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PATIENT REPORT

Patient Age/Sex: 74 years Female

Specimen Collected: 25-Mar-24 08:42

Alzheimer's Disease Markers, CSF | **Received: 25-Mar-24 08:42** **Report/Verified: 25-Mar-24 09:07**

Procedure	Result	Units	Reference Interval
Total-Tau/Abeta42 Ratio,CSF	<0.032 f1 i1		[<=0.280]
Phospho-Tau(181)/Abeta42 Ratio, CSF	<0.003 f2		[<=0.023]

Result Footnote

f1: Total-Tau/Abeta42 Ratio, CSF
A negative result, defined as tTau/Abeta42 ratio value below cutoff, is consistent with a negative amyloid positron emission tomography (PET) scan result. A negative result reduces the likelihood that a patients cognitive impairment is due to AD.

The measured Abeta42 concentration is above the assay measuring limit of 2500 pg/mL. The normal CSF concentration of Abeta42 present in this individual is not consistent with the presence of pathological changes associated with Alzheimer's disease.

f2: Phospho-Tau(181)/Abeta42 Ratio, CSF
A negative result, defined as pTau181/Abeta42 ratio value below cutoff, is consistent with a negative amyloid positron emission tomography (PET) scan result. A negative result reduces the likelihood that a patients cognitive impairment is due to AD.

The measured Abeta42 concentration is above the assay measuring limit of 2500 pg/mL. The normal CSF concentration of Abeta42 present in this individual is not consistent with the presence of pathological changes associated with Alzheimer's disease.

Test Information

i1: Total-Tau/Abeta42 Ratio, CSF
Interpretive information: Alzheimer's Disease Markers, CSF

The Alzheimers Disease Markers, CSF panel is intended for use in adult patients aged 55 years and older being evaluated for Alzheimers disease (AD) and other causes of cognitive impairment. The pTau181/Abeta42 and tTau/Abeta42 ratios provide better concordance with amyloid positron emission tomography (PET) imaging when compared to Abeta42, pTau181, and tTau individually.

Limitations: Failure to adhere to the sample collection instructions provided in the Lab Test Catalog may result in falsely reduced Abeta42 concentrations and therefore false elevations in the reported ratios. The ratios reported have not been established for predicting development of dementia or other neurologic conditions or for monitoring responses to therapies. Results of this test must always be interpreted in the context other clinical diagnostic evaluations and should not be used alone to establish a diagnosis of AD or other cognitive disorder.

Methodology: Roche Diagnostics Inc. electrochemiluminescence assay was used. Results obtained with different assay methods or kits may be different and cannot be used interchangeably.