



Patient Information		Specimen Information		Client Information	
		Specimen:			
		Requisition:			
DOB: AGE:		Lab Ref #:			
		Collected:			
Gender:		Received:			
Phone		Reported:			
Test Name	PIIRFITA (MMR)	In Range Out Of Range AB (IGG) PANEL, IMMUNE ST.		erence Range	Lab
MEASLES AB (IGG),	(TEIK)		AIOD		
IMMUNE STATUS		250	AU/	m L	
AU/mL	Interpretat				
<13.50	Not consist	tent with immunity			
13.50-16.49	Equivocal	i+b immunit			
>16.49	consistent	with immunity			
		suggests immunization or ith measles virus.			
For additional	information	please refer to			
		ostics.com/faq/FAQ162			
(This link is b	eing provided	d for informational/			
educational pur	poses only.)				
MUMPS VIRUS AB (IGG)	,				
TAMMINID OFFICE		500	AU/	mL	
AU/mL	Interpretat	tion			
<9.00		stent with immunity			
9.00-10.99	Equivocal	_			
>10.99	Consistent	t with immunity			
The presence of	mumps IgG ar	ntibody suggests immunizati	lon		
		n with mumps virus.			
RUBELLA AB (IGG),					
IMMUNE STATUS		2.87	Ind	ex	
Index		retation			
<0.90		 nsistent with immunity			
0.90-0.99	Equivo	cal			
> or = 1.00	Consist	tent with immunity			
The presence of	rubella IaG	antibody suggests			
immunization or	past or curi	rent infection with			
rubella virus.	Λ. T.				
HEPATITIS B SURFACE I	AB	62	> 0	R = 10 mIU/mL	
1111011111/ 211		<u> </u>	<i>></i> 0.	I. I I I I I I I I I I I I I I I I I I	
Patient has imm	unity to hepa	atitis B virus.			
For additional	information.	please refer to			
http://educatio	n.questdiagno	ostics.com/faq/FAQ105			
		d for informational/			
educational pur VARICELLA ZOSTER VIR					
ANTIBODY (IGG)		557.30	ind	ex	
Index	-	Interpretation	2.1.0		
<135.00	Negat	tive - Antibody not detecte	ed		





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Test Name In Range 135.00 - 164.99 Equivocal

> or = 165.00

Equivocal
Positive - Antibody detected

Out Of Range Reference Range Lab

A positive result indicates that the patient has antibody to VZV but does not differentiate between an active or past infection.

The clinical diagnosis must be interpreted in conjunction with the clinical signs and symptoms of the patient. This assay reliably measures immunity due to previous infection but may not be sensitive enough to detect antibodies induced by vaccination. Thus, a negative result in a vaccinated individual does not necessarily indicate susceptibility to VZV infection. A more sensitive test for vaccination-induced immunity is Varicella Zoster Virus Antibody Immunity Screen, ACIF.

BORDETELLA PERTUSSIS

TOXIN(PT) AB (IGG), IA

IU/mL

REFERENCE RANGE::

This assay cannot be used to assess protective immunity to pertussis because the specific antibodies and antibody levels that correlate with protection have not been well defined. The primary intent of the assay is to aid in the diagnosis of infection following natural exposure to Bordetella pertussis. The indicated PT IgG reference ranges reflect the 90th percentile of antibody levels in sera from healthy children and blood donors; thus, levels above the reference range suggest recent infection or vaccination within the last few months.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

For additional information, please refer to http://education.questdiagnostics.com/faq/FAQ209. (This link is being provided for informational/educational purposes only.)

TETANUS ANTITOXOID

1.17

IU/mL

REFERENCE RANGE: 0.10 IU/mL or greater

Antibody levels > or = 0.10 IU/mL are considered protective. However, tetanus can still occur in some individuals with such antibody levels. These results should not be used to determine the necessity to administer antitoxin when clinically indicated.





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Test Name In Range Out Of Range Reference Range Lab

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DIPHTHERIA ANTITOXOID 0.17 IU/mL

REFERENCE RANGE: 0.10 IU/mL or greater

Interpretive Criteria

<0.10 IU/mL Nonprotective Antibody Level
> Or = 0.10 IU/mL Protective Antibody Level

Antibody levels > or = 0.10 IU/mL are considered protective. After a primary series of three properly spaced diphtheria toxoid doses in adults or four doses in infants, a protective level of antitoxin (defined as > or = 0.10 IU of antitoxin/mL) is reached in more than 95% of immunized persons.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

QUANTIFERON(R)-TB GOLD

PLUS, 1 TUBE NEGATIVE NEGATIVE Negative test result. M. tuberculosis complex infection unlikely. NIL 0.01 IU/mL MITOGEN-NIL IU/mL >10.00 TB1-NIL 0.02 IU/mL TB2-NIL 0.03 IU/mL

The Nil tube value reflects the background interferon gamma immune response of the patient's blood sample. This value has been subtracted from the patient's displayed TB and Mitogen results.

Lower than expected results with the Mitogen tube prevent false-negative Quantiferon readings by detecting a patient with a potential immune suppressive condition and/or suboptimal pre-analytical specimen handling.

The TB1 Antigen tube is coated with the M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper T-lymphocytes.

The TB2 Antigen tube is coated with the





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Gender: Patient			
Patient			
Health			

Test Name In Range Out Of Range Reference Range Lab

M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper and CD8+ cytotoxic T-lymphocytes.

For additional information, please refer to https://education.questdiagnostics.com/faq/FAQ204 (This link is being provided for informational/educational purposes only.)

PERFORMING SITE: