

**Specimen Collected: 19-Jun-23 09:02**

**Autoimmune Neurologic Disease** | Received: 19-Jun-23 09:03 Report/Verified: 19-Jun-23 09:06  
**Reflex CSF**

Procedure	Result	Units	Reference Interval
NMDA Receptor Ab IgG CBA-IFA,CSF	<b>1:160 * f1 i1</b>		[< 1:1]
Paraneoplastic Abs (PCCA/ANNA) IgG,CSF	<b>ANNA Detected * f2 i2</b>		[None Detected]
AMPA Receptor Ab IgG CBA-IFA Screen,CSF	<b>Detected * t1 i3</b>		[< 1:1]
GABA-BR Ab IgG CBA-IFA Screen,CSF	<b>Detected * t2 i4</b>		[< 1:1]
CASPR2 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t3 i5</b>		[< 1:1]
LGI1 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t4 i6</b>		[< 1:1]
CV2.1 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t5 i7</b>		[< 1:1]
SOX1 Antibody,IgG by Immunoblot,CSF	<b>High Positive * i8</b>		[Negative]
Amphiphysin Antibody,CSF	<b>Positive * i9</b>		[Negative]
DPPX Ab IgG CBA-IFA Screen,CSF	<b>Detected * t6 i10</b>		[< 1:1]
GABA-AR Ab IgG CBA-IFA Screen,CSF	<b>Detected * t7 i11</b>		[< 1:1]
ITPR1 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t8 i12</b>		[< 1:1]
IgLON5 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t9 i13</b>		[< 1:1]
mGluR1 Ab IgG CBA-IFA Screen,CSF	<b>Detected * t10 i14</b>		[< 1:1]
Voltage-Gated Potassium Channel Ab,CSF	<b>10.0 # i15</b>	pmol/L	[0.0-1.1]
Glutamic Acid Decarboxylase Antibody CSF	<b>55.0 # i16</b>	IU/mL	[0.0-5.0]

**Neuronal Nuclear Abs IgG, IB, CSF** | Received: 19-Jun-23 09:03 Report/Verified: 19-Jun-23 09:06

Procedure	Result	Units	Reference Interval
Neuronal Nuclear Ab (Hu) IgG,IB,CSF	<b>High Positive * i17</b>		[Negative]
Neuronal Nuclear Ab (Ri) IgG,IB,CSF	<b>Positive * i18</b>		[Negative]
Neuronal Nuclear Ab (Yo) IgG,IB,CSF	<b>Positive * i19</b>		[Negative]
Neuronal Nuclear Ab (TR/DNER) IgG,CSF	<b>High Positive * i20</b>		[Negative]

**Neuronal Nuclear Antibody Titer, IgG CSF** | Received: 19-Jun-23 09:03 Report/Verified: 19-Jun-23 09:06

Procedure	Result	Units	Reference Interval
Neuronal Nuclear Ab Titer,IgG CSF	<b>1:80 * i21</b>		[< 1:1]

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**Unless otherwise indicated, testing performed at:**

