

Specimen Collected: 14-Mar-22 14:41

Coccidioides Antibody Reflexive Panel	 Received: 14-Mar-22 14:43	Report/Verified: 14-Mar-22 14:46
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Procedure	Result	Units	Reference Interval
Coccidioides Antibody, IgG by ELISA	1.5 ^{# i1}	IV	<=0.9
Coccidioides Antibody, IgM by ELISA	1.5 ^{# f1 i2}	IV	<=0.9

Coccidioides Titer	 Received: 14-Mar-22 14:43	Report/Verified: 14-Mar-22 14:46
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Procedure	Result	Units	Reference Interval
Coccidioides Titer, Complement Fixation	1:8 ^{* i3}		<1:2

Coccidioides Ab by Immunodiffusion	 Received: 14-Mar-22 14:43	Report/Verified: 14-Mar-22 14:46
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Procedure	Result	Units	Reference Interval
Coccidioides by Immunodiffusion, Serum	Detected ^{* t1}		Not Detected

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

i1: 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.

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.

i2: Coccidioides Antibody, IgM by ELISA

INTERPRETIVE INFORMATION: Coccidioides Antibody, IgM:

*=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: 22-073-900180

Report Request ID: 15081178

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Test Information

- i2: Coccidioides Antibody, IgM by ELISA
- | | |
|--------------------|---|
| 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.

- i3: Coccidioides Titer, Complement Fixation
 INTERPRETIVE INFORMATION: Coccidioides Titer

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; anticoccidioidal 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.

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