



LABORATORY REPORT

Example Client, XYZ123
1234 Warde Road
Ann Arbor MI 48108

EXAMPLE, REPORT W
WX0000003826 F 12/05/1988 34 Y

Referral Testing

Collected: 09/19/2023 09:47 Received: 09/19/2023 09:47

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains rows for Meningoencephalitis Comprehensive Panel, CSF and its sub-tests.

ANTIBODY NOT DETECTED

REFERENCE RANGE: <1:1 ANTIBODY NOT DETECTED
> OR = 1:1 ANTIBODY DETECTED

NOTE: Specimens positive for arbovirus antibody are CDC reportable. Please contact your local public health agency.

Diagnosis of infections of the central nervous system can be accomplished by demonstrating the presence of intrathecally-produced specific antibody. However, interpreting results is complicated by low antibody levels found in CSF, passive transfer of antibody from blood, and contamination via bloody taps.

Test Performed at:
Quest Diagnostics Nichols Institute
33608 Ortega Highway
San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains rows for Eastern Equine Enceph Virus AB (IGG) CSF and Eastern Equine Enceph Virus AB (IGM) CSF.

Due to the recent Eastern Equine Encephalitis outbreak, samples from cases with a high clinical suspicion should be forwarded to Public Health for further testing. Please contact client services if follow-up requested.

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains row for Interpretation.

ANTIBODY NOT DETECTED

REFERENCE RANGE: <1:1 ANTIBODY NOT DETECTED
> OR = 1:1 ANTIBODY DETECTED

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



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Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains test results for St. Louis Enceph Virus AB (IGG) CSF and St. Louis Enceph Virus AB (IGM) CSF, both with results <1:1 and QCRL status.

ANTIBODY NOT DETECTED

REFERENCE RANGE: <1:1 ANTIBODY NOT DETECTED
> OR = 1:1 ANTIBODY DETECTED

NOTE: Specimens positive for arbovirus antibody
are CDC reportable. Please contact your
local public health agency.

Diagnosis of infections of the central nervous
system can be accomplished by demonstrating the
presence of intrathecally-produced specific
antibody. However, interpreting results is
complicated by low antibody levels found in CSF,
passive transfer of antibody from blood, and
contamination via bloody taps.

Test Performed at:
Quest Diagnostics Nichols Institute
33608 Ortega Highway
San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains test results for Western Equine Enceph Virus AB (IGG) CSF and Western Equine Enceph Virus AB (IGM) CSF, both with results <1:1 and QCRL status.

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Test Name Result Flag Ref-Ranges Units Site

ANTIBODY NOT DETECTED

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> OR = 1:1 ANTIBODY DETECTED

NOTE: Specimens positive for arbovirus antibody
are CDC reportable. Please contact your
local public health agency.

Diagnosis of infections of the central nervous
system can be accomplished by demonstrating the
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LCM Virus AB (IGG) IFA, CSF <1:1 QCRL
LCM Virus AB (IGM) IFA, CSF <1:1 QCRL
Interpretation SEE NOTE QCRL

ANTIBODY NOT DETECTED

REFERENCE RANGE: IgG <1:1
IgM <1:1

INTERPRETIVE CRITERIA:
<1:1 Antibody Not Detected
> or = 1:1 Antibody Detected

Diagnosis of infections of the central nervous
system can be accomplished by demonstrating the
presence of intrathecally-produced specific
antibody. However, interpreting results is
complicated by low antibody levels found in CSF,
passive transfer of antibody from blood, and
contamination via bloody taps.

This test was developed and its analytical
performance characteristics have been determined
by Quest Diagnostics. It has not been cleared or

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Test Name Result Flag Ref-Ranges Units Site
approved by FDA. This assay has been validated
pursuant to the CLIA regulations and is used for
clinical purposes.

Test Performed at:
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33608 Ortega Highway
San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Adenovirus AB, CSF <1:1 QCRL

REFERENCE RANGE: <1:1

INTERPRETIVE CRITERIA:
<1:1 Antibody not detected
> or = 1:1 Antibody Detected

Diagnosis of infections of the central nervous system
is accomplished by demonstrating the presence of
intrathecally-produced specific antibody. Interpretation
of results may be complicated by low antibody levels found
in CSF, passive transfer of antibody from blood, and
contamination via bloody taps.

This test was developed and its analytical performance
characteristics have been determined by Quest Diagnostics.
It has not been cleared or approved by FDA. This assay has
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Test Performed at:
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Influenza A AB <1:1 QCRL
Influenza B AB <1:1 QCRL

REFERENCE RANGE: <1:1

INTERPRETIVE CRITERIA:
<1:1 Antibody Not Detected
> or = 1:1 Antibody Detected

Diagnosis of infections of the central nervous system
is accomplished by demonstrating the presence of
intrathecally-produced specific antibody. Interpretation

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



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Table with 7 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains rows for Measels (Rubeola) IGG, IFA CSF and Measels (Rubeola) AB (IGM), IFA CSF with results <1:64 and <1:1 respectively.

