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500 Chipeta Way, Salt Lake City, Utah 84108-1221 phone: 801-583-2787, toll free: 800-522-2787

Tracy I. George, MD, Chief Medical Officer

Patient Report

Reference Interval

Patient Age/Sex: 14 hours Male

Specimen Collected: 14-Mar-22 14:41

Coccidioides Abs Panel, Serum, By Received: 14-Mar-22 14:43 Report/Verified: 14-Mar-22 14:45

Units

ELISA Procedure

Coccidioides Antibody, 3.0 H f1 i3 IV <=0.9

Result

IgM by ELISA

Coccidioides by Detected * t1 Not Detected

Immunodiffusion, Serum

Interpretive Text

t1: 14-Mar-22 14:41 (Coccidioides by Immunodiffusion, Serum)

IDTP and IDCF bands were detected, suggesting current or recent Coccidioides infection.

Result Footnote

f1: Coccidioides Antibody, IgM by ELISA

Positive EIA results should be confirmed with immunodiffusion (ID) or the complement fixation (CF) test. When the ID or CF tests fail to corroborate the EIA results, the diagnosis is less firmly established.

Test Information

il: Coccidioides Antibody by CF

INTERPRETIVE INFORMATION: Coccidioides Ab by Complement Fixation (CF)

Any titer suggests past or current infection. However, greater than 30 percent of cases with chronic residual pulmonary disease have negative Complement Fixation (CF) tests. Titers of less than 1:32 (even as low as 1:2) may indicate past infection or self-limited disease; anticoccidiodal CF antibody titers in excess of 1:16 may indicate disseminated infection. CF serology may be used to follow therapy. Antibody in CSF is considered diagnostic for coccidioidal meningitis, although 10 percent of patients with coccidioidal meningitis will not have antibody in CSF.

i2: Coccidioides Antibody, IgG by ELISA

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgG:

0.9 IV or less: Negative - No significant level of

Coccidioides IgG antibody detected.

1.0 - 1.4 IV: Equivocal - Questionable presence of Coccidioides IgG antibody detected.

Repeat testing in 10-14 days may be

helpful.

1.5 IV or greater: Positive - Presence of IgG antibody

to Coccidioides detected, suggestive

of current or past infection.

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

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Unless otherwise indicated, testing performed at:

ARUP Laboratories

500 Chipeta Way, Salt Lake City, UT 84108

Laboratory Director: Tracy I. George, MD

ARUP Accession: 22-073-900178

Report Request ID: 15081166

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Patient Report

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Tracy I. George, MD, Chief Medical Officer

Patient Age/Sex: 14 hours Male

Test Information

i2: Coccidioides Antibody, IgG by ELISA

IgG antibody usually appears by the third week of infection and may persist for years. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

i3: Coccidioides Antibody, IgM by ELISA

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgM:

0.9 IV or less: Negative - No significant level of

Coccidioides IgM antibody detected.

1.0 - 1.4 IV: Equivocal - Questionable presence of

Coccidioides IgM antibody detected. Repeat testing in 10-14 days may be

helpful.

1.5 IV or greater: Positive - Presence of IgM antibody

to Coccidioides detected, suggestive

of current or recent infection.

In most symptomatic patients, IgM antibody usually appears by the second week of infection and disappears by the fourth month. Both tube precipitin (TP) and CF antigens are represented in the ELISA tests.

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