

Patient Name SAMPLEREPORT, FMCPL NORMAL	Patient ID SA00053773	Age 42	Gender M	Order # SA00053773
Ordering Phys CLIENT, CLIENT				DOB 11/09/1970
Client Order # SA00053773	Account Information			Report Notes
Collected 02/13/2013 13:00	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE ROCHESTER, MN 55901			
Printed 02/18/2013 10:11				

Test	Flag	Results	Unit	Reference Value	Perform Site*
Meningoencephalitis Comp Panel, CSF			REPORTED 02/14/2013 10:36		
Calif Enceph Virus Ab Pnl, IFA CSF					
California IgG		<1:4			Y03 8
California IgM		<1:4			Y03 8
Interpretation					Y03 8
ANTIBODY NOT DETECTED					
REFERENCE RANGE: IgG <1:4 IgM <1:4					
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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.					
E. Equine Enceph Virus Ab, IFA CSF					
Eastern Equine IgG		<1:4			Y03 8
Eastern Equine IgM		<1:4			Y03 8
Interpretation					Y03 8
ANTIBODY NOT DETECTED					
REFERENCE RANGE: IgG <1:4 IgM <1:4					
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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<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p>					
St. Louis Enceph Virus Ab, IFA CSF					
St. Louis IgG		<1:4			Y03 8
St. Louis IgM		<1:4			Y03 8
Interpretation					Y03 8
ANTIBODY NOT DETECTED					
REFERENCE RANGE: IgG <1:4 IgM <1:4					
NOTE: Specimens positive for arbovirus antibody are CDC reportable. Please contact your local public health agency.					
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p>					
W. Equine Enceph IgG/IgM, IFA CSF					
Western Equine IgG		<1:4			Y03 8
Western Equine IgM		<1:4			Y03 8
Interpretation					Y03 8
ANTIBODY NOT DETECTED					
REFERENCE RANGE: IgG <1:4 IgM <1:4					

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Test	Flag	Results	Unit	Reference Value	Perform Site*
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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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

Lymphocytic Choriomeningitis Ab, CSF

LCM IgG		<1:1			Y03 8
LCM IgM		<1:1			Y03 8

Interpretation

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 assay was developed and its performance characteristics 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.

Adenovirus Antibody, CSF

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Test	Flag	Results	Unit	Reference Value	Perform Site*
Adenovirus Ab		<1:1			Y03 8
REFERENCE RANGE: <1:1					
INTERPRETIVE CRITERIA:					
<1:1 Antibody Not Detected					
> or = 1:1 Antibody Detected					
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p> <p>This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.</p>					
Influenza Virus A and B Ab, CSF					
Influenza A Ab		<1:1			Y03 8
Influenza B Ab		<1:1			Y03 8
REFERENCE RANGE: <1:1					
INTERPRETIVE CRITERIA:					
<1:1 Antibody Not Detected					
> or = 1:1 Antibody Detected					
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p> <p>This test was developed and its performance</p>					

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Test	Flag	Results	Unit	Reference Value	Perform Site*
<p>characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.</p>					
Measles (Rubeola) G/M Ab, IFA CSF					
Measles (Rubeola) IgG, IFA		<1:64			Y03 8
Measles (Rubeola) IgM, IFA		<1:1			Y03 8
Interpretation					Y03 8
<p>ANTIBODY NOT DETECTED REFERENCE RANGE: IgG <1:64 IgM <1:1</p>					
<p>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.</p>					
<p>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.</p>					
Mumps Antibody Panel, IFA CSF					
Mumps Ab IgG, IFA		<1:8			Y03 8
Mumps Ab IgM, IFA		<1:1			Y03 8
Interpretation		See Below			Y03 8
<p>Result: ANTIBODY NOT DETECTED REFERENCE RANGE: IgG <1:8 IgM <1:1</p>					
<p>Diagnosis of infections of the central nervous system can be accomplished by demonstrating the</p>					

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Test	Flag	Results	Unit	Reference Value	Perform Site*
<p>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.</p> <p>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.</p>					
Varicella-Zoster Virus Antibody, CSF					
Varicella-Zoster Virus Ab		<1:1			Y03 8
REFERENCE RANGE: <1:1					
INTERPRETIVE CRITERIA:					
<1:1 Antibody Not Detected					
> or = 1:1 Antibody Detected					
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p> <p>This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.</p>					
Coxsackie A Antibodies, CSF					
Coxsackie A2 Ab		<1:1			Y03 8
Coxsackie A4 Ab		<1:1			Y03 8

