

# 1-800-533-1710

Patient Name SAMPLEREPORT, FENAB DETECTED	Patient ID SA00053999	Age 42	Gender M	Order # SA00053999
Ordering Phys CLIENT,CLIENT		•		<b>DOB</b> 11/09/1970
Client Order # SA00053999	Account Information			Report Notes
<b>Collected</b> 02/18/2013 13:00	C7028846-DLMP ROCHES 3050 SUPERIOR DRIVE	STER		
Printed 02/21/2013 12:04	ROCHESTER,MN 55901			

Test	Flag	Results	Unit	Reference Value	Perform Site
ncephalitis Antibody Panel (CSF)			REPORTED 0	2/19/2013 15:37	
LCM Virus Ab, IFA CSF LCM IGG	Н	>=1:1024			Y03
DCM 199	п	>-1.1024			8
LCM IgM	Н	>=1:1024			Y03
					8
Interpretation		ANTIBODY DETECTED			Y03 8
REFERENCE RANGE: IgG <1:1 IgM <1:1					Ü
INTERPRETIVE CRITERIA:	ada. Nat Dat				
<pre>&lt;1:1 Antibo &gt; or = 1:1 Antibo</pre>	_				
. 01 1 1 1110100	ou, become	34			
Diagnosis of infections of the system can be accomplished by					
presence of intrathecally-pro	-	_			
antibody. However, interpreti	ing results	s is			
complicated by low antibody l					
passive transfer of antibody		d, and			
contamination via bloody taps	S.				
This assay was developed and	its perfor	rmance			
characteristics determined by					
It has not been cleared or ap	pproved by	the U.S.			
Food and Drug Administration.					
determined that such clearance					
necessary. Performance charac		refer to the			
analytical performance of the Measles (Rubeola) G/M Ab, IFA CSF	e test.				
Measles (Rubeola) IgG, IFA	Н	>=1:1024			Y03
neadled (nabeela, 13e, 111		1 1021			8
Measles (Rubeola) IgM, IFA	Н	1:32			Y03 8
Interpretation		ANTIBODY DETECTED			Y03
REFERENCE RANGE: IgG <1:64 IgM <1:1					
Diagnosis of central nervous	-				
be accomplished by demonstrat					
intrathecally-produced specif		-			
Interpreting regults may be s	aomo Liastor	n bu low			

### \*\*\*Performing Site Legend on Last Page of Report\*\*\*

refreshment and the form of the form					
Patient Name	Collection Date and Time	Report Status			
SAMPLEREPORT, FENAB DETECTED	02/18/2013 13:00	Final			
Page 1 of 5		>> Continued on Next Page >>			

Interpreting results may be complicated by low



# 1-800-533-1710

Patient Name SAMPLEREPORT, FENAB DETECTED	Patient ID SA00053999	<b>Age</b> 42	Gender M	<b>Order #</b> SA00053999
Ordering Phys CLIENT,CLIENT			•	<b>DOB</b> 11/09/1970
Client Order # SA00053999	Account Information			Report Notes
<b>Collected</b> 02/18/2013 13:00	C7028846-DLMP ROCI 3050 SUPERIOR DRIV	E		
Printed 02/21/2013 12:04	ROCHESTER,MN 5590	01		

Reference Perform
Test Flag Results Unit Value Site\*

antibody levels found in CSF, passive transfer of antibody from blood, and contamination via bloody taps. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

This assay was developed and its performance characteristics have been determined by Focus 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. Performance characteristics refer to the analytical performance of the test.

Mumps Antibody Panel, IFA (CSF)

 Mumps Ab IgG, IFA
 H
 >=1:128
 Y03

 Mumps Ab IgM, IFA
 H
 >=1:16
 Y03

 Interpretation
 DETECTED
 Y03

 8
 8

 Interpretation
 Position of the property of the pro

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

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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

This assay was developed and its performance characteristics have been determined by Focus 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. Performance characteristics refer to the analytical performance of the test.

Varicella-Zoster, Total/IgM Ab, CSF

VZV Total Ab (ACIF) H >=1:256 Y03

\*\*\*Performing Site Legend on Last Page of Report\*\*\*

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT, FENAB DETECTED	02/18/2013 13:00	Final
Page 2 of 5		>> Continued on Next Page >>



# 1-800-533-1710

Y03 8 Y03

8

Patient Name SAMPLEREPORT, FENAB DETECTED	Patient ID SA00053999	<b>Age</b> 42	Gender M	Order # SA00053999
Ordering Phys CLIENT,CLIENT		·		<b>DOB</b> 11/09/1970
Client Order # SA00053999	Account Information			Report Notes
<b>Collected</b> 02/18/2013 13:00	C7028846-DLMP ROCH 3050 SUPERIOR DRIVI	=		
Printed 02/21/2013 12:04	ROCHESTER,MN 5590	1		

Test	Flag	Results	Unit	Reference Value	Perform Site*
VZV IgM (IFA)	Н	1:256			Y03 8
Interpretation		ANTIBODY DETEC	TED		Y03 8

REFERENCE RANGES: VZV Total AB <1:2 VZV 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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

This assay was developed and its performance characteristics have been determined by Focus 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. Performance characteristics refer to the analytical performance of the test.

