 **Report Status: Final**

 **CHAVES, MARCELO**

|  |  |  |
| --- | --- | --- |
| **Patient Information** | **Specimen Information** | **Client Information** |
| **CHAVES, MARCELO****DOB: 01/03/1970 AGE: 45**Gender: M Phone: NG Patient ID: P6490271 Health ID: 8573014054907036  | Specimen:Requisition: Lab Ref #: Collected:Received: Reported: | TM663086M0006502386366907/29/2015 / 14:02 EDT07/30/2015 / 05:45 EDT08/05/2015 / 02:14 EDT | Client #: 66007420 09SS999CUNNINGHAM, RUTHANNANALYTE PHYSICIAN GROUPAttn: NORTH FLORIDA328 S JEFFERSON ST STE 770CHICAGO, IL 60661-5646 |

| **Test (Req #3863669)** | **Value** | **Range** | **Result** | **Test Date** | **Results Date** |
| --- | --- | --- | --- | --- | --- |
| **HIV 1 RNA** | Not Detected | Not Detected | Negative | 07/29/2015 | 08/05/2015 |
| **Chlamydia** | NOT DETECTED | NOT DETECTED | Negative | 07/29/2015 | 08/05/2015 |
| **Hepatitis B** | NON-REACTIVE | NON-REACTIVE | Negative | 07/29/2015 | 08/05/2015 |
| **Hepatitis C** | NON-REACTIVE | NON-REACTIVE | Negative | 07/29/2015 | 08/05/2015 |
| **Hepatitis C Quantitative**  | 0.03 | <1.00 | Negative | 07/29/2015 | 08/05/2015 |
| **Gonorrhea** | NOT DETECTED | NOT DETECTED | Negative | 07/29/2015 | 08/05/2015 |
| **Herpes Simplex Virus Type I**  | <0.80 | <0.90 | Negative | 07/29/2015 | 08/05/2015 |
| **Herpes Simplex Virus Type II** | <0.70 | <0.90 | Negative | 07/29/2015 | 08/05/2015 |
| **HIV-1/2 4TH GEN** | NON-REACTIVE | NON-REACTIVE | Negative | 07/29/2015 | 08/05/2015 |
| **Syphilis** | NON-REACTIVE | NON-REACTIVE | Negative | 07/29/2015 | 08/05/2015 |

**Test Name In Range Out Of Range Reference Range Lab**

HEPATITIS B SURFACE TP

 ANTIGEN W/REFL CONFIRM

 HEPATITIS B SURFACE

 ANTIGEN NON-REACTIVE NON-REACTIVE

 HEPATITIS C ANTIBODY NON-REACTIVE NON-REACTIVE TP

 SIGNAL TO CUT-OFF 0.03 <1.00

HSV 1/2 IGG,TYPE SPECIFIC TP

 AB HERPESELECT

 HSV 1 IGG TYPE SPECIFIC

 AB <0.80 H

 HSV 2 IGG TYPE SPECIFIC

 AB <0.70 H

 Value Interpretation

 ----- --------------

 <0.90 Negative

 0.90-1.10 Equivocal

 >1.10 Positive

 This assay utilizes recombinant type-specific antigens

 to differentiate HSV-1 from HSV-2 infections. A

 positive result cannot distinguish between recent and

 past infection. If recent HSV infection is suspected

 but the results are negative or equivocal, the assay

 should be repeated in 4-6 weeks. The performance

 characteristics of the assay have not been established

 for pediatric populations, immunocompromised patients,

 or neonatal screening.

CHLAMYDIA/N. GONORRHOEAE TP

 RNA, TMA

 CHLAMYDIA TRACHOMATIS

 RNA, TMA NOT DETECTED NOT DETECTED

 NEISSERIA GONORRHOEAE

 RNA, TMA NOT DETECTED NOT DETECTED

***See Endnote 1***

 RPR (DX) W/REFL TITER AND TP

 CONFIRMATORY TESTING NON-REACTIVE NON-REACTIVE

**Endnote 1** This test was performed using the APTIMA COMBO2 Assay

(Gen-Probe Inc.).

The analytical performance characteristics of this

assay, when used to test SurePath specimens have

been determined by Quest Diagnostics.

CLIENT SERVICES: 866.697.8378 SPECIMEN: TM663086M PAGE 1 OF 2

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 **Report Status: Final**

 **CHAVES, MARCELO**

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| **Patient Information** | **Specimen Information** | **Client Information** |
| **CHAVES, MARCELO****DOB: 01/03/1970 AGE: 45**Gender: M Patient ID: P6490271 Health ID: 8573014054907036  | Specimen: TM663086MCollected: 07/29/2015 / 14:02 EDT Received: 07/30/2015 / 05:45 EDTReported: 08/05/2015 / 02:14 EDT | Client #: 66007420CUNNINGHAM, RUTHANN |
|  **Infectious Diseases**   |   |  |
|  **Test Name Result** | **Reference Range** | **Lab**  |
| HIV 1 RNA, QL TMA | Not Detected | Not Detected | AMD |
|  This test was performed using the APTIMA(R) HIV-RNA Qualitative Assay (Gen-Probe).  |  |
|  HIV 1/2 ANTIGEN/ANTIBODY,FOURTH GENERATION W/RFL  |   |
|  HIV 1/2 ANTIGEN/ANTIBODY, FOURTH GENERATION W/RFL  | TP |
| HIV AG/AB, 4TH GEN | NON-REACTIVE | NON-REACTIVE |  |
| A Nonreactive HIV Ag/Ab result does not exclude HIV infection since the time frame for seroconversion is variable. If acute HIV infection is suspected, a HIV-1 RNA Qualitative TMA test is recommended. PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The performance of this assay has not been clinically validated in patients less than 2 years old. For additional information please refer to http://education.questdiagnostics.com/faq/FAQ106 (This link is being provided for informational/ educational purposes only.)  |  |
| Physician Comments: |  |

**PERFORMING SITE:**

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TP QUEST DIAGNOSTICS-TAMPA, 4225 E. FOWLER AVE, TAMPA, FL 33617-2026 Laboratory Director: GLEN L HORTIN,MD,PHD, CLIA: 10D0291120

# CLIENT SERVICES: 866.697.8378 SPECIMEN: TM663086M

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