ANTIBODY NOT DETECTED

REFERENCE RANGE: IgG <1:64
IgM <1:1

Diagnosis of central nervous system infections can be accomplished by demonstrating the presence of intrathecally-produced specific antibody. Interpreting results may be complicated by low antibody levels found in CSF, passive transfer of antibody from blood, and contamination via bloody taps.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

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Table with 7 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Contains rows for Mumps AB (IGG), IFA, CSF and Mumps AB (IGM), IFA, CSF with results <1:8 and <1:1 respectively.

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Test Name Result Flag Ref-Ranges Units Site
DETECTED

REFERENCE RANGE: IgG <1:8
IgM <1:1

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Test Performed at:
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Varicella Zoster Virus AB, ACIF, CSF <1:2 QCRL

REFERENCE RANGE: <1:2

INTERPRETIVE CRITERIA:
<1:2 Antibody Not Detected
> or = 1:2 Antibody Detected

Diagnosis of central nervous system infections can be accomplished by demonstrating the presence of intrathecally-produced specific antibody. Interpreting results may be complicated by low antibody levels found in CSF, passive transfer of antibody from blood, and contamination via bloody taps.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

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Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Rows include Cocksackie A2 AB through A16 AB with results <1:1 and QCRL status.

REFERENCE RANGE: <1:1

INTERPRETIVE CRITERIA:
<1:1 Antibody Not Detected
> or = 1:1 Antibody Detected

Diagnosis of infections of the central nervous system is accomplished by demonstrating the presence of intrathecally-produced specific antibody.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA.

Test Performed at:
Quest Diagnostics Nichols Institute
33608 Ortega Highway
San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Rows include Echovirus 4 AB through 30 AB with results <1:1 and QCRL status.

REFERENCE RANGE: <1:1

INTERPRETIVE CRITERIA:

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Table with 7 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Row 1: <1:1 Antibody Not Detected. Row 2: > or = 1:1 Antibody Detected.

Diagnosis of infections of the central nervous system can be accomplished by demonstrating the presence of intrathecally-produced specific antibody. Interpretation of results may be complicated by low antibody levels found in CSF, passive transfer of antibody from blood, and contamination via bloody taps.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

Test Performed at:
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Table with 3 columns: Test Name, Result, QCRL. Row 1: West Nile Virus Antibody (IGG), CSF <1.30 QCRL. Row 2: West Nile Virus Antibody (IGM), CSF <0.90 QCRL.

REFERENCE RANGE: IgG <1.30
IgM <0.90

INTERPRETIVE CRITERIA

Table with 3 columns: Antibody Type, Range, Interpretation. Rows for IgG and IgM with ranges and corresponding interpretations like 'Antibody not detected', 'Equivocal', 'Antibody detected'.

West Nile virus (WNV) IgM is usually detectable in CSF from WNV-infected patients with encephalitis or meningitis at the time of clinical presentation. Because IgM antibody does not readily cross the blood-brain barrier, IgM antibody in CSF strongly suggests acute central nervous system infection.

WNV antibody results from CSF should be interpreted with caution. Possible complicating factors include low levels of antibody found in CSF, passive transfer of antibodies from blood, and contamination via bloody spinal taps.

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## Referral Testing

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| <u>Test Name</u>   | <u>Result</u> | <u>Flag</u> | <u>Ref-Ranges</u> | <u>Units</u> | <u>Site</u> |
|--|---------------|-------------|-------------------|--------------|-------------|
| Antibodies induced by other flavivirus infections (e.g. Dengue virus, St. Louis encephalitis virus) may show cross-reactivity with WNV.<br>Test Performed at:<br>Quest Diagnostics Nichols Institute<br>33608 Ortega Highway<br>San Juan Capistrano, CA 92675-2042 |               |             |                   |              |             |
|  |               | I           | Maramica MD, PhD  |              |             |
| HSV 1 IGG Index:   | 0.81          |             |                   |              | QCRL        |
| HSV 2 IGG Index:   | 0.06          |             |                   |              | QCRL        |

REFERENCE RANGE: < or = 1.00

INTERPRETIVE CRITERIA:

< or = 1.00 Antibody not detected  
> 1.00 Antibody detected

Detection of HSV type-specific IgG in CSF may indicate central nervous system (CNS) infection by that HSV type. However, interpretation of results may be complicated by a number of factors, including low antibody levels found in CSF, passive transfer of antibody across the blood-brain barrier, and serum contamination of CSF during CSF collection. PCR detection of type-specific HSV DNA in CSF is the preferred method for identifying HSV CNS infections.

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San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Performing Site:

QCRL: QUEST DIAGNOSTICS REFERENCE LAB CAPISTRANO 33608 Ortega Highway San Juan Capistrano CA 92675

**Reported Date:** 2023.09.19 9:54 MCPPC

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