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Test	Flag	Results	Unit	Reference Value	Perform Site*
Coxsackie A7 Ab		<1:1			Y03 8
Coxsackie A9 Ab		<1:1			Y03 8
Coxsackie A10 Ab		<1:1			Y03 8
Coxsackie A16 Ab		<1:1			Y03 8
REFERENCE RANGE: <1:1					
INTERPRETIVE CRITERIA:					
<1:1 Antibody Not Detected					
> or = 1:1 Antibody Detected					
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.</p> <p>This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.</p>					
Coxsackie B (1-6) Antibodies, CSF					
Coxsackie B1 Ab		<1:1			Y03 8
Coxsackie B2 Ab		<1:1			Y03 8
Coxsackie B3 Ab		<1:1			Y03 8
Coxsackie B4 Ab		<1:1			Y03 8
Coxsackie B5 Ab		<1:1			Y03 8
Coxsackie B6 Ab		<1:1			Y03 8
REFERENCE RANGE: <1:1					
INTERPRETIVE CRITERIA:					

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<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. 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.

Echovirus Antibodies, CSF

Echovirus 4 Ab	<1:1	Y03 8
Echovirus 7 Ab	<1:1	Y03 8
Echovirus 9 Ab	<1:1	Y03 8
Echovirus 11 Ab	<1:1	Y03 8
Echovirus 30 Ab	<1:1	Y03 8

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

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Test	Flag	Results	Unit	Reference Value	Perform Site*
<p>This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.</p>					
Cytomegalovirus IgG Ab, ELISA CSF		<0.80			Y038
REFERENCE RANGE: <0.80					
INTERPRETIVE CRITERIA:					
		<0.80		Antibody not detected	
		0.80 - 0.99		Equivocal	
		> or = 1.00		Antibody detected	
<p>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. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent. The intrathecal synthesis of CMV antibody is most accurately measured by performing the Antibody Index for CNS Infection.</p>					
Cytomegalovirus IgM Ab, ELISA CSF		<0.90			Y038
REFERENCE RANGE: <0.90					
INTERPRETIVE CRITERIA:					
		<0.90		Antibody not detected	
		0.90 - 1.09		Equivocal	
		> or = 1.10		Antibody detected	
<p>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. The interpretation of CSF results must consider CSF-serum antibody</p>					

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Test	Flag	Results	Unit	Reference Value	Perform Site*
<p>ratios to the infectious agent. The intrathecal synthesis of CMV antibody is most accurately measured by performing the Antibody Index for CNS Infection.</p>					
West Nile Virus Ab (IgG, IgM), CSF					
West Nile Ab IgG, CSF		<1.30			Y03 8
West Nile Ab IgM, CSF		<0.90			Y03 8
<p>REFERENCE RANGE: IgG <1.30 IgM <0.90</p>					
<p>INTERPRETIVE CRITERIA</p>					
<p>IgG: <1.30 Antibody not detected 1.30 - 1.49 Equivocal >=1.50 Antibody detected</p>					
<p>IgM: <0.90 Antibody not detected 0.90 - 1.10 Equivocal >1.10 Antibody detected</p>					
<p>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. Antibodies induced by other flavivirus infections (e.g. Dengue virus, St. Louis encephalitis virus) may show cross-reactivity with WNV.</p>					
HSV 1/2 IgG Type-Specific Ab, CSF					
HSV 1 IgG Index		1.00			Y03 8
HSV 2 IgG Index		1.00			Y03 8
<p>REFERENCE RANGE: < or = 1.00</p>					
<p>INTERPRETIVE CRITERIA:</p>					

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Test	Flag	Results	Unit	Reference Value	Perform Site*
	< or = 1.00	Antibody not detected			
	> 1.00	Antibody detected			
<p>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.</p>					
HSV 1/2 IgM Ab IFA Reflex to Titer					
HSV 1 IgM Screen		NEGATIVE			Y03 8
HSV 2 IgM Screen		NEGATIVE			Y03 8

REFERENCE RANGE: NEGATIVE

The IFA procedure for measuring IgM antibodies to HSV 1 and HSV 2 detects both type-common and type-specific HSV antibodies. Thus, IgM reactivity to both HSV 1 and HSV 2 may represent crossreactive HSV antibodies rather than exposure to both HSV 1 and HSV 2.

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

* Performing Site:

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