MAYO CLINIC
Mayo Medical Laboratories

Laboratory Service Report 1-800-533-1710

Patient Name	Patient ID	Age	Gender	Order #
SAMPLEREPORT,FSC	SA00050916	46	F	SA00050916
Ordering Phys				**DOB** 06/10/1966
Client Order # SA00050916	**Account Information**			**Report Notes**
Collected 11/14/2012	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER,MN 55901			
Printed 11/16/2012 08:48				

Test	Flag	Results	Unit	Reference Value	Perform Site*
			REPORTED 11/16/2012 08:37		
Cryptococcus Ag, CSF	C	1:4		Negative	SDL
CRITICAL RESULT					
Fungal Ab Survey, CSF			REPORTED 11/16/2012 08:39		
Cocci CF and ID, CSF					
Cocci Ab, CF (CSF)		1:16		Negative	SDL
Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					
Cocci ID-IgG (CSF)		Positive		Negative	SDL
Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					
Cocci ID-IgM (CSF)		Equivocal		Negative	SDL
Recommend follow-up testing in 10-14 days if clinically indicated.					
Cryptococcus Ag Screen, CSF	AB	Reactive		Negative	SDL
Reactive, but not diagnostic. Confirmatory testing by latex agglutination is required and has been ordered under test "Cryptococcus Ag, CSF".					
Histoplasma Ab, CSF					
Histoplasma Mycelial (CSF)		1:2048		Negative	SDL
Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					
Histoplasma Yeast (CSF)		1:256		Negative	SDL
Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these					

Performing Site Legend on Last Page of Report

* Report times for Mayo performed tests are CST/CDT

Patient Name	Patient ID	Age	Gender	Order #
SAMPLEREPORT,FSC	SA00050916	46	F	SA00050916
Ordering Phys				**DOB** 06/10/1966
Client Order # SA00050916	**Account Information**			**Report Notes**
Collected 11/14/2012	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER,MN 55901			
Printed 11/16/2012 08:48				

Test	Flag	Results	Unit	Reference Value	Perform Site*
results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection. Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					
Histoplasma Immunodiffusion (CSF)		H and M Bands		Negative	SDL
Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					
Blastomyces Ab, EIA, CSF	AB	Positive		Negative	SDL
Result suggests exposure to Blastomyces dermatitidis, but cannot distinguish between active disease and past infection. Results should be interpreted in the context of the clinical presentation, as well as other laboratory findings (e.g., fungal culture (Test Code 84389), immunodiffusion (Test Code 81541)). Detection of organism-specific antibodies in the CSF may suggest central nervous system infection. However, these results are unable to distinguish between intrathecal antibodies and serum antibodies introduced into the CSF at the time of lumbar puncture or from a breakdown in the blood-brain barrier. The results should be interpreted with other laboratory and clinical data prior to a diagnosis of central nervous system infection.					

* Performing Site:

SDL	Mayo Clinic Laboratories - Rochester Superior Drive 3050 Superior Dr. NW Rochester, MN 55901	Lab Director: Franklin R. Cockerill, III, M.D.