Reference No.	**: - 1912220676**	Age/Gender	: **21 Yrs/Male**
Pt's Name	**: Mr. GURJIT SINGH**		**AMB-KOS**
Referred By	**: NA**		
Sample Collection Date/Time	**: 18-Dec-2019**	Date	:**18-Dec-2019**
Sample Receiving Date/Time	**: 18-Dec-2019 06:58AM**	Approvel Date	:**18-Dec-2019 02:53PM**
Sample From	**: KOS DIAG LAB**	Report Print Time	**:22-Dec-2019 12:47AM**

MICROSCOPY

Test Description	Observed Value	Biological Reference Interval
Anti Nuclear Abs-IFA, Hep2 Serum		
ANA (IF)*	NEGATIVE	Negative

Method : Immunofluorescence Microscopy

Test Method (s)

ANTI-NUCLEAR AB-IFA, HEP2, SERUM - The Immunofluoresence assay Is the Gold standard method for ANA testing. A negative ANA test virtually rules out a diagnosis of Systemic Lupus Erythematosus but a positive test may be Indicative of a number of autoimmune connective tissue diseases such as Scleroderma,Rheumatoid Arthritis and Sjogren:s syndrome. When correlated with the Clinical history & physical examination ,It Identifies almost all pts. With SLE (Senstlvlty < 95%). Population studies show positive ANA In approximately 1-5% of healthy subjects. False positive results for ANA can be seen in pts. Taking certain medications like- hydralazine, isoniazid, procainamide etc. ANA test carried out by Immunofluorescence assay using HEP-2 slide (Tissue culture substrate) Is more sensitive and specific than ANA carried out by enzyme immunoassay.

TITRE

ANA positivity of greater than or equal to 1:160 titre is of clinical significance In diagnosis of Collagen Vascular Disorders. Upto 40 % of elderly subject with chronic non-rheumatological illness have ANA positivity usually at low titre (1: 40-1:160)

PATTERN

The ANA pattern seen on Immunofluorescence staining helps in determination of the antibody specificities which need to be confirmed by Immunoblot techniques.

1+ Positivity = Minimum *Immunofluorescence* (IF) of no significance.
2+ Positivity = Mildly positive, clinically insignificant.
3+ Positivity = Significant positive, needs clinical correlation.
4+ Positivity = Strong positive, highly suggestive of collagen vascular disease. A titre estimation helps to monitor response to treatment,

PLEASE NOTE: ALL ANA RESULTS WILL BE REPORTED WITH FINAL END POINT TITRE VALUE.

EXAMINATION OF BLOOD

Location	Pattern	Target Antigen	Clinical Association
Nucleus	Homogeneous	Double strand DNA His tones Nucleosome, RNA, Single Strand DNA	SLE Drug Induced Lupus , SLE , RA SLE, MCTD,RA, PM, DM, SS
	Speckled	Sm U1-snRNP SSA/Ro SSB/La Ku Cyclin1(PCNA) Mitosin/Cyclin II	SLE MCTD,SLE,RA, sharp syndrome Sjogren`s syndromes (SS)/SLE/Neonatal Lupus PM/DM/SLE/SS SLE/Overlap Syndromes DM
	Dense Fine Speckled (DFS)	Lens epithelium-derived growth factor (LEDGF), DNA binding transcription coactivator p75. (DFS-70)	Heal thy individuals , Various Inflammatory conditions like atopic dermatitis, interstitial cystitis, Asthma.
	Centromeres	Proteins of Kinetochores	sCREST syndrome, PSS limited form

Dr. Ajay Kumar
Ph.D. (BARC)
Specialisation in Thyroid Physiology

Dr. Rohini Bhatia
M.B.B.S., M.D. (Pathology)
Hony Consultant Pathologist

Dr. Malti Goyal
M.B.B.S., M.D. (Path)
Hony Consultant Pathologist

Reference No.	: - 1912220676	Age/Gender	: 21 Yrs/Male
Pt's Name	: Mr. GURJIT SINGH		AMB-KOS
Referred By	: NA		
Sample Collection Date/Time	: 18-Dec-2019	Date	:18-Dec-2019
Sample Receiving Date/Time	: 18-Dec-2019 06:58AM	Approvel Date	:18-Dec-2019 02:53PM
Sample From	: KOS DIAG LAB	Report Print Time	:22-Dec-2019 12:47AM

	Nuclear Dots	Sp-100 , NDP53	PBC, Rheumatic Disease
	Nuclear Membrane	Lamins , gp210, p62	CFS, Collagenases, PBC, AIH
Nucleolus	Nucleolar homogeneous	PM-Scl Scl-70	PM, DM, PSS(Diffuse) PSS(Diffuse)
	Nucleolar speckled	RNA-Polymerase I / NOR-90	Progressive Systemic Sclerosis(Diffuse)
	Nucleolar Pattern	Fibrillarin	Progressive Systemic Sclerosis(Diffuse)
Cytoplasm	Cytoplasmic speckled	Mitochondrial Lysosomal Golgi Complex Ribosome P Jo-1 SRP, PL12, TIF1-Gamma	PBC, Unknown SS/SLE/RA SLE Polymyositis (PM), PM/ DM, Myositis
	Cytoplasmic filament	F-Actin Vimentin Tropomyosin Cytoplasmic Rings & rods	AIH Unknown Unknown HCV Infection- on therapy
Cell Cycle (mitotic cells)	Centriole Mid Body Spindle Fibers		Unknown Rheumatic Disease

End of Report

Laboratory is NABL Accredited

*** End Of Report ***

Dr. Ajay Kumar
Ph.D. (BARC)
Specialisation in Thyroid Physiology

Dr. Rohini Bhatia
M.B.B.S., M.D. (Pathology)
Hony Consultant Pathologist

Dr. Malti Goyal
M.B.B.S., M.D. (Path)
Hony Consultant Pathologist