



LABORATORY REPORT

NAME : MR.SI0555	REFERRED BY : SELF	VISIT NO : VAMP26148039
AGE : 40Y 0M 0D	ZERO TARIFF CLIENT CODE	COLLECTED ON : 21-04-2026 10:00
GENDER : Male	LAB MR# : AAMP01479318	RECEIVED ON : 21-04-2026 18:11
OP / IP / DG # :		APPROVED ON : 22-04-2026 13:50
		REPORT STATUS : Final Report



Test Name	Result	Biological Ref. Interval	Unit
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SEROLOGY AND IMMUNOLOGY

ENA (Extractable Nuclear Antigen) Profile - Quantitative (Serum)

Anti Centromere Antibodies <i>ELISA</i>	2.30	NEGATIVE: < 20 POSITIVE: >= 20	Units
Anti Histones Antibodies <i>Enzyme Immunoassay</i>	3.20	Negative: < 20 Positive: >= 20	Units
U1 snRNP Antibodies (ELISA) <i>ELISA</i>	5.30	Negative: <20 Weak Positive: 20 - 39 Moderate Positive: 40 – 80 Positive: >80	U/mL
SS-A (Ro) IgG Antibodies <i>ELISA</i>	4.20	Negative: < 20 Weak Positive: 20-39 Moderate Positive: 40-80 Strong Positive: >80	RU/mL
SS-B (La) IgG Antibodies <i>ELISA</i>	3.20	Negative: < 20 Weak Positive: 20-39 Moderate Positive: 40-80 Strong Positive: >80	RU/mL
Smith (Sm) IgG Antibodies <i>ELISA</i>	6.20	Negative : <20 Weak Positive : 20-39 Moderate Positive : 40-80 Strong Positive : >80	RU/mL
Jo-1 Antibody - Serum <i>ELISA</i>	4.32	Negative : <20 Weak Positive : 20-39 Moderate Positive : 40-80 Strong Positive : >80	RU/mL
Scl-70 IgG Antibodies <i>ELISA</i>	5.30	Negative : <20: Weak Positive : 20-39: Moderate Positive : 40-80 Strong Positive : >80	RU/mL
Anti ds-DNA - ELISA <i>ELISA</i>	60.00	<100.0 : Negative ≥100.0 : Positive	IU/ml

Interpretation:

Antigen	Disease	Prevalence of auto antibodies
Sn-RNP	MCTD	95-100%
	SLE	15-40%
	SS	2-12%
	PM/DM	12-16%
Sm (Smith antigen)	SLE	5-40%
SS-A (Ro)	SS	40-95%

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	SLE	22-60%	
	Neonatal lupus	95-100%	
SS-B (La)	SS	40-95%	
	SLE	10-20%	
	Neonatal lupus	75%	
Scl-70	SS	25-75%	
Jo-1	PM/DM	25-35%	
Centromeres	SS limited form	80-95%	
	SS diffuse form	8%	
	PBS	10-30%	
dsDNA	SLE	40-90%	
Nucleosomes	SLE	40-70%	
Histones	DLE	95-100%	
	SLE	50%	
	RA	15-50%	

Abbreviations: MCTD – Mixed Connective tissue disease; SLE – Systemic Lupus Erythematosus; SS – Systemic Sclerosis; PM – Polymyositis; DM – Dermatomyositis; SS – Sjogren’s Syndrome; DLE – Diffuse Lupus Erythematosus; RA – Rheumatic Arthritis; PBS – Primary Biliary Cirrhosis.

Dr. G. Amitha
MBBS, MD (MICROBIOLOGY)
Consultant Microbiologist

Disclaimer:

1. All results released pertain to the specimen as received by the lab for testing and under the assumption that the patient indicated or identified on the bill/test requisition form is the owner of the specimen.
2. Clinical details and consent forms, especially in Genetic testing, histopathology, as well as wherever applicable, are mandatory to be accompanied with the test requisition form. The non-availability of such information may lead to delay in reporting as well as misinterpretation of test results. The lab will not be responsible for any such delays or misinterpretations thereof.
3. Test results are dependent on the quality of the sample received by the lab. In case the samples are preprocessed elsewhere (e.g., paraffin blocks), results may be compromised.
4. Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
5. Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.
6. Genetic reports as well as reports of other tests should be correlated with clinical details and other available test reports by

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a qualified medical practitioner. Genetic counselling is advised in genetic test reports by a qualified genetic counsellor, medical practitioner or both.

7. Samples will be discarded post processing after a specified period as per the laboratory's retention policy. Kindly get in touch with the lab for more information.

8. If accidental damage, loss, or destruction of the specimen is not attributable to any direct or negligent act or omission on the part of Ampath Labs or its employees, Ampath shall in no event be liable. Ampath lab's liability for a lack of services, or other mistakes and omissions, shall be restricted to the amount of the patient's payment for the pertinent laboratory services.

