

Patient Information	Specimen Information	Client Information
EVANS, JAWANNA DOB: 08/17/1995 AGE: 24 Gender: F Phone: 601.678.1767 Patient ID: 91964119 Health ID: 8573022513006092	Specimen: AL002750K Requisition: 00000008 Collected: 11/01/2019 / 13:25 CST Received: 11/02/2019 / 00:42 CST Reported: 11/05/2019 / 10:31 CST	Client #: 49100638 QATL0000 TUCK, PAMELA P AUM NURSING CARE CENTER 7461 EAST DRIVE #102 MONTGOMERY, AL 36117

Test Name	In Range	Out Of Range	Reference Range	Lab
MMR (IGG) PANEL (MEASLES, MUMPS, RUBELLA)				
MEASLES ANTIBODY (IGG)	>300.00		AU/mL	AT

AU/mL	Interpretation
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<25.00	Negative
25.00-29.99	Equivocal
>29.99	Positive

A positive result indicates that the patient has antibody to measles virus. It does not differentiate between an active or past infection. The clinical diagnosis must be interpreted in conjunction with clinical signs and symptoms of the patient.

MUMPS VIRUS				AT
ANTIBODY (IGG)	60.80		AU/mL	

AU/mL	Interpretation
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<9.00	Negative
9.00-10.99	Equivocal
>10.99	Positive

A positive result indicates that the patient has antibody to mumps virus. It does not differentiate between an active or past infection. The clinical diagnosis must be interpreted in conjunction with clinical signs and symptoms of the patient.

RUBELLA IMMUNE STATUS				AT
RUBELLA ANTIBODY (IGG)	6.52		index	

Index	Interpretation
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<0.90	Not consistent with Immunity
0.90-0.99	Equivocal
> or = 1.00	Consistent with Immunity

The presence of rubella IgG antibody suggests immunization or past or current infection with rubella virus.

VARICELLA ZOSTER VIRUS				AT
ANTIBODY (IGG)	2601.00		index	

Index	Interpretation
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<135.00	Negative - Antibody not detected
135.00 - 164.99	Equivocal
> or = 165.00	Positive - Antibody detected

A positive result indicates that the patient has antibody to VZV but does not differentiate between an active or past infection. The clinical diagnosis must be interpreted in conjunction with the clinical signs and symptoms of the patient. This assay reliably measures immunity due to previous infection but may not be sensitive enough to detect antibodies induced by

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Test Name	In Range	Out Of Range	Reference Range	Lab
vaccination. Thus, a negative result in a vaccinated individual does not necessarily indicate susceptibility to VZV infection. A more sensitive test for vaccination-induced immunity is Varicella Zoster Virus Antibody Immunity Screen, ACIF.				
QUANTIFERON (®) - TB GOLD PLUS, 1 TUBE	NEGATIVE		NEGATIVE	LLJ
Negative test result. M. tuberculosis complex infection unlikely.				
NIL	0.01		IU/mL	
MITOGEN NIL	>10.00		IU/mL	
TB1-NIL	0.01		IU/mL	
TB2-NIL	0.01		IU/mL	

The Nil tube value reflects the background interferon gamma immune response of the patient's blood sample. This value has been subtracted from the patient's displayed TB and Mitogen results.

Lower than expected results with the Mitogen tube prevent false-negative Quantiferon readings by detecting a patient with a potential immune suppressive condition and/or suboptimal pre-analytical specimen handling.

The TB1 Antigen tube is coated with the M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper T-lymphocytes.

The TB2 Antigen tube is coated with the M. tuberculosis-specific antigens designed to elicit responses from TB antigen primed CD4+ helper and CD8+ cytotoxic T-lymphocytes.

For additional information, please refer to <https://education.questdiagnostics.com/faq/FAQ204> (This link is being provided for informational/educational purposes only.)

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Infectious Diseases

Test Name	Result	Reference Range	Unit
HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR			AT
HEPATITIS C ANTIBODY	NON-REACTIVE	NON-REACTIVE	
SIGNAL TO CUT-OFF	0.03	≤1.00	
HCV antibody was non-reactive. There is no laboratory evidence of HCV infection.			
In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested.			
For additional information please refer to http://education.questdiagnostics.com/faq/FAQ22v1 (This link is being provided for informational/educational purposes only.)			
Physician Comments:			

PERFORMING SITE:

AT QUEST DIAGNOSTICS-ATLANTA, 1777 MONTREAL CIRCLE, TUCKER, GA 30084-6802 Laboratory Director: ANDREW N YOUNG, MD, PHD, CLIA: 11D0255931

LLS QUEST DIAGNOSTICS (GREENSBORO), 4390 EISENHART DRIVE SUITE 100, GREENSBORO, NC 27410 Laboratory Director: JANICE J HERSHENG, MD, PhD, CLIA: 24D0020133



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Test Name	In Range	Out Of Range	Reference Range	Lab
TEST AUTHORIZATION				AT
TEST NAME:	HEPATITIS C AB W/REFL TO			
TEST CODE:	8472SB			
CLIENT CONTACT:	hcl test			

The laboratory testing on this patient was verbally requested or confirmed by the ordering physician or his or her authorized representative after contact with an employee of Quest Diagnostics. Federal regulations require that we maintain on file written authorization for all laboratory testing. Accordingly we are asking that the ordering physician or his or her authorized representative sign a copy of this report and promptly return it to the client service representative.

Signature: _____

Please fax this signed page to 855-253-5312 or return it via your Quest Diagnostics courier.

PERFORMING SITE.

AT QUEST DIAGNOSTICS-ATLANTA 1777 MONTREAL CIRCLE TUCKER GA 30084-6802 MEDICAL DIRECTOR: ANDREW H YOUNG, MD, PhD CLIA NO. 11D0255201