



Get Tested. Get Treated. Getchecked!

LAST NAME	FIRST NAME	GENDER	DATE OF BIRTH	ACCESSION ID	DATE OF SERVICE
ABC	DEMO	MALE	1996-11-29	1905130043	05-12-2019 09:43

Rheumatoid Arthritis	Test name	In Control	Moderate	High Risk	In Control Range	Moderate Range	High Risk Range	Previous
	RF IgM (IU/mL)			21	≤14		≥15	19 04/13/2019
	Anti-CCP3 IgG and IgA (U)	12			≤19	20-39	≥40	19 04/13/2019
	hs-CRP (mg/L)			10.1	≤0.9	1.0-3.0	≥3.1	19.1 04/13/2019

Comments

Calculate DAS score. If DAS 6, likely diagnosis of rheumatoid arthritis as per ACR guidelines. Consider analgesics such as NSAIDs and disease-modifying anti rheumatic drugs (DMARDs). Regular exercise recommended.; hs-CRP: Consider weight loss, insulin control, and smoking cessation to reduce hs-CRP levels. Consider aspirin, lipid lowering, and anti-diabetic agents.

For Physician: Please fill in the Score column and calculate DAS Score using the following criteria.

Joint Distribution (0-5 points)	Points	Score
1 large joint	0 point	
2-10 large joints	1 point	
1-3 small joints (large joints not counted)	2 points	
4-10 small joints (large joints not counted)	3 points	
>10 joints (at least one small joint)	5 points	
Acute Phase Reactants (0-1 point)		
In Control hs-CRP	0 point	
Abnormal hs-CRP	1 point	
Serology (0-3 points)		
In Control RF and In Control CCP	0 point	
Moderate RF	2 points	
Moderate CCP	2 points	
High Risk RF	3 points	
High Risk CCP	3 points	
Symptom Duration (0-1 point)		
< 6 weeks	0 point	
>= 6 weeks	1 point	
Total Score		<input type="text"/>

If the sum of all points is greater than or equal to 6, there is likely diagnosis of Rheumatoid Arthritis





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ANA IFA Panel*	Result	Pattern	Titer
	Current	Positive	Speckled
Previous (04/13/2019)	Positive	Speckled	1:160

Comments

Associated with systemic lupus erythematosus (SLE), Sjögren syndrome, scleroderma, polymyositis, rheumatoid arthritis, and mixed connective tissue disease. Treat underlying cause.

SAMPLE



04 333 1473



052 700 7915



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LAST NAME	FIRST NAME	GENDER	DATE OF BIRTH	ACCESSION ID	DATE OF SERVICE
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ENA 11 Profile	Test name	Negative	Borderline	Positive	Negative Range	Borderline Range	Positive Range	Previous
	dsDNA (IU/ml)	<12			≤29		≥30	18 04/13/2019
	Sm (U)			20.00	≤1.00		≥1.01	17.00 04/13/2019
	Scl-70 (U)			20.00	≤1.00		≥1.01	10.00 04/13/2019
	Chromatin (U)			10.00	≤1.00		≥1.01	10.00 04/13/2019
	Centromere (U)			12.00	≤1.00		≥1.01	12.00 04/13/2019
	Histone (U)			10.00	≤1.00		≥1.01	16.00 04/13/2019
	RNA POL III (U)			15.00	≤1.00		≥1.01	20.00 04/13/2019
	Getchecked Jo-1 (U)			18.00	≤1.00		≥1.01	16.00 04/13/2019
	Getchecked RNP (U)			12.00	≤1.00		≥1.01	15.00 04/13/2019
	Getchecked SSA (Ro) (U)			18.00	≤1.00		≥1.01	13.00 04/13/2019
Getchecked SSB (La) (U)			12.00	≤1.00		≥1.01	20.00 04/13/2019	

Comments

Sm: Likely systemic lupus erythematosus (SLE). Treat based on symptoms. Consider anti-inflammatory medications for joint pain and stiffness; steroid creams for rashes; corticosteroids of varying doses to minimize the immune response; and antimalarial drugs for skin and joint problems.;

Scl70: Likely scleroderma. Consider anti-inflammatory drugs (NSAIDs) and/or corticosteroids.;

Chromatin: Likely systemic lupus erythematosus (SLE) or Lupus nephritis. Anti Chromatin antibodies positive patients should consider tests checking kidney function. Treat based on symptoms. Consider anti-inflammatory medications for joint pain and stiffness; steroid creams for rashes; and antimalarial drugs for skin and joint problems.;

Centromere: Likely cutaneous scleroderma. Consider anti-inflammatory drugs (NSAIDs) and/or corticosteroids.;

Histone: Likely drug-induced systemic lupus erythematosus (SLE). Treat based on symptoms. Consider anti-inflammatory medications for joint pain and stiffness; steroid creams for rashes; and antimalarial drugs for skin and joint problems.;

RNA Pol III: Supports possible diagnosis of systemic sclerosis. Consider anti-inflammatory drugs (NSAIDs) and/or corticosteroids.;

Jo-1: Likely polymyositis. Consider high-protein diet and regular exercise. Consider corticosteroids, methotrexate (Rheumatrex, Trexall), and/or azathioprine (Imuran).;

RNP: Likely mixed connective tissue disease. Consider anti-inflammatory drugs (NSAIDs), hydroxychloroquine, corticosteroids, azathioprine, methotrexate, and/or cyclophosphamide.;

SS-A: Likely Sjögren syndrome. Treat based on symptoms. To relieve dry eyes, apply ocular lubricant and increase indoor humidity. To help with dry mouth, increase fluid intake, stimulate saliva flow, or use a nasal saline spray. Consider pilocarpine (Salagen), cevimeline (Evxac), and/or hydroxychloroquine (Plaquenil).;

SS-B: Likely Sjögren syndrome. Treat based on symptoms. To relieve dry eyes, apply ocular lubricant and increase indoor humidity. To help with dry mouth, increase fluid intake, stimulate saliva flow or use a nasal saline spray. Consider pilocarpine (Salagen), cevimeline (Evxac), and/or hydroxychloroquine (Plaquenil).



04 333 1473



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