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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 REPORT

Patient Age/Sex:

Unknown

Specimen Collected: 18-Dec-23 09:37 Autoimmune Enceph/Dementia Panel, Received: 18-Dec-23 09:40 Report/Verified: 18-Dec-23 09:54 CSF Result Reference Interval Procedure Units NMDA Receptor Ab IgG CBA-IFA,CSF 1:40 * f1 i1 [< 1:1] Paraneoplastic Abs (PCCA/ANNA) ANNA Detected * f2 i2 [None Detected] IgG,CSF Detected * t1 i3 AMPA Receptor Ab IgG CBA-IFA [< 1:1] Screen, CSF Detected * t2 i4 GABA-BR Ab IgG CBA-IFA Screen, [< 1:1] CSF CASPR2 Ab IgG CBA-IFA Screen, CSF Detected * t3 i5 [< 1:1] Detected * t4 i6 LGI1 Ab IgG CBA-IFA Screen, CSF [< 1:1] CV2 Ab IqG CBA-IFA Screen,CSF Detected * t5 i7 [< 1:1] SOX1 Antibody, IgG by Immunoblot, Positive * 18 [Negative] CSF High Positive * 19 Amphiphysin Antibody, CSF [Negative] DPPX Ab IgG CBA-IFA Screen,CSF Detected * t6 i10 [< 1:1] IgLON5 Ab IgG CBA-IFA Screen, CSF Detected * t7 ill [< 1:1] mGluR1 Ab IgG CBA-IFA Screen, CSF Detected * t8 i12 [< 1:1]Glutamic Acid Decarboxylase 10.0 H i13 IU/mL [0.0-5.0]Antibody CSF Neuronal Nuclear Abs IgG, IB, CSF Received: 18-Dec-23 09:40 Report/Verified: 18-Dec-23 09:54 Reference Interval Procedure Result Units Neuronal Nuclear Ab (Hu) IgG, IB, Positive * 114 [Negative] CSF Neuronal Nuclear Ab (Ri) IgG, IB, Positive * 115 [Negative] CSF Neuronal Nuclear Ab (Yo) IgG, IB, Positive * 116 [Negative] CSF Positive * ⁱ¹⁷ Neuronal Nuclear Ab (TR/DNER) [Negative] IqG,CSF Report/Verified: 18-Dec-23 09:54 Neuronal Nuclear Antibody Titer, |Received: 18-Dec-23 09:40 IgG CSF Reference Interval Procedure Result Units

Neuronal Nuclear Ab Titer, IqG 1:40 * i18 [< 1:1]CSF AMPA Rptr Ab IgG Titer by Received: 18-Dec-23 09:40 Report/Verified: 18-Dec-23 09:54 CBA-IFA, CSF Procedure Result Units Reference Interval 1:40 * ⁱ¹⁹ AMPA Receptor Ab IgG CBA-IFA [< 1:1] Titer,CSF

*=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:
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PATIENT REPORT

phone: 801-583-2787, toll free: 800-522-2787 Jonathan R. Genzen, MD, PhD, Chief Medical Officer				Patient Age/Sex:		Unknown	
CASPR	2 Ab IgG Titer by CBA-IFA,	Received: 1	18-Dec-23	09:40	Report/Veri	fied: 18-Dec-23 09:54	
CSF Proce CASPI	dure R2 Ab IgG CBA-IFA Titer,CS	Result F 1:40 * i20		Units		Reference Interval [< 1:1]	
CV2 A Proce CV2 A	b IgG Titer by CBA-IFA, CSF dure Ab IgG CBA-IFA Titer,CSF	Received: 1 Result 1:20 * ⁱ²¹	L8-Dec-23	09:40 Units	Report/Veri	<pre>fied: 18-Dec-23 09:55 Reference Interval [< 1:1]</pre>	
DPPX Proce DPPX	Ab IgG Titer by CBA-IFA, CSF dure Ab IgG CBA-IFA Titer,CSF	Received: 1 Result 1:10 * i22	L8-Dec-23	09:40 Units	Report/Veri	<pre>fied: 18-Dec-23 09:55 Reference Interval [< 1:1]</pre>	
GABA-	B Rptr Ab IgG Titer by FA. CSF	Received: 1	18-Dec-23	09:40	Report/Veri	fied: 18-Dec-23 09:55	
Proce GABA-	dure -BR Ab IgG CBA-IFA Titer,C	Result SF 1:40 * ⁱ²³		Units		Reference Interval [< 1:1]	
IgLON Proce IgLON	5 Ab IgG CBA-IFA Titer, CSF dure N5 Ab IgG CBA-IFA Titer,CS	Received: 1 Result F 1:20 * ⁱ²⁴	L8-Dec-23	09:40 Units	Report/Veri	<pre>fied: 18-Dec-23 09:55 Reference Interval [< 1:1]</pre>	
LGI1 Proce LGI1	Ab IgG Titer by CBA-IFA, CSF dure Ab IgG CBA-IFA Titer,CSF	Received: 1 Result 1:20 * ⁱ²⁵	L8-Dec-23	09:40 Units	Report/Veri	<pre>fied: 18-Dec-23 09:55 Reference Interval [< 1:1]</pre>	
Proce mGluI <u>Inter</u> t1:	dure R1 Ab IgG CBA-IFA Titer,CS r pretive Text 18-Dec-23 09:37 (AMPA Receptor	Result F 1:20 * ⁱ²⁶ Ab IgG CBA-I	FA Screen,	Units CSF)		Reference Interval [< 1:1]	
t2:	AMPAR Antibody, IgG is detected. Titer results to follow. 18-Dec-23 09:37 (GABA-BR Ab IgG CBA-IFA Screen, CSF) CARA-PR Antibody. IgC is detected. Titer results to follow.						
t3:	18-Dec-23 09:37 (CASPR2 Ab IgG CBA-IFA Screen, CSF) CASPR2 Antibody IgC is detected. Titer regults to follow						
t4:	18-Dec-23 09:37 (LGI1 Ab IgG C	ASPRZ ANCIDOUY, 196 IS delected. Hiter results to IOHOW. 8-Dec-23 09:37 (LGH Ab IgG CBA-IFA Screen, CSF)					
t5:	18-Dec-23 09:37 (CV2 Ab IgG CBA-IFA Screen, CSF) CV2 Antibody, IgG is detected. Titer results to follow. Additional charges apply						
t6:	18-Dec-23 09:37 (DPPX Ab IgG CBA-IFA Screen, CSF) DPPX Antibody. IgG is detected. Titer results to follow						
t7: t8:	18-Dec-23 09:37 (IgLON5 Ab IgG CBA-IFA Screen, CSF) IgLON5 Antibody, IgG is detected. Titer results to follow. 18-Dec-23 09:37 (mGluR1 Ab IgG CBA-IFA Screen, CSF) mGluR1 Antibody, IgG is detected. Titer results to follow.						
<u>Resu</u> f1:	Lt Footnote NMDA Receptor Ab IgG CBA-IFA,	CSF					
	Antibodies to NMDA were detected; titer was performed at an additional charge.						
	The EXTINGUISH Trial (safety a	nd efficacy o	f Tnebiliz	umab in anti	-NMDA receptor	encephalitis	

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Laboratory Director: Jonathan R. Genzen, MD, PhD

ARUP Accession: 23-352-900115 Report Request ID: 18510356 Printed: 20-Dec-23 12:52 Page 2 of 10

Unknown

Result Footnote

f1: NMDA Receptor Ab IgG CBA-IFA, CSF NCT04372615) is actively recruiting patients. To learn more, or to refer your patient, call 1-844-427-2465, email ExTINGUISH@hsc.utah.edu, or visit https://neuronext.org/projects/nnlll-extinguish. f2: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

Antibodies detected, therefore IFA titer and Immunoblot testing to be performed.

Test Information

il: NMDA Receptor Ab IgG CBA-IFA, CSF INTERPRETIVE INFORMATION: NMDA Receptor Ab IgG CBA-IFA, CSF

NMDA receptor antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. In addition, positive results have been reported in patients with non-autoimmune phenotypes. A negative test result does not rule out a diagnosis of autoimmune limbic encephalitis. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes full-length GluN1 transfected cell lines for the detection and semiquantification of NMDA receptor IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i2: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF INTERPRETIVE INFORMATION: Paraneoplastic Abs (PCCA/ANNA) IgG, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i3: AMPA Receptor Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG CBA-IFA Screen, CSF

Alpha-amino-3-hydroxy-5-methyl-4-isoxazoleproprionic acid receptor (AMPAR) antibody is found in a subset of patients with autoimmune limbic encephalitis and may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune encephalitis. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes AMPAR transfected cell lines for detection and semiquantification of AMPAR IgG antibody.

