

LAB REPORT

NATIONALITY: Indian

<b>Mr. DEVINDER KUMAR</b>	Registered ON:	22/Aug/2024 01:30PM
Barcode NO: 2k615716	Sample Coll. Date:	22/Aug/2024 01:29PM
Age: 37 Y Gender: Male	Receiving ON:	23/Aug/2024 07:41AM
Refer Doctor: Dr. Self	Reported ON:	24/Aug/2024 05:17PM
Sample Collected AT: JK028 JAMMU PSC		

TEST NAME	RESULT	UNIT	REF. RANGE
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**IGRA (Quantiferon-TB Gold)\***

Primary Sample Type: Whole Blood

TB ( QFT ) IFN - Gamma Levels 0.15 IU/ML 0.0-0.35

**Test details (Reference Only)**

TB Antigen -Tube 0.22 IU/mL  
 TB Nil - Tube 0.08 IU/mL  
 Result **NEGATIVE**

**Remark:** Positive/Negative results should be always correlated with other pathological and radiological findings and clinical history / findings of the patient to reach at any final diagnosis.

NIL [IU/ml]	TB Antigen-Nil [IU/ml]	Standard E Result	Report/Interpitation
≤8.0	<0.35	Negative	M.tuberculosis infection Not likely
≤8.0	≥0.35 and < 25% of Nil Value	Negative	M.tuberculosis infection Not likely
≤8.0	≥0.35 and ≥ 25% of Nil Value	Positive	Results are indeterminate for TB Antigen responsiveness
> 8.0	Any	Indeterminate	Results are indeterminate for TB Antigen responsiveness

**Advise:** Kindly correlate clinically and with other radiological and pathological investigation.

**Comment**

Quantiferon test is considered positive for IFN-g response to the TB Antigen that is significantly above the baseline IFN-g IU/mL value. The Mitogen-stimulated plasma sample serves as an IFN-g positive control for each specimen tested. A low response to Mitogen (<0.5 IU/mL) indicates an indeterminate result when a blood sample also has a negative response to the TB antigens. This pattern may occur with insufficient lymphocytes, reduced lymphocyte activity due to improper specimen handling, incorrect filling/mixing of the Mitogen tube or inability of the patients lymphocytes to generate IFN-g. The baseline sample adjusts for background, heterophile antibody effects or non-specific IFN-g in blood samples. The IFN-g level of the baseline tube is subtracted from the IFN-g level of the TB antigen tube and Mitogen tube.

**Interpretation**

A negative result does not preclude the possibility of *M. tuberculosis* infection or tuberculosis disease. False-negative results can be due to stage of infection (e.g., specimen obtained prior to the development of cellular immune response), co-morbid conditions which effect immune function and other immunological variables.



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**Dr. Pranav Gupta**  
Ph.D(Virology)  
Molecular Biology.

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A positive result should not be the sole or definitive basis for determining infection with <i>M. tuberculosis</i> . A positive result should be followed by further medical evaluation and diagnostic evaluation for active tuberculosis disease (e.g., TB PCR, AFB smear and culture, chest X-Ray) While EAST-6, CFP-10 and TB7.7 (p4) are absent from all BCG strains and from most known non-tuberculosis mycobacteria, it is possible that a positive Quantiferon - TB Gold result may be due to infection by <i>M. kansasii</i> , <i>M. szulgai</i> or <i>M. marinum</i> . If such infections are suspected, alternative tests should be investigated.			

Results are indeterminate for TB Antigen responsiveness

Please Correlate with Clinical Condition.

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



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Panel Name:JK028 JAMMU PSC