

**LABORATORY TEST REPORT**

Name	: Mr. N S SHIVA PRASAD		
Sample ID	: B2622969		
Age/Gender	: 32 Years/Male	Reg. No	: 0312504230018
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Apr-2025 12:12 PM
Primary Sample	: Whole Blood	Received On	: 23-Apr-2025 04:03 PM
Sample Tested In	: Serum	Reported On	: 24-Apr-2025 07:57 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report



**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Biological Reference Interval
Rheumatoid Factor, RA <small>(Method: Immunoturbidometry)</small>	16.4	IU/mL	<20.0

**Interpretation:**

- This test detects evidence of rheumatoid factor (RF), which is a type of autoantibody. An antibody is a protective protein that forms in the blood in response to a foreign material, known as an antigen (for example a bacterial protein). Autoantibodies, however, are antibodies that attack one's own proteins rather than foreign protein. Rheumatoid factors are autoantibodies directed against the class of immunoglobulins known as IgG and are members of a class of proteins that become elevated in states of inflammation. Rheumatoid factor is elevated in many patients with both chronic and acute inflammation; it may be used to monitor the level of inflammation associated with rheumatoid arthritis (RA). Other markers such as CRP are considered more accurate for disease monitoring. Experts still do not understand exactly how RF is formed or why, but it is believed that RF probably does not directly cause joint damage but that it helps to promote the body's inflammation reaction, which contributes to the tissue destruction seen in rheumatoid arthritis.

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



*Handwritten Signature*  
DR. LAVANYA LAGISETTY  
MD BIOCHEMISTRY

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Primary Sample	: Whole Blood	Received On	: 23-Apr-2025 04:03 PM
Sample Tested In	: Serum	Reported On	: 23-Apr-2025 08:17 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Biological Reference Interval
Anti Cyclic Citrullinated Peptide (CCP) Antibodies <small>(Method: immunoturbidimetry)</small>	7.0	U/ml	Negative: < 18 Weak Positive: 18-24 Positive : 25-75 Strong Positive: > 75

**Result interpretation:-**

- Positive Anti-CCP test + positive RF test indicates that have rheumatoid arthritis.
- Positive Anti-CCP test + negative RF test indicates the early stage of rheumatoid arthritis.
- Negative Anti-CCP test + negative RF test indicates that you don't have rheumatoid arthritis, your symptoms are due to some other type of arthritis.

**Comments**

Anti CCP antibodies are useful for evaluating patients suspected of Rheumatoid arthritis. Positive results occur in 60-80% of Rheumatoid arthritis patients depending on disease severity. The positive predictive value of Anti CCP antibodies for Rheumatoid arthritis is far greater than Rheumatoid factor. False positive results are uncommon. Upto 30% patients with sero negative Rheumatoid arthritis also show Anti CCP antibodies.

**Clinical Uses**

- For diagnosis of early Rheumatoid arthritis - Anti CCP antibodies are detected in approximately 50-60% patients of Rheumatoid arthritis usually after 3-6 months of symptoms
- Prediction of severity of disease - Early Rheumatoid arthritis patients with Anti CCP positivity may develop a more erosive form of the disease as compared with Anti CCP negative patients
- To differentiate elderly onset Rheumatoid arthritis from Polymyalgia rheumatica and erosive SLE

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



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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Apr-2025 12:12 PM
Primary Sample	: Whole Blood	Received On	: 23-Apr-2025 03:57 PM
Sample Tested In	: Serum	Reported On	: 24-Apr-2025 11:31 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**IMMUNOLOGY & SEROLOGY**

Test Name	Results	Units	Biological Reference Interval
Rheumatoid Factor IgM Antibody <small>(Method: ELISA)</small>	<b>1.38</b>	S/Co	Negative~: <0.8 Equivocal : 0.8 - 1.2 Positive~: >1.2

**Interpretation:**

- Rheumatoid factors (RF) are a heterogeneous group of autoantibodies that are associated with the diagnosis of rheumatoid arthritis (RA), but can also be found in other inflammatory rheumatic and nonrheumatic conditions. Three isotypes namely RF IgA, RF IgM and RF IgG are described. The specificity and predictive value of the RF test may be increased by simultaneously measuring the three RF isotypes.
- RF is an antibody (IgM, IgG and IgA) that is directed toward antigenic determinants present on human and animal IgG and along with IgG forms an immune complex that contribute to the disease process.
- More than 75% of patients with Rheumatoid Arthritis show presence of IgM Isotype.
- Patients with various nonrheumatoid diseases characterized by chronic inflammation may test positive for RF. These diseases include systemic lupus erythematosus, polymyositis, tuberculosis, syphilis, viral hepatitis, infectious mononucleosis, and influenza. RF factor antibodies have been observed in asymptomatic individuals, specially in persons above 60 years of age or older.
- The test results must be interpreted in conjunction with the patient clinical information and other laboratory results.

