

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

### **Dermatomyositis Autoantibody Panel**

ARUP test code 3018870

Mi-2 (nuclear helicase protein) Antibody Positive \* (Ref Interval: Negative)

P155/140 Antibody Weak Positive \* (Ref Interval: Negative)

TIF-1 gamma (155 kDa) Ab LOW POSITIVE \* (Ref Interval: Negative)

Low positive reactivity to transcriptional intermediary factor (TIF1y) detected. Strong clinical correlation is recommended.

SAE1 (SUMO activating enzyme) Ab Positive \* (Ref Interval: Negative)

MDA5 (CADM-140) Ab Positive \* (Ref Interval: Negative)

NXP2 (Nuclear matrix protein-2) Ab High Positive \* (Ref Interval: Negative)

Dermatomyositis Interpretive Information See Note

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



INTERPRETIVE INFORMATION: Dermatomyositis Autoantibody Panel

If present, myositis-specific antibodies (MSA) are specific for myositis, and may be useful in establishing diagnosis as well as prognosis. MSAs are generally regarded as mutually exclusive with rare exceptions; the occurrence of two or more MSAs should be carefully evaluated in the context of patient's clinical presentation. Myositis-associated antibodies (MAA) may be found in patients with CTD including overlap syndromes, and are generally not specific for myositis. The following table will help in identifying the association of any antibodies found as either MSAs or MAAs.

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.

Antinuclear Antibody (ANA), HEp-2, IgG

Detected

\*

(Ref Interval: <1:80)

### **ANA Interpretive Comment**

#### See Note

Nucleolar Pattern Clinical associations: SSc, SSc/PM overlap, SjS Main autoantibodies: Anti-PM/Scl, anti-RNA polymerase, anti-URNP, anti-U3-RNP (anti-fibrillarin), anti-Th/To, NOR-90

Homogeneous Pattern Clinical associations: SLE, drug-induced SLE or JIA. Main autoantibodies: Anti-dsDNA, anti-histones or anti-chromatin (anti-nucleosome)

Cytoplasmic discrete dots/GW Body-like pattern Clinical Associations: SjS, SLE, RA and some neurologic disorders (ataxia, motor and sensory neuropathy) Main autoantibodies: No available tests

List of Abbreviations
Antisynthetase syndrome (ARS), chronic active hepatitis (CAH), inflammatory myopathies (IM) [dermatomyositis (DM), polymyositis (PM), necrotizing autoimmune myopathy (NAM)], interstitial lung disease (ILD), juvenile idiopathic arthritis (JIA), mixed connective tissue disease (MCTD), primary biliary cholangitis (PBC), rheumatoid arthritis (RA), systemic autoimmune rheumatic diseases (SARD), Sjogren syndrome (SjS), systemic lupus erythematosus (SLE), systemic sclerosis (SSC), undifferentiated connective tissue disease (UCTD).

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

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INTERPRETIVE INFORMATION: ANA Interpretive Comment

Presence of antinuclear antibodies (ANA) is a hallmark feature of systemic autoimmune rheumatic diseases (SARD). However, ANA lacks diagnostic specificity and is associated with a variety of diseases (cancers, autoimmune, infectious, and inflammatory conditions) and may also occur in healthy individuals in varying prevalence. The lack of diagnostic specificity requires confirmation of positive ANA by more specific serologic tests. ANA (nuclear reactivity) positive patterns reported include centromere, homogeneous, nuclear dots, nucleolar, or speckled. ANA (cytoplasmic reactivity) positive patterns reported include reticular/AMA, discrete/GW body-like, polar/golgi-like, cytoplasmic speckled or rods and rings. All positive patterns are reported to endpoint titers (1:2560). Reported patterns may help guide differential diagnosis, although they may not be specific for individual antibodies or diseases. Mitotic staining patterns not reported. Negative results do not necessarily rule out SARD.

## Antinuclear Antibody (ANA) with HEp-2 Substrate, IgG by IFA, Dual Pattern (Reflex for 3000082 ANA IFA AB Only Not Orderable by Clients)

ANA Pattern

Nucleolar

ANA Titer

1:640

ANA Pattern 2

Homogeneous

\*

ANA Titer 2

1:320

\*

# Antinuclear Antibody (ANA) with HEp-2 Substrate, IgG by IFA, Cytoplasmic Pattern (Reflex for 3000082 ANA IFA AB Only Not Orderable by Clients)

ARUP test code 3000478

Cytoplasmic Titer

1:320 \*

Cytoplasm Pattern

GW Body-like \*

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

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VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Mi-2 (nuclear helicase protein) Antibody	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
P155/140 Antibody	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
TIF-1 gamma (155 kDa) Ab	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
SAE1 (SUMO activating enzyme) Ab	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
MDA5 (CADM-140) Ab	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
NXP2 (Nuclear matrix protein-2) Ab	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Dermatomyositis Interpretive Information	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Antinuclear Antibody (ANA), HEp-2, IgG	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
ANA Pattern	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
ANA Titer	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
ANA Pattern 2	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
ANA Titer 2	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Cytoplasmic Titer	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
ANA Interpretive Comment	25-022-102243	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Cytoplasm Pattern	25-022-102243	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