

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 7/7/1984  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Legionella pneumophila Antibodies (Types 1-6), IgG, IgM, and IgA by ELISA**

ARUP test code 3005200

**L. pneumophila (Types 1-6), Antibodies**

0.31 IV (Ref Interval: <=0.90)  
REFERENCE INTERVAL: L. pneumophila (Types 1-6), Antibodies  
Less than or equal to 0.90 IV:.....Negative - No significant amount of IgG/IgM/IgA antibodies to L. pneumophila detected.  
0.91 to 1.09 IV:.....Equivocal - Recommend repeat testing in 1-3 weeks with fresh sample.  
Greater than or equal to 1.10 IV:.....Positive - IgG/IgM/IgA antibodies specific to L. pneumophila suggesting current or prior infection. A positive result cannot distinguish between previous or active infection, therefore this result alone cannot be used to establish a diagnosis.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
L. pneumophila (Types 1-6), Antibodies	23-251-400254	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: