

Specimen Collected: 23-Jun-21 11:36

RA Panel w/ Rflx to RF IgA/IgG/IgM EIA | Received: 23-Jun-21 11:52 | Report/Verified: 23-Jun-21 12:35

Procedure	Result	Units	Reference Interval
Carbamylated Protein Antibody, IgG	0 ⁱ¹	Units	0-19

RA Panel w/ Rflx to RF IgA/IgG/IgM EIA | Received: 23-Jun-21 11:52 | Report/Verified: 23-Jun-21 12:38

Procedure	Result	Units	Reference Interval
Cyclic Citrullinated Peptide Ab, IgG	20 ^{H i2}	Units	0-19

RA Panel w/ Rflx to RF IgA/IgG/IgM EIA | Received: 23-Jun-21 11:52 | Report/Verified: 23-Jun-21 12:51

Procedure	Result	Units	Reference Interval
Rheumatoid Factor	14	IU/mL	0-14

Rheumatoid Factors, IgA, IgG, IgM ELISA | Received: 23-Jun-21 11:52 | Report/Verified: 23-Jun-21 13:20

Procedure	Result	Units	Reference Interval
Rheumatoid Factor, IgA by ELISA	30 ^{H i3}	Units	0-6
Rheumatoid Factor, IgG by ELISA	30 ^{H i4}	Units	0-6
Rheumatoid Factor, IgM by ELISA	30 ^{H i5}	Units	0-6

Test Information

i1: Carbamylated Protein Antibody, IgG
 INTERPRETIVE INFORMATION: Carbamylated Protein (CarP) Ab, IgG
 Anti-carbamylated protein (anti-CarP) IgG antibodies are present in about 34-53 percent of patients with RA, have specificities of greater than 90 percent and can occur in RA patients seronegative for both rheumatoid factor and anti-CCP. These autoantibodies may be present in the preclinical phase of disease, are associated with future RA development, and may predict radiographic joint destruction. Patients with weak positive results should be monitored and testing repeated.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i2: Cyclic Citrullinated Peptide Ab, IgG
 INTERPRETIVE INFORMATION: Cyclic Citrullinated Peptide Antibody, IgG

19 Units or less	Negative
20-39 Units	Weak Positive
40-59 Units	Moderate Positive

*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H-High, i-Test Information, L-Low, t-Interpretive Text, @=Performing lab

Unless otherwise indicated, testing performed at:

ARUP Laboratories
 500 Chipeta Way, Salt Lake City, UT 84108
 Laboratory Director: Tracy I. George, MD

ARUP Accession: 21-174-900118
Report Request ID: 15025153
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Test Information

i2: Cyclic Citrullinated Peptide Ab, IgG
60 Units or greater Strong Positive

Anti-cyclic citrullinated peptide (anti-CCP), IgG antibodies are present in about 69-83 percent of patients with rheumatoid arthritis (RA) and have specificities of 93-95 percent. These autoantibodies may be present in the preclinical phase of disease, are associated with future RA development, and may predict radiographic joint destruction. Patients with weak positive results should be monitored and testing repeated.

i3: Rheumatoid Factor, IgA by ELISA
INTERPRETIVE INFORMATION: Rheumatoid Factor, IgA by ELISA

The presence of all three rheumatoid factor (RF) isotypes at abnormal levels has high specificity for a diagnosis of rheumatoid arthritis (RA). However, the presence of RF isotypes in any combination may be found in a variety of conditions, including Sjogren syndrome and hepatitis infections.

i4: Rheumatoid Factor, IgG by ELISA
INTERPRETIVE INFORMATION: Rheumatoid Factor, IgG by ELISA

The presence of all three rheumatoid factor (RF) isotypes at abnormal levels has high specificity for a diagnosis of rheumatoid arthritis (RA). However, the presence of RF isotypes in any combination may be found in a variety of conditions, including Sjogren syndrome and hepatitis infections.

i5: Rheumatoid Factor, IgM by ELISA
INTERPRETIVE INFORMATION: Rheumatoid Factor, IgM by ELISA

The presence of all three rheumatoid factor (RF) isotypes at abnormal levels has high specificity for a diagnosis of rheumatoid arthritis (RA). However, the presence of RF isotypes in any combination may be found in a variety of conditions, including Sjogren syndrome and hepatitis infections.

*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H=High, i=Test Information, L=Low, t=Interpretive Text, @=Performing lab

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