West Nile Virus Ab (IgG, IgM), CSF West Nile Ab IgG, CSF

West Nile Ab IgM, CSF H

REFERENCE RANGE: IgG <1.30 IgM <0.90

INTERPRETIVE CRITERIA

IgG: <1.30 Antibody not detected

1.30 - 1.49 Equivocal

>=1.50 Antibody detected

IgM: <0.90 Antibody not detected

0.90 - 1.10 Equivocal

>1.10 Antibody detected

West Nile virus (WNV) IgM is usually detectable in CSF from WNV-infected patients with encephalitis or meningitis at the time of

#### \*\*\*Performing Site Legend on Last Page of Report\*\*\*

refreshment and the form of the form					
Patient Name	Collection Date and Time	Report Status			
SAMPLEREPORT, FENAB DETECTED	02/18/2013 13:00	Final			
Page 3 of 5		>> Continued on Next Page >>			



# 1-800-533-1710

Y03

Y03

8

Patient Name SAMPLEREPORT, FENAB DETECTED	Patient ID SA00053999	Age 42	Gender M	Order # SA00053999
Ordering Phys CLIENT,CLIENT		•		<b>DOB</b> 11/09/1970
Client Order # SA00053999	Account Information			Report Notes
<b>Collected</b> 02/18/2013 13:00	C7028846-DLMP ROCHES 3050 SUPERIOR DRIVE	STER		
Printed 02/21/2013 12:04	ROCHESTER,MN 55901			

Reference Perform
Test Flag Results Unit Value Site\*

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 in 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. Antibodies induced by other flavivirus infections (e.g. Dengue virus, St. Louis encephalitis virus) may show cross-reactivity with WNV.

HSV 1/2 (IgG) Type-Specific Ab, CSF

HSV 1 IgG Index H 5
HSV 2 IgG Index H 5

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 bloodbrain barrier, and serum contamination of CSF during CSF collection. PCR detection of typespecific HSV DNA in CSF is the preferred method for identifying HSV CNS infections.

Herpes Simplex Virus 1/2 IgM Ab, CSF

 HSV 1 IgM Screen
 AB POSITIVE
 Y03

 HSV 2 IgM Screen
 AB POSITIVE
 8

 HSV 2 IgM Screen
 AB POSITIVE
 Y03

REFERENCE RANGE: NEGATIVE

The IFA procedure for measuring IgM antibodies to  ${
m HSV}~1$  and  ${
m HSV}~2$  detects both type-common and type-specific  ${
m HSV}~antibodies$ . Thus, IgM reactivity to both  ${
m HSV}~1$  and  ${
m HSV}~2$  may represent crossreactive

## \*\*\*Performing Site Legend on Last Page of Report\*\*\*

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT, FENAB DETECTED	02/18/2013 13:00	Final
Page 4 of 5		>> Continued on Next Page >>



# 1-800-533-1710

Patient Name SAMPLEREPORT.FENAB DETECTED	Patient ID SA00053999	Age 42	Gender M	Order # SA00053999
Ordering Phys CLIENT,CLIENT		<b> </b>		<b>DOB</b> 11/09/1970
Client Order # SA00053999	Account Information			Report Notes
<b>Collected</b> 02/18/2013 13:00	C7028846-DLMP ROCI 3050 SUPERIOR DRIV	E		
<b>Printed</b> 02/21/2013 12:04	ROCHESTER,MN 5590	)1		

Reference Perform
Test Flag Results Unit Value Site\*

 $\ensuremath{\mathsf{HSV}}$  antibodies rather than exposure to both  $\ensuremath{\mathsf{HSV}}$  1 and  $\ensuremath{\mathsf{HSV}}$  2.

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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.

HSV 1 IgM Titer	Н	1:1	REPORTED 02/19/2013 15:40	703 3
HSV 2 IgM Titer	Н	1:2	REPORTED 02/19/2013 15:37	703

### \* Performing Site:

Y038	Focus Diagnostics, Inc.	Lab Director:
1 1000	5785 Corporate Avenue Cypress, CA 90630-4750	Edb Birottor.

Patient Name	Collection Date and Time	Report Status
SAMPLEREPORT, FENAB DETECTED	02/18/2013 13:00	Final
Page 5 of 5		** End of Report **

<sup>\*</sup> Report times for Mayo performed tests are CST/CDT