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



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**DR. RUTURAJ MANIKLAL KOLHAPURE**  
 MD, MICROBIOLOGIST

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Primary Sample	: Whole Blood	Received On	: 23-Apr-2025 03:57 PM
Sample Tested In	: Serum	Reported On	: 25-Apr-2025 02:01 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**IMMUNOLOGY & SEROLOGY**

Test Name	Results	Units	Biological Reference Interval
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[PDF Attached](#)
**ANA BLOT Profile**

Control band	Present	
Jo-1 (Method: Immunoblot)	Negative	Negative
PL-7 (Method: Immunoblot)	Negative	Negative
PL-12 (Method: Immunoblot)	Negative	Negative
PM-Scl (Method: Immunoblot)	Negative	Negative
CENP-A (Method: Immunoblot)	Negative	Negative
CENP-B (Method: Immunoblot)	Negative	Negative
SCL-70 (Method: Immunoblot)	Negative	Negative
SS-A/Ro52. (Method: Immunoblot)	Negative	Negative
SS-A/Ro60 (Method: Immunoblot)	Positive	Negative
SS-B/La (Method: Immunoblot)	Positive	Negative
RNP-A (Method: Immunoblot)	Negative	Negative
RNP-C (Method: Immunoblot)	Negative	Negative
RNP-68 (Method: Immunoblot)	Negative	Negative
SmB (Method: Immunoblot)	Negative	Negative
SmD1 (Method: Immunoblot)	Negative	Negative
Ribo-PO (Method: Immunoblot)	Negative	Negative
PCNA (Method: Immunoblot)	Negative	Negative
dsDNA (Method: Immunoblot)	Negative	Negative
Histone (Method: Immunoblot)	Negative	Negative
Nucleosomes (Method: Immunoblot)	Negative	Negative
DFS70 (Method: Immunoblot)	Negative	Negative
AMA M2 (Method: Immunoblot)	Negative	Negative

**Interpretation:**

Differentiation of antibodies against cell nuclei (ANA).Indications: Sharp syndrome (MCTD), systemic lupus erythematosus, Sjögren's syndrome, systemic sclerosis, poly/dermatomyositis, PBC.  
 ANA Profile autoantibodies can be determined: antibodies against nRNP/Sm, Sm, SS-A, Ro-52, SS-B, Scl-70, PM-Scl, Jo-1, centromere protein B, PCNA, dsDNA, nucleosomes, histones, ribosomal P-proteins, AMA M2.  
 Antibodies against SS-A are characteristic markers for SLE and Sjögren's syndrome. In contrast, antibodies against Ro-52 also occur in patients with other autoimmune diseases.



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**IMMUNOLOGY & SEROLOGY**

Test Name	Results	Units	Biological Reference Interval
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ANA profile provides a comprehensive immunochromatographic assay for human autoantibodies of the IgG class to 14 different auto-antigens diagnostically implicated in a varied range of autoimmune diseases. The specificity for all specified autoantibodies has been found to be 100% in documented cohort studies, however the sensitivities are variable and may be correlated to the prevalence in particular diseases as mentioned below:

Antigen	Disease	Prevalence of auto antibodies
U1-nRNP	MCTD	95 - 100 %
	SLE	15-40%
	SS	2-12%
	PM/DM	12-16%
sm(Smith antigen)	SLE	5-40%
	SS	40-95%
	SLE	20-60%
	Neonatal lupus	95-100%
SS-B(La)	SS	40-95%
Scl-70	SLE	20-60%
PM-Scl	Neonatal lupus	95-100%
	SS	5-75%
	SS	7-20%
	PM-SS Overlap synd	18%
Jo-1	PM/DM	25-35%
Centromeres	SS	8-95%
	PBS	10-30%
PCNA(Proliferative cell nuclear antigen)	SLE	3%
ds DNA	SLE	40-90%
Nucleosomes	SLE	40-70%
Histones	DLE	950-100%
	SLE	50%
	RA	15-50%
Ribosomes P-protein	SLE	10%
AMA-M2	PBS	>95%
Mi-2	DM	95%
Ku	PM	5-25%

Abbreviations: MCTD – Mixed Connective tissue disease; SLE – Systemic Lupus Erythematosus; SS – Systemic Sclerosis; PM – Polymyositis; DM – Dermatomyositis; SJ – Sjogren's Syndrome; DLE – Diffuse Lupus Erythematosus; RA – Rheumatic Arthritis; PBS – Primary Biliary Cirrhosis. Interpretation of test results may be supported with individual auto-antibody titres and/ or indirect immunofluorescent assays, and should always be considered in correlation with detailed clinical pictures and never in isolation.


