

Example Client, XYZ123
 1234 Warde Road
 Ann Arbor MI 48108

EXAMPLE, REPORT W
 WX0000003827 M 07/08/1978 45 Y

Referral Testing

Collected: 09/05/2023 14:45 Received: 09/05/2023 14:45

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|-------------------------------------|--------|------|------------|-------|------|
| Coccidioides Ab Panel, Serum | | | | | |
| Coccidioides Ab IgG | 0.5 | | <=0.9 | IV | ARRL |

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgG:

- 0.9 IV or less: Negative - No significant level of Coccidioides IgG antibody detected.
- 1.0 - 1.4 IV: Equivocal - Questionable presence of Coccidioides IgG antibody detected. Repeat testing in 10-14 days may be helpful.
- 1.5 IV or greater: Positive - Presence of IgG antibody to Coccidioides detected, suggestive of current or past infection.

IgG antibody usually appears by the third week of infection and may persist for years. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

| | | | | | |
|---------------------|-----|--|-------|----|------|
| Coccidioides Ab IgM | 0.0 | | <=0.9 | IV | ARRL |
|---------------------|-----|--|-------|----|------|

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgM:

- 0.9 IV or less: Negative - No significant level of Coccidioides IgM antibody detected.
- 1.0 - 1.4 IV: Equivocal - Questionable presence of Coccidioides IgM antibody detected. Repeat testing in 10-14 days may be helpful.
- 1.5 IV or greater: Positive - Presence of IgM antibody to Coccidioides detected, suggestive of current or recent infection.

In most symptomatic patients, IgM antibody usually appears by the second week of infection and disappears by the fourth month. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

| | | | | | |
|----------------------|------|--|------|--|------|
| Coccidioides Ab (CF) | <1:2 | | <1:2 | | ARRL |
|----------------------|------|--|------|--|------|

INTERPRETIVE INFORMATION: Coccidioides Ab by Complement Fixation (CF)

Any titer suggests past or current infection. However, greater than 30 percent of cases with chronic residual

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED



LABORATORY REPORT

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| | pulmonary disease have negative Complement Fixation (CF) tests. Titers of less than 1:32 (even as low as 1:2) may indicate past infection or self-limited disease; anticoccidioidal CF antibody titers in excess of 1:16 may indicate disseminated infection. CF serology may be used to follow therapy. Antibody in CSF is considered diagnostic for coccidioidal meningitis, although 10 percent of patients with coccidioidal meningitis will not have antibody in CSF. | | | | |
| Coccidioides Immitis Abs. Precipitin | Not Detected | | Not Detected | | ARRL |

No Coccidioides antibodies (ie, IDTP, IDCF) were detected. This result does not exclude Coccidioides infection.
Performed By: ARUP Laboratories
500 Chipeta Way
Salt Lake City, UT 84108
Laboratory Director: Jonathan R. Genzen, MD, PhD
CLIA Number: 46D0523979

Performing Site:

ARRL: ARUP REFERENCE LAB 500 Chipeta Way Salt Lake City UT 841081221

Reported Date: 2023.09.28 14:45 COCCP

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

F305000038
WX0000003827
Printed D&T: 09/28/23 11:22

Ordered By: KAJAL SITWALA, MD, PhD
WX00000000002365

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1
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