**ARUP Laboratories**

500 Chipeta Way, Salt Lake City, UT 84108

Laboratory Director: Jonathan R. Genzen, MD, PhD

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AMPA Rptr Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
AMPA Receptor Ab IgG CBA-IFA Titer,CSF	1:80 * <sup>i22</sup>	Reference Interval [< 1:1]
CASPR2 Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
CASPR2 Ab IgG CBA-IFA Titer,CSF	1:40 * <sup>i23</sup>	Reference Interval [< 1:1]
CV2.1 Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
CV2.1 Ab IgG CBA-IFA Titer,CSF	1:160 * <sup>i24</sup>	Reference Interval [<1.1]
DPPX Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
DPPX Ab IgG CBA-IFA Titer,CSF	1:40 * <sup>i25</sup>	Reference Interval [< 1:1]
GABA-A Receptor IgG CBA-IFA Titer, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
GABA-AR Ab IgG CBA-IFA Titer,CSF	1:40 * <sup>i26</sup>	Reference Interval [< 1:1]
GABA-B Rptr Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
GABA-BR Ab IgG CBA-IFA Titer,CSF	1:80 * <sup>i27</sup>	Reference Interval [< 1:1]
ITPR1 Ab IgG CBA-IFA Titer, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
ITPR1 Ab IgG CBA-IFA Titer,CSF	1:160 * <sup>i28</sup>	Reference Interval [< 1:1]
IgLON5 Ab IgG CBA-IFA Titer, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
IgLON5 Ab IgG CBA-IFA Titer,CSF	1:80 * <sup>i29</sup>	Reference Interval [< 1:1]
LG11 Ab IgG Titer by CBA-IFA, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
LG11 Ab IgG CBA-IFA Titer,CSF	1:160 * <sup>i30</sup>	Reference Interval [< 1:1]
mGluR1 Ab IgG CBA-IFA Titer, CSF	Received: 19-Jun-23 09:03	Report/Verified: 19-Jun-23 09:06
Procedure	Result	Units
mGluR1 Ab IgG CBA-IFA Titer,CSF	1:40 * <sup>i31</sup>	Reference Interval [< 1:1]

**Interpretive Text**

- t1: 19-Jun-23 09:02 (AMPA Receptor Ab IgG CBA-IFA Screen, CSF)  
AMPA Antibody, IgG is detected. Titer results to follow.
- t2: 19-Jun-23 09:02 (GABA-BR Ab IgG CBA-IFA Screen, CSF)  
GABA-BR Antibody, IgG is detected. Titer results to follow.
- t3: 19-Jun-23 09:02 (CASPR2 Ab IgG CBA-IFA Screen, CSF)  
CASPR2 Antibody, IgG is detected. Titer results to follow.
- t4: 19-Jun-23 09:02 (LG11 Ab IgG CBA-IFA Screen, CSF)  
LG11 Antibody, IgG is detected. Titer results to follow.

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**Interpretive Text**

t5: 19-Jun-23 09:02 (CV2.1 Ab IgG CBA-IFA Screen, CSF)  
CV2.1 Antibody, IgG is detected. Titer results to follow. Additional charges apply.

t6: 19-Jun-23 09:02 (DPPX Ab IgG CBA-IFA Screen, CSF)  
DPPX Antibody, IgG is detected. Titer results to follow.

t7: 19-Jun-23 09:02 (GABA-AR Ab IgG CBA-IFA Screen, CSF)  
GABA-AR Antibody, IgG is detected. Titer results to follow.

t8: 19-Jun-23 09:02 (ITPR1 Ab IgG CBA-IFA Screen, CSF)  
ITPR1 Antibody, IgG is detected. Titer results to follow.

t9: 19-Jun-23 09:02 (IgLON5 Ab IgG CBA-IFA Screen, CSF)  
IgLON5 Antibody, IgG is detected. Titer results to follow.

t10: 19-Jun-23 09:02 (mGluR1 Ab IgG CBA-IFA Screen, CSF)  
mGluR1 Antibody, IgG is detected. Titer results to follow.

**Result Footnote**

f1: NMDA Receptor Ab IgG CBA-IFA, CSF

Antibodies to NMDA were detected; titer was performed at an additional charge.

Clinical trials for anti-NMDA receptor encephalitis are currently underway (clinicaltrials.gov).

f2: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

Antibodies detected, therefore IFA titer and Immunoblot testing to be performed.

**Test Information**

i1: NMDA Receptor Ab IgG CBA-IFA, CSF

INTERPRETIVE INFORMATION: NMDA Receptor Ab IgG CBA-IFA, CSF

NMDA receptor antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. In addition, positive results have been reported in patients with non-autoimmune phenotypes. A negative test result does not rule out a diagnosis of autoimmune limbic encephalitis. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes full-length GluN1 transfected cell lines for the detection and semiquantification of NMDA receptor IgG antibody.