**DR. RUTURAJ MANIKLAL KOLHAPURE**  
 MD, MICROBIOLOGIST

**LABORATORY TEST REPORT**

Name	: Mr. N S SHIVA PRASAD		
Sample ID	: B2622970		
Age/Gender	: 32 Years/Male	Reg. No	: 0312504230018
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Apr-2025 12:12 PM
Primary Sample	: Whole Blood	Received On	: 23-Apr-2025 04:03 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 24-Apr-2025 12:35 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**MOLECULAR BIOLOGY**

Test Name	Results	Units	Biological Reference Interval
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HLA B 27 - PCR - Qualitative

Not Detected

(Method: Real Time PCR)

**Interpretation :**

- HLA-B27 PCR is done for the qualitative detection of HLA-B27 allele in human Blood. The test detects HLA-B27 antigen expressed on cell surfaces. The results from the HLA-B27 qualitative kit must be interpreted within the context of all relevant clinical and laboratory findings. Principle: HLA-B27 is a Major Histocompatibility Complex(MHC) Class I molecule. MHC Class I molecules are cell-surface glycoproteins that are expressed on most nucleated human cells and platelets. DNA is extracted from samples, amplified using Real Time Amplification and detected using fluorescent reporter dye probes specific for HLA-B27 allele.
- Indications: The presence of HLA-B27 antigen is strongly associated with Ankylosing Spondylitis (AS), a chronic inflammatory disease of the axial musculoskeletal system and a few other rheumatic disorders (Reiter's Syndrome, Acute Anterior Uveitis and Inflammatory Bowel Disease). HLA-B27 testing is routinely used to screen for AS patients. About 90% of patients with AS have HLA-B27 Positivity compared to around 8% of healthy individuals.

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



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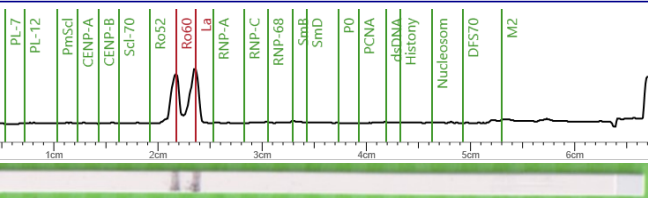
**Test results(16)**  
**Mr. N S SHIVA PRASAD**  
**Patient name:**

**BLOT-LINE ANA**

**Lot:** B2622969  
**Performed by:** RAVINDRA BABU  
**Evaluation time:** 4/25/2025 1:52:58 PM

**Borderline area from 8.00 to 10.00**

Scan image(16) - Mr. N S SHIVA PRASAD



Results(16) - Mr. N S SHIVA PRASAD

Band order	Band name	Position (mm)	Intensity (%)	Evaluation	Antibodies found against
1	IgG Control	-3.39	√	√	
2	Jo-1	3.30	0.00	Negative	
3	PL-7	5.33	0.00	Negative	
4	PL-12	7.20	0.61	Negative	
5	PmScl	10.33	0.00	Negative	
6	CENP-A	12.28	0.00	Negative	
7	CENP-B	14.31	0.00	Negative	
8	Scl-70	16.26	0.61	Negative	
9	Ro52	19.22	0.00	Negative	
10	Ro60	21.76	36.65	Positive	SS-A antigen
11	La	23.62	40.64	Positive	SS-B antigen
12	RNP-A	25.32	0.00	Negative	
13	RNP-C	28.28	0.00	Negative	
14	RNP-68	30.56	1.20	Negative	
15	SmB	32.94	1.78	Negative	
16	SmD	34.29	0.00	Negative	
17	P0	37.34	0.60	Negative	
18	PCNA	39.29	0.00	Negative	
19	dsDNA	41.91	1.20	Negative	
20	Histone	43.26	0.00	Negative	
21	Nucleosom	46.31	0.00	Negative	
22	DFS70	49.28	0.00	Negative	
23	M2	53.00	2.37	Negative	
ANA	Positive				

**Possible association with:**  
 Sjögren's syndrome, SLE, neonatal SLE