occur. The full-spectrum of clinical disorders and tumors associated with the CASPR2 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes contactin-associated protein-2 (CASPR2) transfected cell lines for the detection and semi-quantification of the CASPR2 IgG antibody.

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.

LGI1 Ab IgG Screen by IFA, Serum	**Detected**	*	**(Ref Interval: <1:10)**

LGI1 Antibody, IgG is detected. Titer results to follow.

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

INTERPRETIVE INFORMATION: LGI1 Ab IgG w/Reflex to Titer, Serum

Leucine-rich, glioma-inactivated 1 protein (LGI1) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of LGI1 IgG antibody is mainly associated with limbic encephalitis, hyponatremia and myoclonic movements. LGI1 IgG antibody is rarely associated with tumors but may occur infrequently in Morvan syndrome, neuromyotonia and idiopathic epilepsy. The full-spectrum of clinical disorders associated with the LGI1 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes leucine-rich, glioma-inactivated 1 protein (LGI1) transfected cell lines for the detection and semi-quantification of the LGI1 IgG antibody.

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.

Neuromyelitis Optica/AQP4-IgG, Serum	**Detected**	*	**(Ref Interval: <1:10)**

Aquaporin-4 Receptor Antibody, IgG is detected. Titer results to follow.

INTERPRETIVE INFORMATION: Neuromyelitis Optica/AQP4-IgG w/Rfx, Ser

Diagnosis of neuromyelitis optica (NMO) requires the presence of longitudinally extensive acute myelitis (lesions extending over 3 or more vertebral segments) and optic neuritis. Approximately 75 percent of patients with NMO express antibodies to the aquaporin-4 (AQP4) receptor. While the absence of AQP4 receptor antibodies does not rule out a diagnosis of NMO, presence of this antibody is diagnostic for NMO.

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.

CV2.1 Antibody IgG Screen by IFA	**Detected**	*	**(Ref Interval: <1:10)**

CV2.1 Antibody, IgG is detected. Titer results to follow. Additional charges apply.

INTERPRETIVE INFORMATION: CV2.1 Antibody IgG Screen by IFA

CV2.1 antibodies aid in discriminating between chronic paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-CV2.1 is associated with small-cell lung cancer and thymoma.

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.

AMPA Receptor Ab IgG Screen, Serum	**Detected**	*	**(Ref Interval: <1:10)**

AMPAR Antibody, IgG is detected. Titer results to follow.

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

INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG Screen, Serum

Alpha-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid receptor (AMPAR) antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. 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 autoimmune encephalitis.

This indirect fluorescent antibody assay utilizes AMPAR transfected cell lines for the detection and semi-quantification of AMPAR IgG antibody.

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.

GABA-B Receptor Ab IgG Screen, Serum	**Detected**	*	**(Ref Interval: <1:10)**

GABA-BR Antibody, IgG is detected. Titer results to follow.

INTERPRETIVE INFORMATION: GABA Receptor Ab IgG Screen, Serum

Gamma-amino butyric acid receptor, type B (GABA-BR) antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. 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 autoimmune encephalitis.

This indirect fluorescent antibody assay utilizes GABA-BR transfected cell lines for the detection and semi-quantification of GABA-BR IgG antibody.

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.

MOG Antibody IgG Screen, Serum	**Detected**	*	**(Ref Interval: <1:10)**

MOG Antibody, IgG is detected. Titer results to follow.

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

INTERPRETIVE INFORMATION: MOG Antibody IgG Screen, Serum

Myelin oligodendrocyte glycoprotein (MOG) antibody is found in a subset of patients with neuromyelitis optica spectrum disorders including optic neuritis and transverse myelitis, brainstem encephalitis and acute disseminated encephalomyelitis. Persistence of antibody positivity may be associated with a relapsing course. 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 CNS demyelinating disease or autoimmune encephalitis.

This indirect fluorescent antibody assay utilizes full-length MOG transfected cell lines for the detection and semi-quantification of MOG IgG antibody.

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.

SOX1 Antibody, IgG by Immunoblot, Serum	**Positive**	*	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: SOX1 Antibody, IgG by Immunoblot, Serum

SOX1 antibody is detected in patients with Lambert-Eaton myasthenic syndrome (LEMS) and in patients with paraneoplastic cerebellar degeneration (PCD), paraneoplastic and nonparaneoplastic neuropathy. SOX1 antibody is associated with small cell lung cancer. A negative test result does not rule out a diagnosis of LEMS or other causes of paraneoplastic neurological syndrome.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS

DPPX Ab IgG CBA IFA Screen, Serum	**Detected**	*	**(Ref Interval: <1:10)**

DPPX Antibody, IgG is detected. Titer results to follow.

