

Specimen Collected: 16-Jun-23 15:28

Procedure	Result	Units	Reference Interval
VGKC with Reflex, Serum	Received: 16-Jun-23 15:28 Report/Verified: 16-Jun-23 15:29		
Voltage-Gated Potassium Channel Ab, Ser	55 ^{# f1 i1}	pmol/L	[0-31]
LG11/CASPR2 Abs IgG CBA w/Rflx, Ser	Received: 16-Jun-23 15:28 Report/Verified: 16-Jun-23 15:29		
CASPR2 Ab IgG CBA-IFA Screen, Serum	Detected ^{* t1 i2}		[<1:10]
LG11 Ab IgG CBA-IFA Screen, Serum	Detected ^{* t2 i3}		[<1:10]
CASPR2 Ab IgG Titer by CBA-IFA, Ser	Received: 16-Jun-23 15:28 Report/Verified: 16-Jun-23 15:30		
CASPR2 Ab IgG CBA-IFA Titer, Serum	1:160 ^{* i4}		[<1:10]
LG11 Ab IgG Titer by CBA-IFA, Ser	Received: 16-Jun-23 15:28 Report/Verified: 16-Jun-23 15:30		
LG11 Ab IgG CBA-IFA Titer, Serum	1:160 ^{* i5}		[<1:10]

Interpretive Text

- t1: 16-Jun-23 15:28 (CASPR2 Ab IgG CBA-IFA Screen, Serum)
CASPR2 Antibody, IgG is detected. Titer results to follow.
- t2: 16-Jun-23 15:28 (LG11 Ab IgG CBA-IFA Screen, Serum)
LG11 Antibody, IgG is detected. Titer results to follow.

Result Footnote

- f1: Voltage-Gated Potassium Channel Ab, Ser

Leucine-Rich, Glioma Inactivated Protein 1 Antibody, IgG and Contactin-Associated Protein-2 Antibody, IgG with Reflex to Titers added.

Test Information

- i1: Voltage-Gated Potassium Channel Ab, Ser
INTERPRETIVE INFORMATION: Voltage-Gated Potassium Channel (VGKC) Antibody, Serum

Negative 31 pmol/L or less
Indeterminate... 32 - 87 pmol/L
Positive 88 pmol/L or greater

Voltage-Gated Potassium Channel (VGKC) antibodies are associated with neuromuscular weakness as found in neuromyotonia (also known as Issacs syndrome) and Morvan syndrome. VGKC antibodies are also associated with paraneoplastic neurological syndromes and limbic encephalitis; however, VGKC antibody-associated limbic encephalitis may be associated with antibodies to leucine-rich, glioma-inactivated 1 protein (LG11) or contactin-associated protein-2 (CASPR2) instead of potassium channel antigens. A substantial number of VGKC-antibody positive cases are negative

*=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: Jonathan R. Genzen, MD, PhD

ARUP Accession: 23-167-900141

Report Request ID: 17763709

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Test Information

i1: Voltage-Gated Potassium Channel Ab, Ser
for LGI1 and CASPR2 IgG autoantibodies, not all VGKC complex antigens are known. The clinical significance of this test can only be determined in conjunction with the patient's clinical history and related laboratory testing.

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: CASPR2 Ab IgG CBA-IFA Screen, Serum
INTERPRETIVE INFORMATION: CASPR2 Ab IgG CBA-IFA Screen,
Serum

Contactin-associated protein-2 (CASPR2) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of CASPR2 IgG antibody is associated with a wide spectrum of clinical manifestations, including acquired neuromyotonia, limbic encephalitis, painful neuropathy, and Morvan syndrome. Tumors such as thymoma, small cell lung cancer, and other rarer tumors may occur. The full-spectrum of clinical disorders and tumors associated with the CASPR2 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes CASPR2 transfected cell lines for the detection and semiquantification of the CASPR2 IgG antibody.

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i3: LGI1 Ab IgG CBA-IFA Screen, Serum
INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Screen, Serum

Leucine-rich, glioma-inactivated 1 protein (LGI1) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of LGI1 IgG antibody is mainly associated with limbic encephalitis, hyponatremia, and myoclonic movements. LGI1 IgG antibody is rarely associated with tumors but may occur infrequently in Morvan syndrome, neuromyotonia, and idiopathic epilepsy. The full-spectrum of clinical disorders associated with the LGI1 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes LGI1 transfected cell lines for the detection and semiquantification of the LGI1 IgG antibody.

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Test Information

i3: LGI1 Ab IgG CBA-IFA Screen, Serum

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i4: CASPR2 Ab IgG CBA-IFA Titer, Serum

INTERPRETIVE INFORMATION: CASPR2 Ab IgG CBA-IFA Titer, Serum

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.

i5: LGI1 Ab IgG CBA-IFA Titer, Serum

INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Titer, Serum

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