

Specimen ID:
Control ID:

Acct #: 17452095 Phone: (800) 539-6119 Rte: 00
Walk-In Lab, LLC
1645 Tiffany Lane
Mandeville LA 70448

Patient Details

DOB:
Age(y/m/d):
Gender: SSN:
Patient ID:

Specimen Details

Date collected:
Date entered:
Date reported:

Physician Details

Ordering: W SMITH
Referring:
ID: C34593
NPI: 1326197864

General Comments & Additional Information

Alternate Control Number:
Total Volume: Not Provided

Alternate Patient ID: Not Provided
Fasting: Yes

Ordered Items

Inflammatory Bowel Disease-IBD; Drawing Fee

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Inflammatory Bowel Disease-IBD					
Saccharomyces cerevisiae, IgG	<20.0		Units	0.0 - 24.9	01
			Negative	<20.0	
			Equivocal	20.1 - 24.9	
			Positive	>or= 25.0	
Saccharomyces cerevisiae, IgA	<20.0		Units	0.0 - 24.9	01
			Negative	<20.0	
			Equivocal	20.1 - 24.9	
			Positive	>or= 25.0	

IgA and IgG antibody testing for *S. cerevisiae* is useful adjunct testing for differentiating Crohn's disease and ulcerative colitis. Close to 80% of Crohn's disease patients are positive for either IgA or IgG. In ulcerative colitis, less than 15% are positive for IgG and less than 2% are positive for IgA. Fewer than 5% are positive for either IgG or IgA antibody, and no healthy controls had antibody for both.

Atypical pANCA <1:20 titer Neg:<1:20 01

The atypical pANCA pattern has been observed in a significant percentage of patients with ulcerative colitis, primary sclerosing cholangitis and autoimmune hepatitis.

ASCA+/PANCA- Suggestive of Crohn's disease
ASCA-/PANCA+ Suggestive of Ulcerative colitis

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Dir: William F Hancock, MD

For inquiries, the physician may contact **Branch: 504-828-2666 Lab: 800-762-4344**