

|                   |                      |                  |                           |
|-------------------|----------------------|------------------|---------------------------|
| Patient Name      | : Mr MR.DUMMY        |                  |                           |
| DOB/Age/Gender    | : 23 Y/Male          | Sample Collected | : Apr 26, 2024, 01:00 PM  |
| Patient ID / UHID | : 8052806/RCL7249292 | Report Date      | : May 24, 2024, 06:43 PM. |
| Referred By       | : Dr. X              | Barcode No       | : SI484394                |
| Sample Type       | : Serum              | Report Status    | : Final Report            |
| Test Description  | Value(s)             | Unit(s)          | Reference Range           |

VDRL- RPR Titre (Semi Quant)

|                                                                                                                                                                    |                                                                                 |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--------------|
| RPR, Serum<br>Slide Flocculation                                                                                                                                   | Non Reactive                                                                    | Non Reactive |
| <b>Interpretation:</b>                                                                                                                                             |                                                                                 |              |
| RESULTS                                                                                                                                                            | REMARKS                                                                         |              |
| Reactive                                                                                                                                                           | Indicates presence of IgM & IgG antibodies against Treponemal Pallidum antigens |              |
| Non Reactive                                                                                                                                                       | Indicates absence of IgM & IgG antibodies against Treponemal Pallidum antigens  |              |
| <b>Note</b>                                                                                                                                                        |                                                                                 |              |
| 1. Titres of $\geq 1: 8$ and rising titres are significant.                                                                                                        |                                                                                 |              |
| 2. Titres are reported only in reactive cases                                                                                                                      |                                                                                 |              |
| 3. Positive reaction indicates ongoing or recent infection and the diagnosis should be confirmed by specific Treponemal tests such as TPHA & FTA- Abs.             |                                                                                 |              |
| 4. The reactivity will vary with Primary (60-86%), Secondary (99%) and Tertiary (98%) stage of Syphilis.                                                           |                                                                                 |              |
| 5. False positive reaction may be observed in patients of Malaria, Hepatitis, Mumps, Leprosy, Infectious Mononucleosis, Rheumatoid Arthritis and Collagen disease. |                                                                                 |              |
| 6. False negative reaction may be due to processing of sample collected early in the course of disease, immunosuppression and due to prozone effect.               |                                                                                 |              |
| 7. The test is conducted on serum.                                                                                                                                 |                                                                                 |              |
| 8. This is a Semi-quantitative test.                                                                                                                               |                                                                                 |              |
| <b>Uses</b>                                                                                                                                                        |                                                                                 |              |
| 1. To screen for presence of Syphilis infection.                                                                                                                   |                                                                                 |              |
| 2. To monitor the progression of disease.                                                                                                                          |                                                                                 |              |
| 3. To asses the response to therapy (decreasing titres) in patients being treated for Syphilis.                                                                    |                                                                                 |              |

\*\*\* End Of Report \*\*\*

Disclaimer: Method given in report are only indicative and can be changed depending upon type of machine and kit available at time of testing.  
Not all tests at all locations are under NABL scope. Availability of tests under NABL scope varies from lab to lab.



Booking Centre :- DEMO PARTNER CHENNAI, DEMO PARTNER CHENNAI  
Processing Lab :-

928-909-0609

ccsupport@redcliffelabs.com

www.redcliffelabs.com

All Lab results are subject to clinical interpretation by qualified medical professional and this report is not subject to use for any medico-legal purpose.

Dr. Dummy

# Terms and Conditions of Reporting

1. The presented findings in the Reports are intended solely for informational and interpretational purposes by the referring physician or other qualified medical professionals possessing a comprehensive understanding of reporting units, reference ranges, and technological limitations. The laboratory shall not be held liable for any interpretation or misinterpretation of the results, nor for any consequential or incidental damages arising from such interpretation.
2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.
3. It is to be noted that variations in results may occur between different laboratories and over time, even for the same parameter for the same Customer. The assays are performed and conducted in accordance with standard procedures, and the reported outcomes are contingent on the specific individual assay methods and equipment(s) used, as well as the quality of the received specimen.
4. This report shall not be deemed valid or admissible for any medico-legal purposes.
5. The Customers assume full responsibility for apprising the Company of any factors that may impact the test finding. These factors, among others, includes dietary intake, alcohol, or medication / drug(s) consumption, or fasting. This list of factors is only representative and not exhaustive.

---

## DISCLAIMER

This is a sample report provided for demonstration purposes only and does not represent an actual patient report. Test results, reference ranges, methodologies, instrumentation, and report formats may vary depending on the laboratory performing the test. The format and representation shown are indicative of reports generated by the National Reference Laboratory of Redcliffe Labs, Noida. This sample report should not be used for medical interpretation, diagnosis, or treatment decisions.