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: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

INTERPRETIVE INFORMATION: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

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

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**Test Information**

i2: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i3: AMPA Receptor Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG CBA-IFA Screen, CSF

Alpha-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid receptor (AMPA) antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune encephalitis. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

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

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.

i4: GABA-BR Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: GABA-BR Ab IgG CBA-IFA Screen, CSF

Gamma-amino butyric acid receptor, type B (GABA-BR) antibody is found in a subset of patients with autoimmune epilepsy and other autoimmune neurologic phenotypes; it may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

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

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: CASPR2 Ab IgG CBA-IFA Screen, CSF

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

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

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**Test Information**

i5: CASPR2 Ab IgG CBA-IFA Screen, CSF  
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.

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.

i6: LGI1 Ab IgG CBA-IFA Screen, CSF  
INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Screen, CSF

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 semi-quantification of the LGI1 IgG antibody.

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.

i7: CV2.1 Ab IgG CBA-IFA Screen, CSF  
INTERPRETIVE INFORMATION: CV2.1 Ab IgG CBA-IFA Screen, CSF

CV2.1 antibodies aid in discriminating between chronic paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-CV2.1 is associated with small-cell lung cancer and thymoma. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

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**Test Information**

i7: CV2.1 Ab IgG CBA-IFA Screen, CSF

This indirect fluorescent antibody assay utilizes CV2.1 transfected cell lines for the detection and semiquantification of the CV2.1 IgG antibody.

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.

i8: SOX1 Antibody, IgG by Immunoblot, CSF

INTERPRETIVE INFORMATION: SOX1 Antibody, IgG by Immunoblot, CSF

SOX1 antibody is detected in patients with Lambert-Eaton myasthenic syndrome (LEMS) and in patients with paraneoplastic cerebellar degeneration (PCD), paraneoplastic and nonparaneoplastic neuropathy. SOX1 antibody is associated with small cell lung cancer. A negative test result does not rule out a diagnosis of LEMS or other causes of paraneoplastic neurological syndrome.

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

i9: Amphiphysin Antibody, CSF

INTERPRETIVE INFORMATION: Amphiphysin Antibody IgG, CSF

Amphiphysin antibody is present in about 5 percent of patients with stiff-person syndrome and is found variably in other causes of paraneoplastic neurological syndrome (PNS). Amphiphysin antibody is mainly associated with small-cell lung cancer and breast tumors.

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.

i10: DPPX Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: DPPX Ab IgG CBA-IFA Screen, CSF

DPPX antibody is found in a subset of patients with autoimmune encephalitis, and is often associated with prodromal gastrointestinal symptoms and unintentional weight loss. It may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes DPPX transfected cells for the detection and semiquantification of the DPPX IgG antibody.

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**Test Information**

i10: DPPX Ab IgG CBA-IFA Screen, CSF

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

i11: GABA-AR Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: GABA-AR Ab IgG CBA-IFA Screen, CSF

Gamma-aminobutyric acid receptor, type A (GABA-AR) antibody is found in a subset of patients with autoimmune encephalitis or autoimmune epilepsy, and may occur with or without associated tumor. A negative test result does not rule out a diagnosis of autoimmune limbic encephalitis or autoimmune epilepsy. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes GABA-AR transfected cell lines for detection and semi-quantification of GABA-AR IgG antibody.

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

i12: ITPR1 Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: ITPR1 Ab IgG CBA-IFA Screen, CSF

Inositol 1, 4, 5-trisphosphate receptor type 1 (ITPR1) antibody is found in a subset of patients with autoimmune cerebellar ataxia, encephalitis, neuropathy, or myelopathy and may occur with or without associated tumor. A negative test result does not rule out a diagnosis of autoimmune cerebellar ataxia or related autoimmune neurologic disorders. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes ITPR1 transfected cell lines for detection and semi-quantification of ITPR1 IgG antibody.

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

i13: IgLON5 Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: IgLON5 Ab IgG CBA-IFA Screen, CSF

IgLON Family Member 5 (IgLON5) antibody is found in a subset of patients with autoimmune encephalitis or other autoimmune neurologic/neurodegenerative disorders and may occur with or without associated tumor. A negative test result does not rule

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**Test Information**

i13: IgLON5 Ab IgG CBA-IFA Screen, CSF

out a diagnosis of an autoimmune neurologic disorder. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes IgLON5 transfected cell lines for detection and semi-quantification of IgLON5 IgG antibody.

