DiagnosTechs

840 S 333rd St Federal Way, WA 98003
Tel: 1.800.878.3787 or 1.425.251.0596
CLIA License # 50D0630141

Accession: 25-GI-2xC
Phone: 1-800-878-3787
Fax: 1-425-251-0637

Received: **2/10/2025**
Completed: **2/10/2025**
Reported: **2/10/2025**

DIAGNOSTECHS, INC
840 S 333rd St
Federal Way, WA 98003

Results For: SAMPLE REPORT, MALE PATIENT -
Age: **22** DOB: **1/1/2003** Sex: **M**
Patient's Tel:
Ref. ID:
Specimen Collected: **2/7/2025**

Code	Test Name	Result/Notes	Reference Values/Key
GI-02xC	**Expanded GI Panel with GP3x and Calprotectin**		
GP2	Ova and parasites, two samples, pooled (stool)	RBC - few Yeast - many The following parasites were detected: Dientamoeba fragilis - few trophozoites	*Expected Findings:* *- No Ova or Parasites detected* *- No RBCs or WBCs* *- Yeast: none, rare, or few*
	In some cases, yeast is identified on microscopic exam but not on culture (CS1), indicating the yeast in the sample is non-viable. Non-viable yeast may be present due to transport conditions, dietary factors and supplements, and bacterial competition for resources in the stool.		
CS1	Stool culture for yeast	Candida albicans - moderate growth Candida glabrata - light growth	*+1=Scant +2=Light* *+3=Moderate +4=Heavy*
GP3x	Bacterial stool culture	Heavy growth mixed Gram negative flora. Moderate growth mixed Gram positive flora. Mixed flora consists predominantly of: ---------- Citrobacter braakii - heavy growth Klebsiella oxytoca - heavy growth Citrobacter freundii - moderate growth Streptococcus salivarius - moderate growth Enterococcus faecium - light growth Streptococcus parasanguinis - scant growth No Salmonella, Shigella, or E coli O157 isolated No Yersinia, Vibrio, or Aeromonas isolated No Proteus or Pseudomonas isolated	*Expected Findings:* *- Moderate to heavy growth of mixed Gram (+) & (-) flora* *- No pathogens should be detected.*
	Mixed flora results may consist of beneficial, commensal, and/or opportunistic microbial species. These categories are not distinct and may overlap. Always take results in context of clinical presentation and case history. Please note: As of January 19th 2013, stool cultures are performed utilizing the MALDI TOF Mass Spectrometer which has not been cleared by the US Food and Drug Administration. All CLIA required performance specifications for a lab developed test have been validated by DTI and found to be in compliance.		
GP3CA	Campylobacter antigen (stool)	Negative	*Normal: Negative*
GP3ST	Shiga toxin (stool)	Negative	*Normal: Negative*
GP3CD	C. difficile toxins A and B (stool)	Negative	*Normal: Negative*
GP4	Giardia lamblia antigen (stool)	Negative	*Normal: Negative*
GP5	Cryptosporidium antigen (stool)	Negative	*Normal: Negative*

Code	Test Name	Result/Notes	Reference Values/Key
GI-02xC	**Expanded GI Panel with GP3x and Calprotectin**		
MB2	Total intestinal sIgA (stool)	333 High	*Borderline Low: 10-19 mg/100g dry wt* *Normal: 20-160* *Borderline High: 161-250*
MB3	Lysozyme (stool)	14 Elevated	*Normal: < 6 mg/100g dry wt* *Borderline Elevated: 6-8* *Elevated: > 8*
	Elevated fecal lysozyme may indicate gastrointestinal inflammation.		
MB4	Alpha 1-antichymotrypsin (stool)	111 Elevated	*Normal: < 60 mg/100g dry wt* *Borderline Elevated: 60-100* *Elevated: > 100*
	Elevated fecal alpha 1-antichymotrypsin may indicate gastrointestinal inflammation.		
CAL	Calprotectin (stool)	88 Elevated	*Normal: < 80 µg/g* *Elevated: 80-200 µg/g* *Highly Elevated: > 200 µg/g*
	Normal Values: < 80µg/g - No indication of intestinal inflammation. Patients with low calprotectin levels are likely not to be in need of invasive diagnostic procedures. Elevated Values: 80 - 200µg/g - Representative of intestinal inflammation which may be caused by acute infection, diverticulitis or IBD in remission. The inflammatory response shown within this range may suggest further investigations. Highly Elevated Values: > 200µg/g - Suggestive of active intestinal inflammation. Appropriate further investigative procedures by specialists are suggested. Diagnostic Considerations - Fecal calprotectin is an indicator of neutrophilic presence in the stool and is not specific for IBD. - False negative results could occur in patients who have granulocytopenia due to bone marrow depression. - NSAID use may cause elevations in fecal calprotectin levels. - Normal Value cutoff of 80 µg/g may not be clinically applicable to children less than 4 years of age who generally have mildly increased fecal calprotectin levels. - Other intestinal diseases, including many gastrointestinal infections and colorectal cancer, can result in elevated levels of calprotectin.		
FG1	Chymotrypsin (stool)	8 Borderline Low	*Normal: 10-46 U/g* *Borderline Low: 4-9* *Low: < 4*
	Chymotrypsin is a marker enzyme for pancreatic exocrine output. Low chymotrypsin in the presence of normal transit time may indicate exocrine pancreatic insufficiency or hypochlorhydria. Low chymotrypsin may also result from slowed transit time (constipation).		
FG4	Occult blood (stool)	Positive	*Normal: Negative*
	A positive fecal occult blood may indicate the need for further diagnostic workup. Three negative results from specimens collected every other day are recommended to rule out intermittent sources of blood in stool.		
FG5	Fecal pH (stool)	6.0	*Normal: 5-8.5*
GP8S	Helicobacter pylori Ab, IgG (saliva)	< 3	*Negative: < 3 U/ml* *Borderline: 3-5.5 U/ml* *Positive: > 5.5 U/ml*

Code	Test Name	Result/Notes	Reference Values/Key
GI-02xC	**Expanded GI Panel with GP3x and Calprotectin**		
GP6S	Toxoplasma gondii Ab, sIgA (saliva)	Not Detected	*Normal: Not detected*
GP7S	Entamoeba histolytica Ab, sIgA (saliva)	Not Detected	*Normal: Not detected*
ASC	Ascaris lumbricoides (roundworm) Ab, sIgA (saliva)	Not Detected	*Normal: Not detected*
TRIC	Trichinella spiralis Ab, sIgA (saliva)**	Detected	*Normal: Not detected*
	A single titer test cannot distinguish between past and current infection. Further testing is recommended.		
T-SOL	Taenia solium (tapeworm) Ab, sIgA (saliva)**	Detected	*Normal: Not detected*
	A single titer test cannot distinguish between past and current infection. Further testing is recommended.		
FI1	Milk (casein) Ab, sIgA (saliva)*	Positive	*Normal: Negative*
FI2	Soy (protein) Ab, sIgA (saliva)*	Positive	*Normal: Negative*
FI3	Egg (ovalbumin) Ab, sIgA (saliva)*	Positive	*Normal: Negative*
FI4	Gluten (gliadin) Ab, sIgA (saliva)*	44 Positive	*Borderline: 13-15 U/ml* *Positive: > 15 U/ml*
	Notes on Gliadin Ab Test: Gliadins and closely related proteins are found in wheat, rye, barley and other grains. These proteins may trigger an immune reaction in some individuals. Patients on a gluten-free diet who have not been exposed to gluten for 3 months or longer should have a negative sIgA response to gliadin.		

*** Salivary secretory IgA (sIgA) should be considered a screening test for possible food sensitivities. A negative sIgA response does not rule out adverse reactions to a specific food. A positive or borderline sIgA response may warrant further diagnostic workup and/or dietary elimination trial in some individuals.**

**** This is a screening test. The diagnostic significance of the reported result must be determined by the physician.**

Remarks:
SAMPLE REPORT

Diagnosis Code(s): Not Provided To The Lab

Results and comments above are intended for informational purposes and should not be construed as medical advice. Use this report in context of the clinical picture and patient history before initiating any treatment.

For additional resources, including testing guidelines, result interpretation, and treatment protocols, please login to our website at www.diagnostechs.com and select Resources -> Provider Tools.

COURTESY INTERPRETATION of test and technical support are available upon request, to Physicians Only.