ARUP LABORATORIES | aruplab.com
500 Chipeta Way, Salt Lake City, Utah 84108-1221
phone: 801-583-2787, toll free: 800-522-2787
Jonathan R. Genzen, MD, PhD, Chief Medical Officer

PATIENT REPORT

Patient Age/Sex: Unknown

Specimen Collected: 19-Jun-23 09:03

AQP4 ELISA w/ Reflex to AQP4 IFA | **Received: 19-Jun-23 09:03** **Report/Verified: 19-Jun-23 09:07**

Procedure	Result	Units	Reference Interval
Aquaporin-4 Receptor Antibody	**55.0** H f1 i1	U/mL	[<=2.9]

NMO/AQP4-IgG CBA w/Rfx, Ser | **Received: 19-Jun-23 09:03** **Report/Verified: 19-Jun-23 09:07**

Procedure	Result	Units	Reference Interval
NMO/AQP4 Ab IgG CBA-IFA Screen, Serum	**Detected** * t1 i2		[<1:10]

NMO/AQP4-Ab IgG Titer by CBA-IFA, Ser | **Received: 19-Jun-23 09:03** **Report/Verified: 19-Jun-23 09:07**

Procedure	Result	Units	Reference Interval
NMO/AQP4 Ab IgG CBA-IFA Titer, Serum	**1:640** * i3		[<1:10]

Interpretive Text

t1: 19-Jun-23 09:03 (NMO/AQP4 Ab IgG CBA-IFA Screen, Serum)
Aquaporin-4 Receptor Antibody, IgG is detected. Titer results to follow.

Result Footnote

f1: Aquaporin-4 Receptor Antibody

AQP4 antibodies detected by ELISA. IFA testing to follow.

Test Information

i1: Aquaporin-4 Receptor Antibody
INTERPRETIVE INFORMATION: Aquaporin-4 Receptor Antibody

Negative ..... 2.9 U/mL or less
Positive ..... 3.0 U/mL or greater

Approximately 75 percent of patients with neuromyelitis optica (NMO) express antibodies to the aquaporin-4 (AQP4)receptor. Diagnosis of NMO requires the presence of longitudinally extensive acute myelitis (lesions extending over 3 or more vertebral segments)and optic neuritis. While absense of antibodies to the AQP4 receptor does not rule out the diagnosis of NMO, presence of this antibody is diagnostic for NMO.

i2: NMO/AQP4 Ab IgG CBA-IFA Screen, Serum
INTERPRETIVE INFORMATION: NMO/AQP4 Ab IgG CBA-IFA Screen, Serum
Neuromyelitis optic (NMO) commonly presents with optic neuritis or longitudinally extensive transverse myelitis. Approximately 75 percent of patients with NMO have antibodies to the aquaporin-4 (AQP4) receptor. While the absence of AQP4 receptor antibodies does not rule out a diagnosis of NMO, presence of this antibody is diagnostic for NMO.

This indirect fluorescent antibody assay utilizes AQP4 receptor transfected cell lines for the detection and semiquantification of AQP4 IgG antibody.

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

Test Information

i2: NMO/AQP4 Ab IgG CBA-IFA Screen, 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.

i3: NMO/AQP4 Ab IgG CBA-IFA Titer, Serum

INTERPRETIVE INFORMATION: NMO/AQP4 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.