



36170123681

Ms. ATWIMA MANSAA A SHIRLEY

Tel No : 0244123

PID NO: P36170023449

Age: 30 Year(s) Sex: Female

Reference: Dr.GILEAD MEDICAL

Sample Collected At:
GhanaTEST REPORT
VID: 36170123681

Registered On:

30/01/2018 09:57 AM

Collected On:

30/01/2018 9:57AM

Reported On:

05/02/2018 01:42 PM

Investigation	Observed Value	Biological Reference Interval
Anti Nuclear Antibody by IFA (Serum, Immunofluorescence)	Negative	Negative
Result	-	-
Pattern	-	-
Grade	-	-
Estimated Titre	-	-

Interpretation Guidelines (Sample screening Dilution - 1:100):

Negative : No Immunofluorescence
 + : Weak Positive (1:100)
 ++ : Moderate Positive (1:320)
 +++ : Strong Positive (1:1000)
 ++++ : Very strong Positive (1:3200)

Test Description:

Antinuclear antibodies (ANAs) are unusual antibodies, detectable in the blood, that have the capability of binding to certain structures within the nucleus of the cells. ANAs indicate the possible presence of autoimmunity & provide, therefore, an indication of autoimmune illness. Fluorescence tech. are frequently used to actually detect the antibodies in the cells, thus ANA testing is sometimes referred to as fluorescent antinuclear antibody test (FANA). The ANA test is a sensitive screening test used to detect autoimmune diseases.

Technique:

Indirect Immunofluorescence - Automated IF Processor (AP 16 IF Plus)

The BIOCHIP Slide is a combination of Hep-20-10 cells and primate liver and has the following advantages.

- It is a global standard tech. with a natural antigen spectrum capable of detecting more than 30 diagnostically relevant auto antibodies.
- Hep 20-10 cell lines contain 40% mitotic cells, facilitating easier identification of rare patterns.
- If the test is negative, detectable level of auto antibodies is ruled out. In case of a positive result, autoantibodies against any one or in some cases simultaneously against more than one antigens may be present and further monospecific tests or panel of profiles can be used to determine the specific autoantibodies present.
- NOTE- All weak positive (+) results may be repeated after 6 - 8 weeks.

Associated Tests: Monospecific ELISA to define single antigens, ANA Immunoblot assay.

Abbreviations: SLE: Systemic Lupus Erythematosus, SCL: Scleroderma, MCTD: Mixed Connective Tissue Disease; CFS: Chronic Fatigue Syndrome; AIH: Autoimmune Hepatitis, PBC: Primary Biliary Cirrhosis, PM: Polymyositis, DM: Dermatomyositis, SS: Systemic sclerosis, RA: Rheumatoid Arthritis.

Please view next page for co-relation table including various single antigens with their Immunofluorescence patterns and clinical associations.



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Location	Pattern	Target Antigen	Clinical Association
Nucleus	Homogeneous	Double strand DNA Histones Nucleosome, RNA, Single Strand DNA	SLE Drug Induced Lupus, SLE , RA SLE, MCTD, RA, PM, DM, SS
	Speckled	Sm U1-snRNP SSA/Ro SSB/La Ku Cyclin1(PCNA) Mitosis/Cyclin II	SLE MCTD, SLE, RA, sharp syndrome Sjogren's syndromes (SS)/SLE/Neonatal Lupus PM/DM/SLE/SS SLE/Overlap Syndromes DM
	Dense Fine Speckled(DFS)	Lens epithelium-derived growth factor (LEDGF), DNA binding transcription coactivator p75.(DFS-70)	Healthy individuals, Various Inflammatory conditions like atopic dermatitis, interstitial cystitis, Asthma.
	Centomeres	Proteins of Kinetochores	CREST syndrome, PSS limited form
	Nuclear Dots	Sp-100 , NDP53	PBC, Rheumatic Disease
	Nuclear Membrane	Lamins, gp210, p62	CFS, Collagenoses, PBC, AIH
Nucleolus	Nucleolar homogeneous	PM-Scl Scl-70	PM, DM, PSS(Diffuse) PSS(Diffuse)
	Nucleolar speckled	RNA-Polymerase I / NOR-90	Progressive Systemic Sclerosis(Diffuse)
	Nucleolar Pattern	Fibrillarin	Progressive Systemic Sclerosis(Diffuse)
Cytoplasm	Cytoplasmic speckled	Mitochondrial Lysosomal Golgi Complex Ribosome P Jo -1 SRP, PL12, TIF1-Gamma	PBC, Unknown SS/SLE/RA SLE Polymyositis (PM), PM/ DM, Myositis
	Cytoplasmic filament	F-Actin Vimentin Tropomyosin Cytoplasmic Rings & rods	AIH Unknown Unknown HCV Infection- on therapy
Cell Cycle (mitotic cells)	Centriole Mid-Body Spindle Fibres	-- -- --	Unknown Unknown Rheumatic Disease

-- End of Report --

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Refer to conditions of reporting overleaf

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Results valid only to the sample as received

METROPOLIS
The Pathology Specialist

INNER HEALTH REVEALED

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