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

i14: mGluR1 Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: mGluR1 Ab IgG CBA-IFA Screen, CSF

Metabotropic glutamate receptor 1 (mGluR1) antibody is found in a subset of patients with autoimmune cerebellar ataxia or autoimmune encephalitis and may occur with or without associated tumor. A negative test result does not rule out a diagnosis of autoimmune cerebellar ataxia or limbic encephalitis. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes mGluR1 transfected cell lines for detection and semi-quantification of mGluR1 IgG antibody.

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

i15: Voltage-Gated Potassium Channel Ab, CSF

INTERPRETIVE INFORMATION: Voltage-Gated Potassium Channel (VGKC) Antibody, CSF

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 (LGI1) or contactin-associated protein-2 (CASPR2) instead of potassium channel antigens. A substantial number of VGKC-antibody positive cases are negative 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.

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**Test Information**

i16: Glutamic Acid Decarboxylase Antibody CSF

INTERPRETIVE INFORMATION: Glutamic Acid Decarboxylase  
Antibody, CSF

A value greater than 5.0 IU/mL is considered positive for glutamic acid decarboxylase antibody (GAD AB CSF).

This assay is intended for the semi-quantitative determination of the GAD Ab in human CSF. Results should be interpreted within the context of clinical symptoms.

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i17: Neuronal Nuclear Ab (Hu) IgG, IB, CSF

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Hu)  
IgG, IB, CSF

This test detects IgG antineuronal antibodies to Hu, Ri, and Yo and Tr (DNER) antigens.

Antineuronal antibodies serve as markers that aid in discriminating between a true paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-Hu (antineuronal nuclear antibody, type I) is associated with small cell lung cancer. Anti-Ri (antineuronal nuclear antibody, type II) is associated with neuroblastoma in children and with fallopian tube and breast cancer in adults. Anti-Yo (anti-Purkinje cell cytoplasmic antibody) is associated with ovarian and breast cancer. Anti-Tr(DNER) is associated with Hodgkin's lymphoma.

The presence of one or more of these antineuronal antibodies supports a clinical diagnosis of PND and should lead to a focused search for the underlying neoplasm.

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i18: Neuronal Nuclear Ab (Ri) IgG, IB, CSF

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Ri) IgG, IB,  
CSF

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i19: Neuronal Nuclear Ab (Yo) IgG, IB, CSF

INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Yo) IgG, IB,  
CSF

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- i19: Neuronal Nuclear Ab (Yo) IgG, IB, CSF  
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- i20: Neuronal Nuclear Ab (TR/DNER) IgG, CSF  
INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (TR/DNER)  
IgG, CSF  
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.
- i21: Neuronal Nuclear Ab Titer, IgG CSF  
INTERPRETIVE INFORMATION: Neuronal Nuclear Ab Titer, IgG CSF  
  
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- i22: AMPA Receptor Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG CBA-IFA  
Titer, CSF  
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.
- i23: CASPR2 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: CASPR2 Ab IgG CBA-IFA Titer, CSF  
  
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- i24: CV2.1 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: CV2.1 Ab IgG CBA-IFA Titer, CSF  
  
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- i25: DPPX Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: DPPX Ab IgG CBA-IFA Titer, CSF  
  
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**Test Information**

i25: DPPX Ab IgG CBA-IFA Titer, CSF  
Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i26: GABA-AR Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: GABA-AR Ab IgG CBA-IFA Titer, CSF

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

i27: GABA-BR Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: GABA-BR Ab IgG CBA-IFA Titer, CSF

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.

i28: ITPR1 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: ITPR1 Ab IgG CBA-IFA Titer, CSF

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

i29: IgLON5 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: IgLON5 Ab IgG CBA-IFA Titer, CSF

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

i30: LGI1 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Titer, CSF

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.

i31: mGluR1 Ab IgG CBA-IFA Titer, CSF  
INTERPRETIVE INFORMATION: mGluR1 Ab IgG CBA-IFA Titer, CSF

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

\*=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:** 23-170-900046

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