

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

Physician: Doctor, Example

**Patient: Patient, Example**

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

**Adalimumab and Antibodies to Adalimumab Quantitation**

ARUP test code 3017043

**Adalimumab Quantitation**

**<0.4 ug/mL L (Ref Interval: >=0.4)**

INTERPRETIVE INFORMATION: Adalimumab Quantitation

Results of 0.4 ug/mL or higher indicate the detection of adalimumab or an adalimumab biosimilar. Therapeutic level may vary depending on the disease being treated.

**Antibodies to Adalimumab Quantitation**

**<20 ng/mL (Ref Interval: <=19)**

INTERPRETIVE INFORMATION: Antibodies to Adalimumab Quantitation

Results of 20 ng/mL or higher indicate the detection of antibodies against adalimumab or an adalimumab biosimilar. Interpret in the context of adalimumab or adalimumab biosimilar trough concentration to determine clinical significance and impact on treatment efficacy.

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.

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Adalimumab Quantitation	24-051-119009	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Antibodies to Adalimumab Quantitation	24-051-119009	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: