PROCESSED AT :
Thyrocare

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
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REPORT

NAME : XXXXXXXXXXXXXXXXX
REF. BY : XXXXXXXXXXXXXXXXX
TEST ASKED : QUANTIFERON -TB GOLD PLUS

PATIENTID : XXXXXXXXXXXXXXXX

TEST NAME	Results	UNITS
QUANTIFERON - TB GOLD PLUS		
TB1 ANTIGEN TUBE MINUS NIL TUBE	2.24	IU/mL
TB2 ANTIGEN TUBE MINUS NIL TUBE	2.11	IU/mL
MITOGEN TUBE MINUS NIL TUBE	1.4	IU/mL
NIL TUBE	1.16	IU/mL
FINAL RESULT	POSITIVE	

INTERPRETATION

<table>
<tr><th>Nil (IU/ml)</th><th>TB1 minus Nil (IU/ml)</th><th>TB2 minus Nil (IU/ml)</th><th>Mitogen minus Nil (IU/ml)*</th><th>QFT-Plus Result</th><th>Report/ interpretation</th></tr>
<tr><td rowspan="4">≤8.0</td><td>≥0.35 and ≥25% of Nil</td><td>Any</td><td rowspan="2">Any</td><td rowspan="2">Positive†</td><td rowspan="2">M. tuberculosis infection likely</td></tr>
<tr><td>Any</td><td>≥0.35 and ≥25% of Nil</td></tr>
<tr><td><0.35 or ≥0.35 and <25% of Nil</td><td><0.35 or ≥0.35 and <25% of Nil</td><td>≥0.50</td><td>Negative</td><td>M. tuberculosis infection NOT likely</td></tr>
<tr><td><0.35 or ≥0.35 and <25% of Nil</td><td><0.35 or ≥0.35 and <25% of Nil</td><td><0.50</td><td rowspan="2">Indeterminate‡</td><td rowspan="2">Likelihood of M. tuberculosis infection cannot be determined</td></tr>
<tr><td>>8.0</td><td colspan="3">Any</td></tr>
</table>

Sample Collected on (SCT) : Sample collection time
Sample Received on (SRT) : Sample receiving time at Lab
Report Released on (RRT) : Report release time
Sample Type : BLOOD
Labcode :
Barcode :

Doctor 1 Sign Doctor 2 Sign

NOTE

1 A positive result indicates the IFN-Gamma response to M. tuberculosis antigens in patient's sample suggestive of probable exposure to M. tuberculosis.

2 This assay is an indirect test for Mycobacterium tuberculosis infection including diseases and is intended for use in conjunction with clinical findings and other diagnostic tests.

3 False-positive results may occur in patient's with prior infection with M marium, M szulgai, or M kansasii.

4 A Negative result indicates absence of IFN-Gamma Response to M. Tuberculosis antigen in patients sample but does not preclude the possibility of M.tuberculosis infection or tuberculosis disease.

5 False Negative results can be due to stage of infection (e.g. sample taken prior to the development of cellular immune response), Co-morbid conditions that affect immune functions .

6 Low lymphocyte counts, reduced or no activation of immune response to TB antigens or other immunological variables. CDC recommends repeat test after 8-10 weeks in case of high suspicion of tuberculosis.

7 Indeterminate results can be seen in HIV positive individuals with CD4 Count ≤ 200 cells/mL, In Children < 4 years of age, recent illness, presence of heterophile antibodies in the patient's sample, Compromised immune state and recent vaccinations.

8 The magnitude of the measured IFN-Gamma level cannot be correlated to the stage or degree of infection, level of immune responsiveness, likelihood of progression of active disease or to omonitor TB therapy.

COMMENTS

This assay is an indirect test for Mycobacterium tuberculosis infection including disease and is intended for use in conjunction with risk assessment, radiography and other medical and diagonostic evaluations.

~~ End of report ~~

Sample Collected on (SCT)	:	Sample collection time
Sample Received on (SRT)	:	Sample receiving time at Lab
Report Released on (RRT)	:	Report release time
Sample Type	:	BLOOD
Labcode	:	
Barcode	:	

Doctor 1 Sign Doctor 2 Sign

CUSTOMER DETAILS

As declared in our data base

Name: XXXXXXXXXXXXX **Age:** XX **Sex:** XX

Barcodes/Sample_Type	:	
Labcode	:	
Ref By	:	XXXXXXXXXXXXXXXXXXXXXXXXXX
Sample_Type/Tests	:	LITHIUM HEPARIN:ZZZZ LITHIUM HEPARIN:QUANTIFERON -TB GOLD PLUS
Sample Collected At	:	
Sample Collected on (SCT)	:	Sample collection time
Report Released on (RRT)	:	Report release time
Amount Collected	:	-

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CONDITIONS OF REPORTING

- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- This report is not valid for medico-legal purpose.
- Neither Thyrocare, nor its employees/representatives assume any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report.
- Thyrocare Discovery video link :- https://youtu.be/nbdYeRgYyQc
- For clinical support please contact @8450950852,8450950853,8450950854 between 10:00 to 18:00

EXPLANATIONS

- Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- **Name** - The name is as declared by the client and recored by the personnel who collected the specimen.
- **Ref.Dr** - The name of the doctor who has recommended testing as declared by the client.
- **Labcode** - This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- **Barcode** - This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- **SCP** - Specimen Collection Point - This is the location where the blood or specimen was collected as declared by the client.
- **SCT** - Specimen Collection Time - The time when specimen was collected as declared by the client.
- **SRT** - Specimen Receiving Time - This time when the specimen reached our laboratory.
- **RRT** - Report Releasing Time - The time when our pathologist has released the values for Reporting.
- **Reference Range** - Means the range of values in which 95% of the normal population would fall.

SUGGESTIONS

- Values out of reference range requires reconfirmation before starting any medical treatment.
- Retesting is needed if you suspect any quality shortcomings.
- Testing or retesting should be done in accredited laboratories.
- For suggestions, complaints or feedback, write to us at **info@thyrocare.com** or call us on **022-3090 0000 / 6712 3400**
- SMS:<Labcode No.> to **9870666333**