INTERPRETIVE INFORMATION: DPPX Ab IgG CBA IFA Screen, Serum

Anti-DPPX IgG antibody is found in a subset of patients with autoimmune encephalitis and may occur with or without associated tumor. 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 autoimmune limbic encephalitis.

This indirect fluorescent antibody cell-based assay (CBA) utilizes dipeptidyl aminopeptidase-like protein 6 (DPPX) transfected cells for the detection of the DPPX IgG antibody.

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.

P/Q-Type Calcium Channel Antibody	**50.0 pmol/L**	**H**	**(Ref Interval: 0.0-24.5)**

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

INTERPRETIVE INFORMATION: P/Q-Type Calcium Channel Antibody

0.0 to 24.5 pmol/L ..... Negative
24.6 to 45.6 pmol/L ..... Indeterminate
45.7 pmol/L or greater..... Positive

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.

Voltage-Gated Potassium Channel Ab, Ser	**50 pmol/L H** (Ref Interval: 0-31)

INTERPRETIVE INFORMATION: Voltage-Gated Potassium Channel (VGKC) Antibody, Serum

Negative ..... 31 pmol/L or less
Indeterminate... 32 - 87 pmol/L
Positive ..... 88 pmol/L or greater

Voltage-Gated Potassium Channel (VGKC) antibodies are associated with neuromuscular weakness as found in neuromyotonia (also known as Issacs syndrome) and Morvan syndrome. VGKC antibodies are also associated with paraneoplastic neurological syndromes and limbic encephalitis; however, VGKC antibody-associated limbic encephalitis may be associated with antibodies to leucine-rich, glioma-inactivated 1 protein (LGI1) or contactin-associated protein-2 (CASPR2) instead of potassium channel antigens. A substantial number of VGKC-antibody positive cases are negative for LGI1 and CASPR2 IgG autoantibodies, not all VGKC complex antigens are known. The clinical significance of this test can only be determined in conjunction with the patient's clinical history and related laboratory testing.

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.

Ganglionic Acetylcholine Receptor Ab	**80.0 pmol/L H** (Ref Interval: 0.0-8.4)

REFERENCE INTERVAL: Ganglionic Acetylcholine Receptor Ab

Negative . . . . . 0.0-8.4 pmol/L
Indeterminate. . . . . 8.5-11.6 pmol/L
Positive . . . . . 11.7 pmol/L or greater

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.

Glutamic Acid Decarboxylase Antibody	**10.0 IU/mL H** (Ref Interval: 0.0-5.0)

INTERPRETIVE INFORMATION: Glutamic Acid Decarboxylase Antibody

A value greater than 5.0 IU/mL is considered positive for Glutamic Acid Decarboxylase Antibody (GAD Ab). This assay is intended for the semi-quantitative determination of the GAD Ab in human serum. Results should be interpreted within the context of clinical symptoms.

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

Purkinje Cell Antibody, Titer (Do NOT give this test code to clients - Panel Component ONLY. Refer to 2007961 PCCA/ANNA)

ARUP test code 0059441

Purkinje Cell Antibody Titer IgG	1:320	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: Purkinje Cell Ab Titer, IgG

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.

Contactin-Associated Protein-2 Antibody Titer, IgG by IFA, Serum (Reflex for 2009452 CASPR2 IGG Only - Not Orderable by Clients)

ARUP test code 2009454

CASPR2 Ab IgG Titer by IFA, Serum	1:80	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: CASPR2 Ab Titer IgG by IFA, Serum

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.

Leucine-Rich, Glioma-Inactivated Protein 1 Antibody Titer, IgG by IFA, Serum (Reflex for 2009456 LGI1 IGG Only - Not Orderable by Clients)

ARUP test code 2009458

LGI1 Ab IgG Titer by IFA, Serum	1:40	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: LGI1 Ab Titer IgG by IFA, Serum

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.

Aquaporin-4 Receptor Antibody, IgG by IFA, Serum Titer (Reflex for New Test AQP4 SER - Not Orderable by Clients)

ARUP test code 2013323

Neuromyelitis Optica/AQP4-IgG Titer Ser	1:40	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: Neuromyelitis Optica/AQP4-IgG Titer Ser

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

CV2.1 Antibody Titer, IgG (Reflex for 2013956 CV2.1SCRN Not orderable by clients)

ARUP test code 2013957

CV2.1 Antibody IgG Titer by IFA	1:80	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: CV2.1 Antibody IgG Titer by IFA

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.