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 20-Dec-23 12:52

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

Patient Age/Sex:

Unknown

Test Information

AMPA Receptor Ab IgG CBA-IFA Screen, CSF i3: This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i4: GABA-BR Ab IgG CBA-IFA Screen, CSF

INTERPRETIVE INFORMATION: GABA-BR Ab IgG CBA-IFA Screen, CSF

Gamma-amino butyric acid receptor, type B (GABA-BR) antibody is found in a subset of patients with autoimmune epilepsy and other autoimmune neurologic phenotypes; it may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes GABA-BR transfected cell lines for the detection and semiguantification of GABA-BR IqG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i5: CASPR2 Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: CASPR2 Ab IgG CBA-IFA Screen, CSF

Contactin-associated protein-2 (CASPR2) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of CASPR2 IgG antibody is associated with a wide spectrum of clinical manifestations, including acquired neuromyotonia, limbic encephalitis, painful neuropathy, and Morvan syndrome. Tumors such as thymoma, small cell lung cancer, and other rarer tumors may occur. The full-spectrum of clinical disorders and tumors associated with the CASPR2 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes CASPR2 transfected cell lines for the detection and semiquantification of the CASPR2 IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i6: LGI1 Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Screen, CSF

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Laboratory Director: Jonathan R. Genzen, MD, PhD

ARUP Accession: 23-352-900115 Report Request ID: 18510356 Printed: 20-Dec-23 12:52 Page 4 of 10

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

Patient Age/Sex:

Unknown

Test Information

i6: LGI1 Ab IgG CBA-IFA Screen, CSF

Leucine-rich, glioma-inactivated 1 protein (LGI1) IgG antibody may occur as part of the voltage-gated potassium channel (VGKC) complex antibodies.

The presence of LGI1 IgG antibody is mainly associated with limbic encephalitis, hyponatremia, and myoclonic movements. LGI1 IgG antibody is rarely associated with tumors but may occur infrequently in Morvan syndrome, neuromyotonia, and idiopathic epilepsy. The full-spectrum of clinical disorders associated with the LGI1 IgG antibody continues to be defined. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes LGI1 transfected cell lines for the detection and semi-quantification of the LGI1 IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i7: CV2 Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: CV2 Ab IgG CBA-IFA Screen, CSF

CV2 antibodies aid in discriminating between chronic paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-CV2 is associated with small-cell lung cancer and thymoma. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes CV2 transfected cell lines for the detection and semiquantification of the CV2 IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

i8:

INTERPRETIVE INFORMATION: SOX1 Antibody, IgG by Immunoblot,

CSF

SOX1 antibody is detected in patients with Lambert-Eaton myasthenic syndrome (LEMS) and in patients with paraneoplastic cerebellar degeneration (PCD), paraneoplastic and nonparaneoplastic neuropathy. SOX1 antibody is associated with small cell lung cancer. A negative test result does not rule out a diagnosis of LEMS or other causes of paraneoplastic neurological syndrome.

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SOX1 Antibody, IgG by Immunoblot, CSF

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Unknown

Test Information

i8: SOX1 Antibody, IgG by Immunoblot, CSF
 This test was developed and its performance characteristics determined by ARUP
 Laboratories. It has not been cleared or approved by the U.S. Food and Drug
 Administration. This test was performed in a CLIA-certified laboratory and is
 intended for clinical purposes.
 i9: Amphiphysin Antibody, CSF

i9: Amphiphysin Antibody, CSF INTERPRETIVE INFORMATION: Amphiphysin Antibody IgG, CSF

Amphiphysin antibody is present in about 5 percent of patients with stiff-person syndrome and is found variably in other causes of paraneoplastic neurological syndrome (PNS). Amphiphysin antibody is mainly associated with small-cell lung cancer and breast tumors.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i10: DPPX Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: DPPX Ab IgG CBA-IFA Screen, CSF

DPPX antibody is found in a subset of patients with autoimmune encephalitis, and is often associated with prodromal gastrointestinal symptoms and unintentional weight loss. It may occur with or without associated tumor. Decreasing antibody levels may be associated with therapeutic response. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes DPPX transfected cells for the detection and semiquantification of the DPPX IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

i11: IgLON5 Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: IgLON5 Ab IgG CBA-IFA Screen, CSF

IgLON Family Member 5 (IgLON5) antibody is found in a subset of patients with autoimmune encephalitis or other autoimmune neurologic/neurodegenerative disorders and may occur with or without associated tumor. A negative test result does not rule out a diagnosis of an autoimmune neurologic disorder. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes IgLON5 transfected cell lines for detection and semi-quantification of IgLON5 IgG antibody.

