



Laboratory Director: Deborah E. Blue, MD, MT(ASCP)

Patient Name		DOB	Report Printed 4/21/2020	
REPORT, H Specimen Type		Client Information	MiraVista ID	
Serum		Test RightFax 5 Upstairs Left	M00001034	
Specimen ID				
Collection Date	Received Date	Fax 317-455-2189		
01/01/2001	03/18/2020	1 44 617 166 2166		

LAB SERVICES REPORT

Test	Result	Unit	Interpretation	Report Date			
310 MVista® Histoplasma Ag Quantitative EIA							
Histoplasma Antigen EIA	13.88	ng/mL	POSITIVE	03/18/2020			

Test Parameters:

Reference Interval: None Detected

Reportable Range: Results reported as ng/mL in 0.4 - 19.0 ng/mL range

Results above the limit of detection but below 0.4 ng/mL are reported as 'Positive, Below the Limit of Quantification'

Results above 19.0 ng/mL are reported as 'Positive, Above the Limit of Quantification'

This test was developed and its performance characteristics determined by MiraVista Diagnostics. It has not been cleared or approved by the FDA; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.

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Patient Name	Specimen ID	Specimen Type	Collection Date
REPORT, H		Serum	01/01/2001