

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						

01 BN LabCorp Burlington
1447 York Court, Burlington, NC 27215-3361

Dir: William F Hancock, MD

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