# Laboratory Report - Harvard University Health Services

| | | | |
|---|---|---|---|
| **Name:** | GREEN, TESSA D | **Ordered by:** | MCGINTY, SHANNON - 1710271523 |
| **Id:** | 70834480 | **Order #:** | L1649055-06 (WC558463Y) |
| **Age:** | 30 yrs at result time | **Collected:** | 4/14/2023 1:03 PM |
| **DOB:** | 3/26/1993 | **Received:** | 4/14/2023 1:06 PM |
| **Sex:** | F | **Timezone:** | EST |
| | | **Spec. Type:** | S |

## 36336 - CELIAC DISEASE COMP PANEL W/GLIADIN AB (IGG)

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** QUEST DIAGNOSTICS MASSACHUSETTS LLC

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| INTERPRETATION | SEE BELOW | | |

```
No serological evidence for celiac disease is present.
tTg may normalize in individuals with celiac disease who
maintain a gluten free diet.  If high suspicion of
celiac disease, consider HLA DQ2 and DQ8 testing to
rule out celiac disease.
```

| | | | |
|---|---|---|---|
| TISSUE TRANSGLUTAMINASE AB, IGA | <1.0 | | U/mL |

| Value | Interpretation |
|---|---|
| <15.0 | Antibody not detected |
| > or = 15.0 | Antibody detected |

| | | | |
|---|---|---|---|
| IMMUNOGLOBULIN A | 109 | | 47-310 mg/dL |

## 30517 - METHYLMALONIC ACID AND HOMOCYSTEINE

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** TEST PERFORMED AT: QUEST DIAGNOSTICS NICHOLS INSTITUTE - CHANTILLY

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| **METHYLMALONIC ACID** | **72*** | **L** | 87-318 nmol/L |

```
This test was developed and its analytical performance
characteristics have been determined by Quest
Diagnostics Nichols Institute Chantilly, VA. It has
not been cleared or approved by the U.S. Food and Drug
Administration. This assay has been validated pursuant
to the CLIA regulations and is used for clinical
purposes.
```

| | | | |
|---|---|---|---|
| HOMOCYSTEINE | 6.0 | | <10.4 umol/L |

```
Homocysteine is increased by functional deficiency of
folate or vitamin B12. Testing for methylmalonic acid
differentiates between these deficiencies. Other causes
of increased homocysteine include renal failure, folate
antagonists such as methotrexate and phenytoin, and
exposure to nitrous oxide.
Selhub J, et al. Ann Intern Med. 1999;131(5):331-9.
```

## 568 - INTRINSIC FACTOR BLOCKING ANTIBODY

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** TEST PERFORMED AT: QUEST DIAGNOSTICS NICHOLS INSTITUTE - CHANTILLY

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| INTRINSIC FACTOR BLOCKING ANTIBODY | Negative | | Negative |

```
For additional information, please refer to
http://education.questdiagnostics.com/faq/IFAB
(This link is being provided for informational/
educational purposes only.)
```

## 15114 - PARIETAL CELL AB, ELISA

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** TEST PERFORMED AT: QUEST DIAGNOSTICS NICHOLS INSTITUTE - CHANTILLY

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| **PARIETAL CELL AB, ELISA** | **31.5*** | **H** | <=20.0 Unit |

```
Reference Range:

<= 20.0       Negative
20.1 - 24.9   Equivocal
>= 25.0       Positive

Anti-gastric parietal cell antibodies (Anti-GPA) were
previously tested for by indirect immunofluorescence
(IF) using mouse stomach as a substrate.
Identification of the specific antibody target as H+/K+
ATPase protein (a gastric proton pump) has led to the
development of an ELISA based assay.  Antibodies to
this protein are present in approximately 80% of
patients with pernicious anemia and a small percentage
of general adult population.  The latter percentage
increases with age and may reflect the presence of
atrophic gastritis.  A negative test does not exclude
a diagnosis of pernicious anemia.  A test for intrinsic
factor blocking antibody (IFab) may provide serological
evidence in support of the diagnosis in some of these
patients.
```

## 206 - ACETYLCHOLINE RECEPTOR BINDING ANTIBODY

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** QUEST DIAGNOSTICS INCORPORATED, NICHOLS INSTITUTE

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| ACETYLCHOLINE RECEPTOR BINDING ANTIBODY | <0.30 | | nmol/L |

```
Reference Ranges for Acetylcholine Receptor
  Binding Antibody:

Negative: < or =0.30 nmol/L
Equivocal:  0.31-0.49 nmol/L
Positive: > or =0.50 nmol/L
```

## 93881 - ACETYLCHOLINE RECEPTOR GANGLIONIC (ALPHA 3) AB

**Reported:** 4/27/2023 9:00 PM
**Status:** Final
**Lab Name:** QUEST DIAGNOSTICS INCORPORATED, NICHOLS INSTITUTE

| Test Name | Result | Flags | Reference Range |
|---|---|---|---|
| ACETYLCHOLINE RECEPTOR GANGLIONIC (ALPHA 3) AB | <55 | | <55 pmol/L |

```
Reference Ranges for
Acetylcholine Receptor
Ganglionic Antibody:

Negative:   <55 pmol/L
Borderline: 55-160 pmol/L
Positive:   >160 pmol/L

This test was developed and its analytical performance
characteristics have been determined by Quest Diagnostics
Nichols Institute San Juan Capistrano. It has not been
cleared or approved by FDA. This assay has been validated
pursuant to the CLIA regulations and is used for clinical
purposes.
```

## Performing Laboratory Information

**Name:** QUEST DIAGNOSTICS MASSACHUSETTS LLC
200 FOREST STREET, 3RD FLOOR, SUITE A, MARLBOROUGH MA 01752-3023, SALIM E KABAWAT,MD

**Name:** TEST PERFORMED AT: QUEST DIAGNOSTICS NICHOLS INSTITUTE - CHANTILLY
14225 NEWBROOK DRIVE, PO BOX 10841, CHANTILLY, VA 20153 KENNETH L. SISCO, MD

**Name:** QUEST DIAGNOSTICS INCORPORATED, NICHOLS INSTITUTE
33608 ORTEGA HWY., SAN JUAN CAPISTRANO, CA 92675