



Department of Pathology

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Special Chemistry Report

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Dept Ref# : M01SCH20005138	Ordered By :
MRNO : M01-00000620734	In-house Consultant : Resident Doctor
Name : MUDASIR FAROOQ	Report Destination : Lab Reception
Age/Sex : 47 Year(s)/Male	Requested : 09-JUN-2020 11:37:54
Phone : 0300 5299947, 0301 5258322, 0333 5165758	Specimen Received : 09-JUN-2020 11:41:55
Address : House # 269, Street # 41, Sector/Area F11/3, ISLAMABAD - PAKISTAN	Reported : 09-JUN-2020 12:50:53

SPECIMEN : SERUM

TEST(s)	RESULT(s) UNITS	REFERENCE RANGE
Anti SARS CoV 2 Antibodies	0.88 COI	<1.0 = NEGATIVE >=1.0 = POSITIVE
	NEGATIVE	

Interpretation:

Anti SARS CoV 2 Antibodies test is a qualitative assay which detects both IgG & IgM as total antibodies targeted against nucleocapsid (N) antigen performed on fully automated electrochemiluminescence technology using FDA authorized kits. This test should not be used for initial diagnosis of SARS COV 2 infection. Its utilization is most appropriate in symptomatic and post symptomatic patients for disease monitoring and treatment. It should be interpreted in conjunction with patients history, clinical findings and PCR testing of Nasopharyngeal secretion.

Positive:

- Positive test indicates patients recent or prior exposure to SARS COV 2 virus; however, does not indicate infectivity status (active infection)
- To confirm active infection PCR for SARS COV 2 virus by Nasopharyngeal sample is necessary.
- Serial testing by ELISA is useful to monitor disease status
 Method Specificity: 99.8 % (99.65 - 99.91)
 Method Sensitivity post PCR infection:
 0 - 6 days 65.5 % (56.1 - 74.1 %)
 7 - 13 days 88.1 % (77.1 - 95.1 %)
 > 14 days 100 % (88.1 - 100 %)
- Positive result does not necessarily incur immunity to infection, since reinfection with SARS COV 2 virus have been reported.

Negative:

- Negative result to antibody testing either is due to non-exposure to SARS COV 2 virus OR early stage of infection where antibodies have not yet developed
- Negative result to antibody testing does not rule out SARS COV 2 infection therefore should be interpreted conjunction with PCR test of Nasopharyngeal secretion and lower respiratory tract secretions.
- If clinical suspicion for SARS COV 2 infection persists in the PCR negative patients, and antibody testing is negative other helpful tests may be incorporated in the panel included but not limited to Procalcitonin, Serum Lactate and D. Dimer.

Abdur Rehman
Sr. Medical Technologist

Electronically verified report, no signature(s) required.

DR. SHAHGUL ANWAR
Consultant Pathologist
Head of laboratory
MD, FCAP, DABP
(Histopathology)

DR. IRUM AFTAB
Consultant Microbiologist
M.B.B. S, MPHIL
(Microbiology)

DR. MUNIBA KANWAL
MBBS, FCPS (Heamatology)
Assistant Consultant
Heamatology and Blood Bank