

| Patient Information | Specimen Information | Client Information |
|---------------------|----------------------|--------------------|
|                     |                      |                    |

**COMMENTS:**

| Test Name                                  | In Range | Out Of Range | Reference Range | Lab |
|--|----------|--------------|-----------------|-----|
| HERPESVIRUS 6 ANTIBODIES (IGG, IGM)        |          |              |                 |     |
| HERPESVIRUS 6 AB (IGG)                     | <1:10    |              | titer           |     |
| HERPESVIRUS 6 AB (IGM)                     | <1:20    |              | titer           |     |
| INTERPRETATION<br>ANTIBODY NOT DETECTED    |          |              |                 |     |
| REFERENCE RANGE:<br>IgG <1:10<br>IgM <1:20 |          |              |                 |     |

Human Herpesvirus 6 (HHV-6) infects T-lymphocytes, and has been identified as an etiologic agent of exanthema subitum. Rises in antibody titers to HHV-6 have been detected during infection with other viruses. In seroepidemiology studies of the prevalence of exposure using serum screening dilutions of 1:10, the detection of IgG antibody in a mid-life population approaches 100%. Due to this high prevalence of HHV-6 antibody, correlations of single IgG titers with specific diseases are of little clinical value.

Evidence of acute infection or reactivation of HHV-6 is demonstrated by a significant rise or seroconversion of IgG and IgM titers.

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.

**PERFORMING SITE:**

**SPECIMEN:**