Quest Diagnostics

Report Status: Final

Patient Information	Specimen Information	Client Information

COMMENTS:

Test Name	In Range	Out Of Range	Reference Range	Lab
COCCIDIOIDES ANTIBODY, CF AND ID				
COCCIDIOIDES AB, CF,SERUM	<1:2			

REFERENCE RANGE: <1:2

INTERPRETIVE CRITERIA:
<1:2 Antibody Not Detected
> or = 1:2 Antibody Detected

All serum titers > or = 1:2 should be considered evidence indicative of coccidioidomycosis, although titers of 1:2 and 1:4 should be confirmed by immunodiffusion testing. Titers exceeding 1:16 usually reflect disseminated disease. In general, higher titers are correlated with disease severity, and changes in serial titers are of prognostic value A negative CF test does not, however, rule out the diagnosis. Only 70% of patients with cavitary disease are positive, and only 30% of patients with nodular disease are positive.

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.

COCCIDIOIDES AB (IGG), IMMUNODIFFUSION, SERUM	NEGATIVE			

REFERENCE RANGE: NEGATIVE

INTERPRETIVE CRITERIA:
NEGATIVE: Antibody Not Detected
POSITIVE: Antibody Detected

The immunodiffusion (ID) procedure correlates both in sensitivity and clinical utility with the CF test. The ID test, which detects IgG directed to the "F" antigen, becomes positive within 4 weeks after infection and remains positive throughout clinically active disease. It is most useful in confirming the specificity of low CF titers, where lines of identity are formed with reference antisera. Positive ID reactions are diagnostic for coccidioidomycosis and usually indicate active or recent disease and remain detectable for up to 1 year thereafter.

PERFORMING SITE:

SPECIMEN:

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Ultra Labs Tests SAMPLE LAB REPORT