Alpha-amino-3-hydroxy-5-methyl-4-isoxazolepropionic Acid (AMPA) Receptor Antibody Titer, IgG, Serum (Reflex of 3001260 AMPA SER - Not orderable by clients)

ARUP test code 3001265

AMPA Receptor Ab IgG Titer, Serum	1:40	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG Titer, Serum

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.

Gamma Aminobutyric Acid Receptor, Type B (GABA-BR) Antibody Titer, IgG, Serum (Reflex of 3001270 GABA SER - Not orderable by clients)

ARUP test code 3001275

GABA-B Receptor Ab IgG Titer, Serum	1:40	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: GABA-B Receptor Ab IgG Titer, Serum

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.

Myelin Oligodendrocyte Glycoprotein (MOG) Antibody Titer, IgG (Reflex of 3001277 MOG SER - Not orderable by clients)

ARUP test code 3001280

MOG Antibody IgG Titer, Serum	1:20	*	(Ref Interval: <1:10)

INTERPRETIVE INFORMATION: MOG Antibody IgG Titer, Serum

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

Neuronal Nuclear Antibodies (Hu, Ri, Yo, Tr/DNER) IgG by Immunoblot, Serum

ARUP test code 3002917

Neuronal Nuclear Ab (Hu) IgG, IB, Serum	**Positive**	*	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab IgG, Immunoblot, Ser

This test detects IgG antineuronal antibodies to Hu, Ri, Yo and Tr (DNER) antigens.

Antineuronal antibodies serve as markers that aid in discriminating between a true paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-Hu (antineuronal nuclear antibody, type I) is associated with small-cell lung cancer. Anti-Ri (antineuronal nuclear antibody, type II) is associated with neuroblastoma in children and with fallopian tube and breast cancer in adults. Anti-Yo (anti-Purkinje cell cytoplasmic antibody) is associated with ovarian and breast cancer. Anti-Tr(DNER) is associated with Hodgkin's lymphoma.

The presence of one or more of these antineuronal antibodies supports a clinical diagnosis of PND and should lead to a focused search for the underlying neoplasm.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS

Neuronal Nuclear Ab (Ri) IgG, IB, Serum	**High Positive**	*	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Ri) IgG, IB, Serum

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS

Neuronal Nuclear Ab (Yo) IgG, IB, Serum	**Low Positive**	*	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Yo) IgG, IB, Serum

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS

Neuronal Nuclear Ab (TR/DNER) IgG, IB	**Positive**	*	**(Ref Interval: Negative)**

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (TR/DNER) IgG, IB

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS

Dipeptidyl Aminopeptidase-Like Protein 6 (DPPX) Antibody Titer, IgG by IFA, Serum (Reflex for 3004359 DPPX SER Only - Not Orderable by Clients)

ARUP test code 3004360

DPPX Ab IgG CBA IFA Titer, Serum	**1:160**	*	**(Ref Interval: <1:10)**

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

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Neuronal Antibody (Amphiphysin)	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Purkinje Cell Antibody Titer IgG	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Purkinje Cell/Neuronal Nuclear IgG Scrn	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
N-methyl-D-Aspartate Receptor Ab, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CASPR2 Ab IgG Screen by IFA, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CASPR2 Ab IgG Titer by IFA, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
LGI1 Ab IgG Screen by IFA, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
LGI1 Ab IgG Titer by IFA, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuromyelitis Optica/AQP4-IgG, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuromyelitis Optica/AQP4-IgG Titer Ser	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CV2.1 Antibody IgG Screen by IFA	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
CV2.1 Antibody IgG Titer by IFA	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
AMPA Receptor Ab IgG Screen, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
AMPA Receptor Ab IgG Titer, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
GABA-B Receptor Ab IgG Screen, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
GABA-B Receptor Ab IgG Titer, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
MOG Antibody IgG Screen, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
MOG Antibody IgG Titer, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuronal Nuclear Ab (Hu) IgG, IB, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuronal Nuclear Ab (Ri) IgG, IB, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuronal Nuclear Ab (Yo) IgG, IB, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Neuronal Nuclear Ab (TR/DNER) IgG, IB	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
SOX1 Antibody, IgG by Immunoblot, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
DPPX Ab IgG CBA IFA Screen, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
DPPX Ab IgG CBA IFA Titer, Serum	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
P/Q-Type Calcium Channel Antibody	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Voltage-Gated Potassium Channel Ab, Ser	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Ganglionic Acetylcholine Receptor Ab	21-344-100275	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Glutamic Acid Decarboxylase Antibody	21-344-100275	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