

Sample results. Actual results may vary.

PATIENT INFORMATION

REPORT STATUS: FINAL

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SPECIMEN INFORMATION

SPECIMEN:

DOB:

REQUISITION:

AGE:

LAB REF NO:

GENDER:

FASTING:

COLLECTED:

Clinical Info:

RECEIVED:

REPORTED:

Test Name	Result	Flag	Reference Range	Lab
DIPHTHERIA AND TETANUS ANTITOXOID				
DIPHTHERIA ANTITOXOID	0.32		IU/mL	XE
REFERENCE RANGE:				
> or = 0.01 IU/mL (Post-Vaccination)				
INTERPRETIVE CRITERIA:				
<0.01 IU/mL Nonprotective Antibody Level				
> or = 0.01 IU/mL Protective Antibody Level				
TETANUS ANTITOXOID	0.46		IU/mL	XE
REFERENCE RANGE:				
> or = 0.50 IU/mL (Post-Vaccination)				
INTERPRETIVE CRITERIA:				
<0.05 IU/mL Nonprotective Antibody Level				
0.05 - 0.49 IU/mL Indeterminate for Protective Antibody				
> or = 0.50 IU/mL Protective Antibody Level				
Levels greater than or equal to 0.50 IU/mL are generally considered protective, whereas levels less than 0.05 IU/mL indicate a lack of protective antibody. Levels between 0.05 and 0.49 IU/mL are indeterminate for the presence of protective antibody and may indicate a need for further immunization to tetanus toxoid.				
BORDETELLA PERTUSSIS IGG ABS, MAID				
PT IGG	<1		IU/mL	XE
FHA IGG	13		IU/mL	XE
REFERENCE RANGES:				
PT IgG <45 IU/mL				
FHA IgG <90 IU/mL				

Levels of antibodies recognizing pertussis toxin (PT) and filamentous hemagglutinin (FHA) are typically increased following vaccination or natural exposure to Bordetella pertussis. This

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assay is not appropriate for assessing immunity to pertussis because the specific antibodies and antibody levels that correlate with protection have not been well defined. The indicated reference range values reflect the 95th percentile of antibody levels from blood donors; thus, antibody levels above the reference range are highly suggestive of recent infection or vaccination. Increased levels of FHA antibodies alone may represent cross-reactive antibodies induced by infection with other *Bordetella* species, *Mycoplasma pneumoniae*, *Chlamyphila pneumoniae*, or nonencapsulated *Haemophilus influenzae*.

Performing Laboratory Information:

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