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REFERRING PHYSICIAN

\*\*\*\*\*  
 RESEARCH  
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PATIENT NAME

SAMPLE, REPORT

AGE SEX

37Y F

ACCESSION NO.

D.O.B.

COLLECTION DATE

LOG-IN DATE

TEST DATE

REPORT DATE

AAAA5

08/11/1984

11/5/2021

12/21/2021

12/21/2021

12/21/2021

TEST

RESULTS  
 NORMAL ABNORMAL

REFERENCE  
 RANGE

UNITS

AUTOIMMUNE PNL COMPREHENS

ANTI-NUCLEAR ANTIBODY <1:40 <1:40 TITER

RESULTS REPORTED AS <1:40 ARE CONSIDERED NEGATIVE;  
 EQUAL TO OR GREATER THAN 1:40 ARE CONSIDERED POSITIVE.  
 \*\*\*TEST PERFORMED BY LABORATORY MEDICINE\*\*\*

EXTRACTABLE NUCLEAR Ag 0.50 <20.00 UNITS

RESULTS REPORTED AS 20-39 ARE CONSIDERED WEAK POSITIVE.  
 RESULTS REPORTED AS 40-80 ARE CONSIDERED MEDIUM POSITIVE.  
 RESULTS REPORTED AS > 80 ARE CONSIDERED STRONG POSITIVE.

ANTI DOUBLE STRANDED DNA 0.50 <30.00 IU/mL

RESULTS REPORTED AS 30-75 IU/mL ARE CONSIDERED EQUIVOCAL.

RHEUMATOID FACTOR IgM 0.50 <6.0 UNITS

RESULTS REPORTED AS >6.0 ARE CONSIDERED POSITIVE.

C1Q TOTAL IMMUNE COMPLEX 0.50 <4.4 Ug Eq/mL

RESULTS REPORTED AS 4.4-<10.8 UG Eq/mL ARE CONSIDERED EQUIVOCAL.

ACTIN/SMOOTH MUSCLE IgG 0.50 <20 UNITS

RESULTS REPORTED AS 20.0-30.0 UNITS ARE CONSIDERED EQUIVOCAL

ANTI-MITOCHONDRIAL 0.50 <0.9 INDEX

RESULTS REPORTED AS 0.91 - 1.09 ARE CONSIDERED EQUIVOCAL.  
 RESULTS REPORTED AS >1.11 ARE CONSIDERED POSITIVE.

High titers of ANA may be seen in patients with rheumatoid

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PATIENT NAME

SAMPLE, REPORT

AGE SEX

37Y F

ACCESSION NO.	D.O.B.	COLLECTION DATE	LOG-IN DATE	TEST DATE	REPORT DATE
AAAA5	08/11/1984	11/5/2021	12/21/2021	12/21/2021	12/21/2021

TEST	RESULTS NORMAL ABNORMAL	REFERENCE RANGE	UNITS
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arthritis, scleroderma, discoid lupus, necrotizing vasculitis, Sjogren's syndrome and mixed connective tissue disease.

=  
 Autoantibodies against ENAs occur in a large number of patients with system rheumatic diseases.

=  
 Antibodies to dsDNA occur in approximately 60-70% of SLE patients and there is considerable evidence to implicate immune complexes containing anti-dsDNA and DNA in the pathogenesis of SLE. Low levels of anti-dsDNA antibodies may occur in other rheumatic diseases.

=  
 RF is present in about 4% of the general population, in 75% of adult patients with the highest incidence in patients

over 65 years of age, and in nearly all people with Sjogren's. Increased titers may accompany acute immune responses particularly viral infections.

=  
 High levels of C1q binding immune complexes are detected in patients with active humoral immune response to infectious agents and other environmental factors. Very significant elevations of immune complexes were reported in cancer patients and their level correlated with the stage of the disease.

=  
 Anti-actin antibodies are found in 52-85% of patients with AIH or chronic active hepatitis (CAH) and in 22% of patients with primary biliary cirrhosis (PBC).

=  
 Anti-Mitochondrial antibodies (AMA) are detected in patients with primary biliary cirrhosis (PBC). Since the presence of AMA can precede the development of symptomatic disease, the ability to identify the presence of markers for PBC can contribute to earlier diagnosis and treatment, and may slow the progression of the disease.

\* \* \* \* \* LIMITATIONS \* \* \* \* \*

\*The presence of these antibodies alone is not indicative of any condition or disease. Test results should be used in conjunction with pertinent clinical data.

\*Specimens received as hemolytic, lipemic, bacterially contaminated, or heat inactivated, are rejected for analysis.

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