



Ms. VIDA ADDAE

PID NO: P36180024160

Age: 52 Year(s) Sex: Female

Reference:

Sample Collected At:
GILEAD MEDICAL & DENTAL CENTER
HOUSE NO BALB NO C896/3,KANDA
HIGHWAY NORTH RIDGE,ACCRA-
14911.
014911

VID: 36180125020

Registered On:
04/01/2019 05:15 PM
Collected On:
04/01/2019
Reported On:
10/01/2019 04:22 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Biological Reference Interval</u>
Anti Nuclear Antibody by IFA (Serum,Immunofluorescence)		
Result	Negative	Negative
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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Investigation Observed Value Unit Biological Reference Interval

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) Mitotin/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



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Investigation

**CCP Antibody Cyclic Citrullinated
Peptide**

(Serum,CMIA)

Observed Value

Negative(<0.50)

Unit

U/mL

Biological Reference Interval

Negative: < 5.0

Positive: >= 5.0

Please note change in
reference range and method.

Interpretation :

This test is used for the semi-quantitative determination of the IgG class of auto antibodies specific to CCP in biological specimens. Detection of anti-CCP antibodies is used as an aid in the diagnosis of Rheumatoid Arthritis and should be used in conjunction with other clinical information. Autoantibody levels represent one parameter in a multi criterion diagnostic process, encompassing both clinical and laboratory based assessments.

Dr. Deepak Sanghavi

MD (Path)

West SBU Technical head & HOD- Chemistry



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Investigation

RA-Rheumatoid Arthritis-IgM, Serum

(Serum,Nephelometry)

Observed Value

8.90

Unit

IU/mL

Biological Reference Interval

Non-reactive: < 15

Interpretation :

1. The detection of rheumatoid factor (RF) is one of the criteria of the American Rheumatism Association (ARA) for the diagnosis of Rheumatoid Arthritis (RA).
2. RFs play an important role in the differential diagnosis between RA and other rheumatic diseases. They also permit prognostic statements with regards to RA.

-- End of Report --

Mr. David Adjei Adu
Bsc.Biomedical Scientists