

Patient NAME : Dummy	Report STATUS : Final Report
DOB/Age/Gender :	Barcode NO :
Patient ID / UHID :	Sample Type : Serum
Referred BY :	Report Date :
Sample Collected :	

Test Description	Value(s)	Unit(s)	Reference Range
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Anti Nuclear Antibody (ANA) By IFA (HEP-2)

Anti Nuclear Antibody by IFA	Negative		Negative
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Interpretation:

Guidelines (Sample screening Dilution - 1:100):

Negative : No Immunofluorescence

+ : Weak Positive

++ : Moderate Positive

+++ : Strong Positive

++++ : Very strong Positive

Test Description: Antinuclear antibodies (ANAs) are unusual antibodies, detectable in the blood, that have the capability of binding to certain structures within the nucleus of the cells. ANAs indicate the possible presence of autoimmunity & provide, therefore, an indication of autoimmune illness. Fluorescence tech. are frequently used to actually detect the antibodies in the cells, thus ANA testing is sometimes referred to as fluorescent antinuclear antibody test (FANA). The ANA test is a sensitive screening test used to detect autoimmune diseases

Technique: Indirect Immunofluorescence.

The BIOCHIP Slide is a combination of Hep-20-10 cells and primate liver and has the following advantages.

1. It is a global standard tech. with a natural antigen spectrum capable of detecting more than 30 diagnostically relevant auto antibodies.
2. Hep 20-10 cell lines contain 40% mitotic cells, facilitating easier identification of rare patterns.
3. If the test is negative, detectable level of auto antibodies is ruled out. In case of a positive result, autoantibodies against any one or in some cases simultaneously against more than one antigens may be present and further monospecific tests or panel of profiles can be used to determine the specific autoantibodies present.

NOTE- All weak positive (+) results may be repeated after 6 - 8 weeks. **Associated Tests:** Monospecific ELISA to define single antigens, ANA Immunoblot assay.

Abbreviations: SLE: Systemic Lupus Erythematosus, SCL: Scleroderma, MCTD: Mixed Connective Tissue Disease; CFS: Chronic Fatigue Syndrome; AIH: Autoimmune Hepatitis, PBC: Primary Biliary Cirrhosis, PM: Polymyositis, DM: Dermatomyositis, SS: Systemic sclerosis, RA: Rheumatoid Arthritis.

Please view next page for co-relation table including various single antigens with their Immunofluorescence patterns and clinical associations

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Location	Pattern	Target Antigen	Clinical Association
Nucleus	Homogeneous	Double strand DNA Histones Nucleosome, RNA, Single Strand DN	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)	Healthy individuals, Various Inflammatory conditions like atopic dermatitis, interstitial cystitis, Asthma.
	Centomeres	Proteins of Kinetochores	CREST syndrome, PSS limited form
	Nuclear Dots	Sp-100 , NDP53	PBC, Rheumatic Disease
	Nuclear Membrane	Lamins, gp210, p62	CFS, Collagenoses, 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	Fibrillarlin	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 Fibres	-- -- --	Unknown Unknown Rheumatic Disease

Processing Lab :- Redcliffe Lifetech Pvt. Ltd., H-55, Sector-63, Noida, Uttar Pradesh - 201301

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