



LABORATORY REPORT

NAME : MR.SI0633	REFERRED BY : SELF	VISIT NO : VAMP26148315
AGE : 40Y 0M 0D	ZERO TARIFF CLIENT CODE	COLLECTED ON : 21-04-2026 10:00
GENDER : Male	LAB MR# : AAMP01479594	RECEIVED ON : 21-04-2026 18:06
OP / IP / DG # :		APPROVED ON : 22-04-2026 20:28
		REPORT STATUS : Final Report



Test Name	Result	Biological Ref. Interval	Unit
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SEROLOGY AND IMMUNOLOGY

VGKC - Voltage gated Potassium channel (LG1 and CASPR2) Antibody Autoimmune encephalitis - Serum (Serum)

VGKC IFA	Negative	Negative
CASPR 2 IFA	Negative	Negative
LG1 IFA	Negative	Negative

Interpretation:

VGKCs are a family of voltage-gated potassium channels & are membrane proteins - Leucine-rich glioma inactivated protein 1(LGI1) & Contactin-associated protein 2 (CASPR2), responsible for controlling the cell membrane potential. Serum VGKC Ab have been detected in peripheral nervous system disease specifically associated with the clinical spectrum of acquired neuromyotonia (NMT) and cramp-fasciculation syndrome (CFS), and disorders of the central nervous system, including Morvan syndrome, epilepsy and limbic encephalitis (LE). Most cases (>80%) are not associated with paraneoplastic syndrome, however it has been observed with tumours like thymoma (around 20%) and small cell lung cancer (<5%).

Indirect Immunofluorescence in 1:10 sample screening dilution. This test detects the antibodies (IgG) in Transfected HEK cells.

Name	Function	Neurological Syndrome	Frequently Associated Tumours
Anti-LGI1	Component of transsynaptic complex involved in synaptic signal transmission	Limbic encephalitis(approx. 10% as PNS)	Thyroid carcinoma,SCLC,kidney cell carcinoma,ovarian teratoma,thymoma
Anti-LGI1CASPR2	Component of adhesion complex for VGKC localisation in juxtapanodes of myelinated axons	Neuromyotonia,Morvan's syndrome, limbix encephalitis(30% as PNS)	Thymoma





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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 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.

