

Dr. Vinay Chopra
 MD (Pathology & Microbiology)
 Chairman & Consultant Pathologist

Dr. Yugam Chopra
 MD (Pathology)
 CEO & Consultant Pathologist

NAME	: Mr. VINOD KALIA	PATIENT ID	: 1524905
AGE/ GENDER	: 70 YRS/MALE	REG. NO./LAB NO.	: 012502030004
COLLECTED BY	:	REGISTRATION DATE	: 03/Feb/2025 08:18 AM
REFERRED BY	:	COLLECTION DATE	: 03/Feb/2025 08:23AM
BARCODE NO.	: 01524846	REPORTING DATE	: 06/Feb/2025 11:35PM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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SPECIAL INVESTIGATIONS

ANTI NUCLEAR ANTIBODY/FACTOR (ANA/ANF) - WITH REFLEX TO TITRES: IFA (HEP-2)

ANTI NUCLEAR ANTIBODY (ANA) - IFA, HEP2 <i>by IFA (IMMUNO FLUORESCENT ASSAY)</i>	EQUIVOCAL	NEGATIVE (-ve)
PRIMARY DILUTION <i>by IFA (IMMUNO FLUORESCENT ASSAY)</i>	1:100	
PRIMARY INTENSITY (GRADE) ON IF <i>by IFA (IMMUNO FLUORESCENT ASSAY)</i>	Intensity (+)	
ANA PATTERN <i>by IFA (IMMUNO FLUORESCENT ASSAY)</i>	Nuclear Homogenous (AC-1)	
END POINT TITRES <i>by IFA (IMMUNO FLUORESCENT ASSAY)</i>	<1:100	

INTERPRETATION:

1. Anti Nuclear antibody (ANA) in dilutions is recommended for all positive results and follow up
2. Immunofluorescence microscopy using human cellular extracts like HEP-2 cells is a sensitive test for detection of serum antibodies that react specifically with various cellular proteins and nucleic acids
3. Test conducted on Serum

INTERPRETATION GUIDELINES : (Sample screening Dilution - 1:100):

Negative : No Immunofluorescence
 + : Weak Positive (1:100)
 ++ : Moderate Positive (1:320)
 +++ : Strong Positive (1:1000)
 ++++ : Very strong Positive (1:3200)

COMMENTS:

Anti Nuclear antibody (ANA / ANF) is a group of autoantibodies directed against constituents of cell nuclei including DNA, RNA & various nuclear proteins. These autoantibodies are found with high frequency in patients with connective tissue disorders specially SLE. Since positive ANA results have been reported in healthy individuals, these reactivities are not by themselves diagnostic but must be correlated with other laboratory and clinical findings.

PATTERN	DISEASE ASSOCIATION
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Test Name	Value	Unit	Biological Reference interval
NUCLEAR			
Homogenous	SLE & other connective tissue disorders, Drug induced SLE		
Peripheral	SLE & other connective tissue disorders		
Speckled Coarse	Mixed connective Tissue Disorders (MCTD), Scleroderma-Polymyositis Overlap Syndrome, Raynauds Phenomenon, Psoriasis, Sjogrens Syndrome, Systemic Sclerosis.		
Speckled Fine	SLE, Sjogrens syndrome, Scleroderma, Myositis, MCTD		
NUCLEAR DOTS			
Few	Auto-immune & Viral disease- Primary Biliary Cirrhosis & Chronic Active Hepatitis, Rarely Collagen Vascular disease		
Multiple	Primary Biliary Cirrhosis (>30%)		
Centromere	CREST syndrome, Progressive Systemic Sclerosis		
NUCLEOLAR			
Homogeneous	Scleroderma, Myositis, Raynauds Phenomena, SLE & Rheumatoid arthritis		
Clumpy	Systemic sclerosis & Scleroderma		
CYTOPLASMIC			
Mitochondrial	Primary Biliary Cirrhosis, Scleroderma & Overlap syndrome		
Ribosomal	SLE (10-20%)		

Clinical correlation and/or repeat testing after 6-12 weeks.

*** End Of Report ***




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