

Results of AMAS® DETERMINATION

(Anti-Malignin Antibody in Serum, determined with Target® Reagent)



36 The Fenway, Boston, Ma 02215

2801772

Physician's Name: Dr. John Doe Fax Number _____
 Patient's Name: Jane Doe Determination Date 10/10/2007
 Lab Director: Dr. Tim Doe Technician: Steve Doe Fax Date _____

Component Results

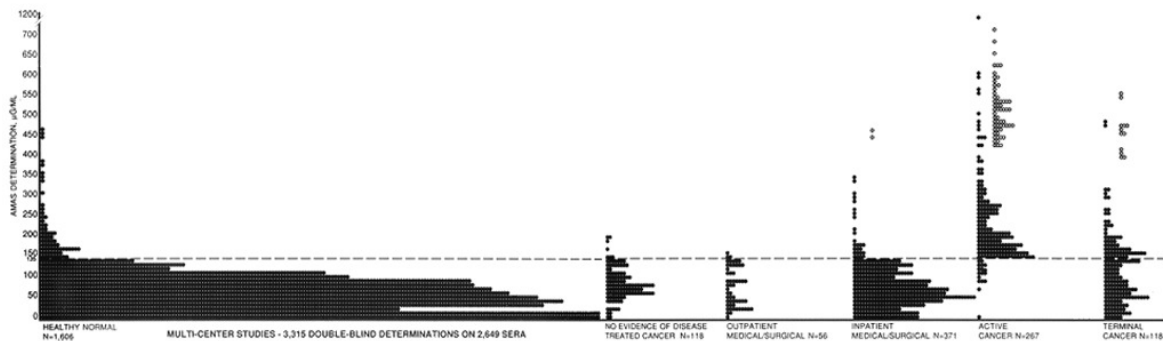
AMA ug/ml	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399			
135-299	213		
100-134			129
25-99		84	
0-24			

OVERALL RESULTS

<input type="checkbox"/>	ELEVATED Confirmatory repeat test recommended
<input checked="" type="checkbox"/>	BORDERLINE Confirmatory repeat test recommended
<input type="checkbox"/>	NORMAL Can also occur in successfully treated cancer patients with "no evidence of disease" and in advanced or terminal patients with antibody failure
<input type="checkbox"/>	INCONCLUSIVE Duplicates do not agree, or laboratory error; please repeat at Oncolab's expense

Notes: LIMITATIONS AND WARNINGS

(See References below) If repeat determinations agree, the false-positive and false negative rates are less than 1% (specificity greater than 99%); in single determination, false positives are 5% and false negative rates are 7% (3,315 double-blind tests of patients and controls, ref.4,6, and 8); AMAS antibody, determined in this test, tends to be detected earlier than antigens, and is of potential help in early detection. However, since antibody fails terminally the test cannot be used as a diagnostic aid late in the disease. The level of AMAS is quantitatively related to survival in known cancer patients; the higher the level of AMAS the longer the predicted survival. As in all clinical laboratory tests, the AMAS Test is not by itself diagnostic of the presence or absence of disease, and its results can only be assessed as an aid to diagnosis, detection or monitoring of disease in relation to the history, medical signs and symptoms and the overall condition of the patient.



References

1. National Cancer Institute Mon. 46:133-137,1977	14 Cancer Detection and Prevention 18(1)65-78,1994
2. Lancet 1 :987, 1979	15.J. Cell Biochem(NCI)19s:172-185,1994
3. Lancet 2: 1411-142, 1981	16.Advances Anti-Aging Med (N.Y. Liebert)pp. 109-125, 1995
4.J. Medicine 13:49-69	17. New York Academy of Science 757:413-417, 1995
5.Protides Biol. Fluids 30:337-352, 1983	18. American Association for Cancer Research 37:486-496, 1996
6.Protides of Biol Fluids 31:739-747,1984	19 Cancer Detection and Prevention 20(5) 508-509, 1996
7. Cancer Detection and Prevention 8 No. 5/6 551,1985	20. J. Adv. Med. 10 149-150, 1997
8. Cancer Detection and Prevention 11: No.1/2,1987	21 Cancer Detection and Prevention 22(1): S-159, 1998
9. Cancer Detection and Prevention 12 313-320,1988	22 Cancer Detection and Prevention 22(1): S-227, 1998
10. Proc. Annu Meet. Am Assoc. Cancer Res 31: A1550, 1990	23.Cancer Letters 148:39-48, 2000
11. Lancet 337:977,1991	24 Cancer Detection and Prevention 24(1): S-156, 2000
12 Cancer Detection and Prevention 17(1)229,1993	25 Cancer Detection and Prevention 24(1): S-162, 2000
13 Cancer Detection and Prevention 17(1)229,1993	