

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

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB** 5/2/2002  
**Sex:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Viral Hepatitis Prenatal Panel**  
ARUP test code 3019856

Hepatitis B Core Antibodies, Total	Negative (Ref Interval: Negative) INTERPRETIVE INFORMATION: Hepatitis B Core Ab (Total)  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	0.20 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.  INTERPRETIVE INFORMATION: Hepatitis C Virus Ab w/Rflx to HCV NAAT  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 Antibody	4.00 IU/L  The anti-HBs is less than 10 IU/L and is therefore negative. There is no evidence of recovery from hepatitis B infection or evidence of antibody response to HBV vaccination.  An anti-HBs result greater than or equal to 10 IU/L indicates immunity.  Reference Interval: anti-HBs 9.99 IU/L or less ..... Negative 10.00 IU/L or greater ... Positive Results greater than 1,000.00 IU/L are reported as greater than 1,000.00 IU/L.
Hepatitis B Surface Antigen, Prenatal	Negative (Ref Interval: Negative)  Based on the non-reactive HBsAg screen, the HBsAg Confirmation test is not indicated and therefore not performed.  INTERPRETIVE INFORMATION: Hepatitis B Virus Surface Antigen with Reflex to Confirmation, Prenatal

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

Unless otherwise indicated, testing performed at:

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

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Hepatitis B Core Antibodies, Total	25-349-112586	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis C Antibody by CIA Index	25-349-112586	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis C Antibody by CIA Interp	25-349-112586	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis B Surface Antibody	25-349-112586	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Hepatitis B Surface Antigen, Prenatal	25-349-112586	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:

**ARUP LABORATORIES** | 800-522-2787 | [aruplab.com](http://aruplab.com)  
500 Chipeta Way, Salt Lake City, UT 84108-1221  
Jonathan R. Genzen, MD, PhD, Laboratory Director

Patient: Patient, Example  
ARUP Accession: 25-349-112586  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
Page 2 of 2 | Printed: 12/16/2025 8:33:56 AM