500 Chipeta Way, Salt Lake City, Utah 84108-1221 phone: 801-583-2787, toll free: 800-522-2787

Jonathan R. Genzen, MD, PhD, Chief Medical Officer

Patient Age/Sex: 37 years Female

Parvovirus B19 Abs, IgG and IgM	Received: 10-Jun	1-24 16:24	Report/Verified: 10-Jun-24 16:25
Procedure	Result	Units	Reference Interval
Parvovirus B19 Antibody IgG	3.24 H il	IV	[<=0.90]
Parvovirus B19 Antibody IgM	3.55 H i2	IV	[<=0.89]

## Test Information

i2:

il: Parvovirus B19 Antibody IgG

INTERPRETIVE INFORMATION: Parvovirus B19 Antibody, IgG

0.90	IV or less	Negative - No significant
		level of detectable Parvovirus
		B19 IgG antibody.
0.91	- 1.09 IV	Equivocal - Repeat testing in
		7-21 days may be helpful.
1.10	IV or greater	Positive - IgG antibody to
		Parvovirus B19 detected which
		may indicate a current or
		past infection.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time. Parvovirus B19 Antibody IqM

INTERPRETIVE INFORMATION: Parvovirus B19 Antibody, IgM

0.89 IV or less Nega	tive - No significant
leve	l of detectable Parvovirus
В19	IgM antibody.
0.90 - 1.10 IV Equi	vocal - Repeat testing in
7-21	days may be helpful.
1.11 IV or greater Pos	itive - IgM antibody to
Parv	ovirus B19 detected which
may	indicate a current or
rece	nt infection. However, low
leve	ls of IgM antibodies may
occa	sionally persist for more
than	12 months post-infection.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Appearance of an IgM antibody response normally occurs 7 to 14 days after the onset of disease. Testing immediately post-exposure is of no value without a later convalescent specimen. A residual IgM response may be distinguished from early IgM response to infection by testing sera from patients three to four weeks later for changing levels of specific IgM antibodies.

\*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H-High, i-Test Information, L-Low, t-Interpretive Text, @=Performing lab

Unless otherwise indicated, testing performed at:
ARUP Laboratories
500 Chipeta Way, Salt Lake City, UT 84108
Laboratory Director: Jonathan R. Genzen, MD, PhD

 ARUP Accession:
 24-162-900114

 Report Request ID:
 19477217

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