

Laboratory Service Report

1-800-533-1710

Patient Name SAMPLEREPORT,FHPAB	Patient ID SA00049753	Age 46	Gender M	Order # SA00049753	
Ordering Phys				DOB 05/25/1966	
Client Order # SA00049753	Account Information			Report Notes	
Collected 10/11/2012 13:00	C7028846-DLMP ROC 3050 SUPERIOR DRIV	/E			
Printed 10/16/2012 08:13	ROCHESTER,MN 559	01			

Test	Flag	Results	Unit	Reference Value	Perform Site*
Phosphatidylinositol IgG, IgM, IgA Phosphatidylinositol Ab IgG		2	REPORTED 1 U/mL	0/12/2012 14:48 0-18	Y00
INTERPRETIVE INFORMATION: F	hosphatidyl:	inositol Antibody IgG			6
0-11 U/mL: Normal 12-18 U/mL: Equivocal. Sugg or consider antibody testin beta-2 glycoprotein 1 IgG a 19 U/mL or greater: Positiv	ng for cardio and IgM and i	olipin IgG and IgM,			
This test was developed and determined by ARUP Laborator Administration has not approximately however, FDA clearance or a required for clinical use. be used as the sole means for management decisions.	ories. The U coved or clea approval is a The results	.S. Food and Drug ared this test; not currently are not intended to			
Phosphatidylinositol Ab IgM		5	U/mL	0-18	Y00 6
INTERPRETIVE INFORMATION: F	hosphatidyl	inositol Antibody IgM			Ü
0-11 U/mL: Normal 12-18 U/mL: Equivocal. Sugg or consider antibody testin beta-2 glycoprotein 1 IgG a 19 U/mL or greater: Positiv	ng for cardional ind IgM and I	olipin IgG and IgM,			
This test was developed and determined by ARUP Laborator Administration has not appropriately for clearance or a required for clinical used be used as the sole means for management decisions.	ories. The U coved or clea approval is a The results	.S. Food and Drug ared this test; not currently are not intended to			
Phosphatidylinositol Ab IgA		8	U/mL	0-18	Y00 6
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INTERPRETIVE INFORMATION: Phosphatidylinositol Antibody IgA

0-11 U/mL: Normal

12-18 U/mL: Equivocal. Suggest repeat testing in 4-6 weeks or consider antibody testing for cardiolipin IgG and IgM, beta-2 glycoprotein 1 IgG and IgM and lupus anticoagulant. 19 U/mL or greater: Positive

This test was developed and its performance characteristics determined by ARUP Laboratories. The U.S. Food and Drug Administration has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to

Performing Site Legend on Last Page of Report

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT,FHPAB	10/11/2012 13:00	Final
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SAMPLEREPORT,FHPAB	SA00049753	46	M	SA00049753
Ordering Phys				DOB 05/25/1966
Client Order # SA00049753	Account Information	1		Report Notes
Collected 10/11/2012 13:00	C7028846-DLMP RO 3050 SUPERIOR DRI	VE		
Printed 10/16/2012 08:13	ROCHESTER,MN 559	901		

Test Flag Results Unit Reference Perform Value Site*

be used as the sole means for clinical diagnosis or patient management decisions.

* Performing Site:

Y006	ARUP Laboratories 500 Chipeta Way Salt Lake City, UT 84108	Lab Director:
	300 Onipola Way Oak Lake Oity, 01 04100	

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT,FHPAB	10/11/2012 13:00	Final
Page 2 of 2		** End of Report **