



Patient Information	Specimen Information	Client Information
<b>DOB:</b> Gender: Phone: Patient ID: Health ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	REQUEST A TEST - PWN HEALTH 7027 MILL RD STE 201 BRECKSVILLE, OH 44141-1852

**COMMENTS:** FASTING: YES

Test Name	In Range	Out Of Range	Reference Range	Lab
MEASLES, MUMPS, AND RUBELLA (MMR) AB (IGG) PANEL, IMMUNE STATUS				KS
<b>MEASLES AB (IGG), IMMUNE STATUS</b>		<b>14.20 L</b>	AU/mL	KS
AU/mL	Interpretation			
<13.50	Not consistent with immunity			
13.50-16.49	Equivocal			
>16.49	Consistent with immunity			
The presence of measles IgG suggests immunization or past or current infection with measles virus.				
For additional information, please refer to <a href="http://education.QuestDiagnostics.com/faq/FAQ162">http://education.QuestDiagnostics.com/faq/FAQ162</a> (This link is being provided for informational/educational purposes only.)				
<b>MUMPS VIRUS AB (IGG), IMMUNE STATUS</b>		<b>&lt;9.00 L</b>	AU/mL	KS
AU/mL	Interpretation			
<9.00	Not consistent with immunity			
9.00-10.99	Equivocal			
>10.99	Consistent with immunity			
The presence of mumps IgG antibody suggests immunization or past or current infection with mumps virus.				
<b>RUBELLA AB (IGG), IMMUNE STATUS</b>		<b>&lt;0.90 L</b>	Index	KS
Index	Interpretation			
<0.90	Not consistent with immunity			
0.90-0.99	Equivocal			
> or = 1.00	Consistent with immunity			
The presence of rubella IgG antibody suggests immunization or past or current infection with rubella virus.				
GLUCOSE, GESTATIONAL SCREEN (50G)-140 CUTOFF	79		<140 mg/dL	KS



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Test Name	In Range	Out Of Range	Reference Range	Lab
CBC (INCLUDES DIFF/PLT)				KS
WHITE BLOOD CELL COUNT	4.5		3.8-10.8 Thousand/uL	
RED BLOOD CELL COUNT	4.98		3.80-5.10 Million/uL	
HEMOGLOBIN	13.8		11.7-15.5 g/dL	
HEMATOCRIT	42.9		35.0-45.0 %	
MCV	86.1		80.0-100.0 fL	
MCH	27.7		27.0-33.0 pg	
MCHC	32.2		32.0-36.0 g/dL	
RDW	14.8		11.0-15.0 %	
PLATELET COUNT	246		140-400 Thousand/uL	
MPV	11.0		7.5-12.5 fL	
ABSOLUTE NEUTROPHILS	2736		1500-7800 cells/uL	
ABSOLUTE LYMPHOCYTES	1314		850-3900 cells/uL	
ABSOLUTE MONOCYTES	369		200-950 cells/uL	
ABSOLUTE EOSINOPHILS	50		15-500 cells/uL	
ABSOLUTE BASOPHILS	32		0-200 cells/uL	
NEUTROPHILS	60.8		%	
LYMPHOCYTES	29.2		%	
MONOCYTES	8.2		%	
EOSINOPHILS	1.1		%	
BASOPHILS	0.7		%	
HEPATITIS B CORE AB TOTAL	NON-REACTIVE		NON-REACTIVE	KS
<b>HEPATITIS B SURFACE AB IMMUNITY, QN</b>		<b>&lt;5 L</b>	<b>&gt; OR = 10 mIU/mL</b>	KS

Patient does not have immunity to hepatitis B virus.

For additional information, please refer to <http://education.questdiagnostics.com/faq/FAQ105>  
(This link is being provided for informational/educational purposes only).

VARICELLA ZOSTER VIRUS ANTIBODY (IGG)	996.10	index	KS
Index	Interpretation		
<135.00	Negative - Antibody not detected		
135.00 - 164.99	Equivocal		
> or = 165.00	Positive - Antibody detected		

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.



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Test Name	In Range	Out Of Range	Reference Range	Lab
HSV 1/2 IGG, W/REFL HSV2 INHIBITION				CB
HSV 1 IGG, TYPE SPECIFIC AB	<0.90		index	
HSV 2 IGG, TYPE SPECIFIC AB	<0.90		index	
	<u>Index</u>	<u>Interpretation</u>		
	<0.90	Negative		
	0.90-1.09	Equivocal		
	>1.09	Positive		

This assay utilizes recombinant type-specific antigens to differentiate HSV-1 from HSV-2 infections. A positive result cannot distinguish between recent and past infection. If recent HSV infection is suspected but the results are negative or equivocal, the assay should be repeated in 4-6 weeks. The performance characteristics of the assay have not been established for pediatric populations, immunocompromised patients, or neonatal screening.

CHLAMYDIA TRACHOMATIS RNA, TMA, UROGENITAL	NOT DETECTED		NOT DETECTED	KS
NEISSERIA GONORRHOEAE RNA, TMA, UROGENITAL	NOT DETECTED		NOT DETECTED	KS
SYPHILIS ANTIBODY CASCADING REFLEX T. PALLIDUM AB	NEGATIVE		NEGATIVE	CB

No antibodies to T. pallidum (the agent causing syphilis) were detected in the specimen. This result, however, does not exclude very recent T. pallidum infection; testing of a second specimen, collected 2-4 weeks after this specimen, is recommended if the index of suspicion for recent infection is high.

ABO GROUP AND RH TYPE ABO GROUP RH TYPE	A RH(D) NEGATIVE			KS
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For additional information, please refer to <http://education.QuestDiagnostics.com/faq/FAQ111> (This link is being provided for informational/educational purposes only.)





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**Infectious Diseases**

Test Name	Result	Reference Range	Lab
HIV 1/2 ANTIGEN/ANTIBODY, FOURTH GENERATION W/RFL			KS
HIV AG/AB, 4TH GEN	NON-REACTIVE	NON-REACTIVE	

HIV-1 antigen and HIV-1/HIV-2 antibodies were not detected. There is no laboratory evidence of HIV infection.

PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

For additional information please refer to <http://education.questdiagnostics.com/faq/FAQ106> (This link is being provided for informational/educational purposes only.)

The performance of this assay has not been clinically validated in patients less than 2 years old.

Physician Comments:

**Infectious Diseases**

Test Name	Result	Reference Range	Lab
HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM			KS
HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE	NON-REACTIVE	
HEPATITIS A AB, TOTAL	NON-REACTIVE	NON-REACTIVE	KS
HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR			KS
HEPATITIS C ANTIBODY INDEX	NON-REACTIVE	NON-REACTIVE	
	0.01	<1.00	

HCV antibody was non-reactive. There is no laboratory evidence of HCV infection.

In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested.

For additional information please refer to <http://education.questdiagnostics.com/faq/FAQ22v1> (This link is being provided for informational/educational purposes only.)

Physician Comments:

**End Notes:**

HEPATITIS A AB, TOTAL

For additional information, please refer to <http://education.questdiagnostics.com/faq/FAQ202> (This link is being provided for informational/educational purposes only.)

KS

**PERFORMING SITE:**

CLIENT SERVICES:

SPECIMEN: