ALLERGY
TEST REPORT

LabCorp

Ordered Items
Allergens w/Total IgE Area 5

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Allergens w/Total IgE Area 5					
Class Description					01
Levels of Specific IgE / Class / Description of Class					
< 0.10 / 0 / Negative					
* 0.10 - 0.31 / 0/I / Equivocal/Low					
* 0.32 - 0.55 / I / Low					
0.56 - 1.40 / II / Moderate					
1.41 - 3.90 / III / High					
3.91 - 19.00 / IV / Very High					
19.01 - 100.00 / V / Very High					
>100.00 / VI / Very High					
1 **Immunoglobulin E, Total**	**761**	**High**	IU/mL	0 - 100	01
D001-IgE D pteronyssinus	**3.50**	**Abnormal**	kU/L	Class III	01
D002-IgE D farinae	**2.41**	**Abnormal**	kU/L	Class III	01
E001-IgE Cat Dander	**80.80**	**Abnormal**	kU/L	Class V	01
E005-IgE Dog Dander	**14.70**	**Abnormal**	kU/L	Class IV	01
G002-IgE Bermuda Grass	**6.45**	**Abnormal**	kU/L	Class IV	01
G006-IgE Timothy Grass	**1.27**	**Abnormal**	kU/L	Class II	01
I006- 2 Cockroach, German	<0.10		kU/L	Class 0	01
M001-IgE Penicillium chrysogen	**0.43**	**Abnormal**	kU/L	Class I	01
M002-IgE Cladosporium herbarum	3 **.32**	**Abnormal**	kU/L	Class I	01
M003-IgE Aspergillus fumigatus	<0.10		kU/L	Class 0	01
M006-IgE Alternaria alternata	**12.40**	**Abnormal**	kU/L	Class IV	01
T001-IgE Maple/Box Elder	<0.10		kU/L	Class 0	01
T003-IgE Common Silver Birch	<0.10		kU/L	Class 0	01
T006-IgE Cedar, Mountain	<0.10		kU/L	Class 0	01
T007-IgE Oak, White	<0.10		kU/L	Class 0	01
T008-IgE Elm, American	<0.10		kU/L	Class 0	01
T010-IgE Walnut	**0.58**	**Abnormal**	kU/L	Class II	01
T011-IgE Maple Leaf Sycamore					

4

Date Issued: 04/24/17 1338 ET **FINAL REPORT** Page 1 of 2

1. **Total IgE**—Total IgE measurements are useful in evaluating allergic bronchopulmonary aspergillosis, suspected immunodeficiency, and atopic dermatitis, the latter being associated with very high total IgE values. However, because there are appreciable total IgE levels in patients with allergen sensitization as well as those without, total IgE values alone are not considered useful in evaluating patients with suspected allergic disease.[1]

2. **ImmunoCAP® specific IgE allergen nomenclature**—[e.g., G002 Bermuda Grass, M001 Penicillium chrysogen mold, T010 Walnut tree][2]

3. **Result**—Individual result or amount of circulating IgE antibodies is measured for each of the allergens ordered.

4. **Cumulative effect**—Most atopic patients are polysensitized.[3] In these patients the sum of the individual sIgE antibody levels and the effects of exposures to multiple allergens may be additive or work together in triggering the inflammatory processes that lead to symptoms.[4]

ALLERGY TEST REPORT

Additional Considerations Regarding Allergen Specific IgE Test Results

- Allergy symptoms are the result of the cumulative impact of both allergic and non-allergic triggers, and clinical symptoms appear after the allergen load surpasses the patient's symptom threshold.[3,5]

- Allergic diseases usually present as various signs and symptoms, and they tend to evolve over time.[4] It has been noted as many as 87% of allergic rhinitis patients also have non-allergic rhinitis, and up to 40% have co-existing asthma.[6]

- Studies have demonstrated the diagnostic accuracy of differentiating symptom etiology on the basis of history and physical examination alone rarely exceeds 50%.[3]

- In cases in which history and physical examination suggest a reasonable probability of allergy and allergen specific IgE test results are negative, a thorough evaluation of the case history may be necessary.[3]

References
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4. Custovic A and Platts-Mills TAE. Managing allergy. Clinical Publishing. 2009
5. Wickman M. When allergies complicate allergies. Allergy 2005:60(Suppl79):14-18.
6. Wallace DV, Dykewicz, eds. The diagnosis and management of rhinitis: an updated practice parameter. *J Allergy Clin Immunol.* 2008;122:S1-84

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