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 20-Dec-23 12:52

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Unknown

Test Information

ill: IgLON5 Ab IgG CBA-IFA Screen, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

i12: mGluR1 Ab IgG CBA-IFA Screen, CSF INTERPRETIVE INFORMATION: mGluR1 Ab IgG CBA-IFA Screen, CSF

Metabotropic glutamate receptor 1 (mGluR1) antibody is found in a subset of patients with autoimmune cerebellar ataxia or autoimmune encephalitis and may occur with or without associated tumor. A negative test result does not rule out a diagnosis of autoimmune cerebellar ataxia or limbic encephalitis. Interpretation of any anti-neural antibody test requires clinical correlation.

This indirect fluorescent antibody assay utilizes mGluR1 transfected cell lines for detection and semi-quantification of mGluR1 IgG antibody.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

i13: Glutamic Acid Decarboxylase Antibody CSF INTERPRETIVE INFORMATION: Glutamic Acid Decarboxylase Antibody, CSF A value greater than 5.0 IU/mL is considered positive for glutamic acid

decarboxylase antibody (GAD AB CSF).

This assay is intended for the semi-quantitative determination of the GAD Ab in human CSF. Results should be interpreted within the context of clinical symptoms.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i14: Neuronal Nuclear Ab (Hu) IgG, IB, CSF INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Hu) IgG, IB, CSF

This test detects IgG antineuronal antibodies to Hu, Ri, and Yo and Tr (DNER) antigens.

Antineuronal antibodies serve as markers that aid in discriminating between a true paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-Hu (antineuronal nuclear antibody, type I) is associated with small cell lung cancer. Anti-Ri (antineuronal nuclear antibody, type II) is

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Test Information

i14: Neuronal Nuclear Ab (Hu) IgG, IB, CSF associated with neuroblastoma in children and with fallopian tube and breast cancer in adults. Anti-Yo (anti-Purkinje cell cytoplasmic antibody) is associated with ovarian and breast cancer. Anti-Tr(DNER) is associated with Hodgkin's lymphoma. The presence of one or more of these antineuronal antibodies supports a clinical diagnosis of PND and should lead to a focused search for the underlying neoplasm. This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i15: Neuronal Nuclear Ab (Ri) IgG, IB, CSF INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Ri) IgG, IB, CSF This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i16: Neuronal Nuclear Ab (Yo) IgG, IB, CSF INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (Yo) IgG, IB, CSF This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i17: Neuronal Nuclear Ab (TR/DNER) IgG, CSF INTERPRETIVE INFORMATION: Neuronal Nuclear Ab (TR/DNER) IgG, CSF This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i18: Neuronal Nuclear Ab Titer, IgG CSF INTERPRETIVE INFORMATION: Neuronal Nuclear Ab Titer, IgG CSF This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i19: AMPA Receptor Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: AMPA Receptor Ab IgG CBA-IFA Titer, CSF This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug

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Unknown

Test Information

- i19: AMPA Receptor Ab IgG CBA-IFA Titer, CSF Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i20: CASPR2 Ab IgG CBA-IFA Titer, CSF
 - INTERPRETIVE INFORMATION: CASPR2 Ab IgG CBA-IFA Titer, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i21: CV2 Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: CV2 Ab IgG CBA-IFA Titer, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i22: DPPX Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: DPPX Ab IgG CBA-IFA Titer, CSF

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i23: GABA-BR Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: GABA-BR Ab IgG CBA-IFA Titer, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i24: IgLON5 Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: IgLON5 Ab IgG CBA-IFA Titer, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

LGI1 Ab IgG CBA-IFA Titer, CSF i25: INTERPRETIVE INFORMATION: LGI1 Ab IgG CBA-IFA Titer, CSF

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Laboratory Director: Jonathan R. Genzen, MD, PhD

PATIENT REPORT

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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:

Unknown

Test Information

i26: mGluR1 Ab IgG CBA-IFA Titer, CSF INTERPRETIVE INFORMATION: mGluR1 Ab IgG CBA-IFA Titer, CSF

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

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