PATIENT INFORMATION

REPORT STATUS: FINAL

SPECIMEN INFORMATION

SPECIMEN:
REQUISITION:
LAB REF NO:

DOB:
AGE:
GENDER:
FASTING:

Clinical Info:

ORDERING PHYSICIAN

CLIENT INFORMATION

COLLECTED:
RECEIVED:
REPORTED:

Test Name	Result	Flag	Reference Range	Lab

MALARIA/BABESIA/OTHER BLOOD PARASITES

MALARIA/BABESIA/OTHER BLOOD 01

NEGATIVE

HOWEVER, DUE TO THE CYCLICAL SHED RATES OF THESE PARASITES, ONE NEGATIVE SPECIMEN DOES NOT RULE OUT THE POSSIBILITY OF A PARASITIC INFECTION. OBTAIN SPECIMENS AT 6-HOUR INTERVALS FOR 36 HOURS FOR A

ELISABETH S.BROCKIE,D.O.-ELECT.SIGN.

02/11/2016

LYME DISEASE AB W/REFL TO BLOT (IGG, IGM)

LYME AB SCREEN < OR = 0.90 index 01

Index	Interpretation
< or = 0.90	Negative
0.91-1.09	Equivocal
> or = 1.10	Positive

The use of purified VlsE-1 and PepC10 antigens in this assay provides improved specificity compared to assays that utilize whole cell lysates of B. burgdorferi, the causative agent of Lyme disease, and slightly better sensitivity compared to the C6 antibody assay.

As recommended by the Food and Drug Administration (FDA), all samples with positive or equivocal results in a Borrelia burgdorferi antibody EIA (screening) will be tested using a blot method. Positive or equivocal screening test results should not be interpreted as truly positive until verified as such using a supplemental assay (e.g., B. burgdorferi blot).

The screening test and/or blot for B. burgdorferi antibodies may be falsely negative in early stages of Lyme disease, including the period when erythema migrans is apparent.

CANDIDA ALBICANS AB (IGG,IGA,IGM)

C.ALBICANS IGG 1.5 HIGH 02
C.ALBICANS IGA 0.5 02
C.ALBICANS IGM 0.4 02

REFERENCE RANGE: <1.0

INTERPRETIVE CRITERIA:
<1.0 Antibody not detected
> or = 1.0 Antibody detected

Systemic candidiasis is often characterized by markedly elevated levels of IgG, IgA, and IgM recognizing Candida. However, interpretation of Candida antibody levels is complicated by detection of antibodies in 20-30% of healthy individuals, and blunted antibody responses in

immunocompromised patients at risk for systemic candidiasis. Candida antibody results should be considered within the context of clinical findings and results from other relevant laboratory tests, such as Candida antigen detection and/or culture.

HELICOBACTER PYLORI AG, EIA, STOOL

HELICOBACTER PYLORI AG, EIA, STOOL 03

HELICOBACTER PYLORI AG, EIA, STOOL

MICRO NUMBER:	60206246
TEST STATUS:	FINAL
SPECIMEN SOURCE:	STOOL
SPECIMEN QUALITY:	ADEQUATE
RESULT:	Not Detected

Antimicrobials, proton pump inhibitors, and bismuth preparations inhibit H. pylori and ingestion up to two weeks prior to testing may cause false negative results. If clinically indicated the test should be repeated on a new specimen obtained two weeks after discontinuing treatment.

GIARDIA AG, EIA, STOOL

GIARDIA AG, EIA, STOOL 01

GIARDIA AG, EIA, STOOL

MICRO NUMBER:	60207283
TEST STATUS:	FINAL
SPECIMEN SOURCE:	STOOL
SPECIMEN QUALITY:	ADEQUATE
RESULT 1:	Not Detected

NOTE: Due to intermittent shedding, one negative sample does not necessarily rule out the presence of a parasitic infection.

OVA AND PARASITES, STOOL CONC AND PERM SMEAR

OVA AND PARASITES, STOOL CONC AND 01

OVA AND PARASITES, STOOL CONC AND PERM SMEAR

MICRO NUMBER:	60206495
TEST STATUS:	FINAL
SPECIMEN SOURCE:	STOOL
SPECIMEN QUALITY:	ADEQUATE
CONCENTRATION 1:	No ova or parasites seen
TRICHROME 1:	No ova or parasites seen

Routine Ova and Parasite exam may not detect some parasites that occasionally cause diarrheal illness. Test code(s) 37213X (Crytosporidium Ag., DFA) and/or 10018X (Cyclospora and Isospora Exam) may be ordered to detect these parasites. One negative sample does not necessarily rule out the presence of a parasitic infection.

Performing Laboratory Information: