Results of AMAS® DETERMINATION
(Anti-Melanoma Antibody in Serum, determined with Target® Reagent)

Physician’s Name: Dr. John Doe
Patient’s Name: Jane Doe
Lab Director: Dr. Tim Doe

Component Results

<table>
<thead>
<tr>
<th>AMA ug/ml</th>
<th>S-TAG</th>
<th>F-TAG</th>
<th>Net TAG</th>
</tr>
</thead>
<tbody>
<tr>
<td>700-</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>500-699</td>
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<tr>
<td>400-499</td>
<td>498</td>
<td></td>
<td></td>
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<tr>
<td>300-399</td>
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<td>365</td>
<td></td>
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<tr>
<td>135-299</td>
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<td></td>
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<tr>
<td>100-134</td>
<td>133</td>
<td></td>
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<tr>
<td>25-99</td>
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<td></td>
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</tr>
<tr>
<td>0-24</td>
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</tbody>
</table>

OVERALL RESULTS

- **ELEVATED**
  - Confirmatory repeat test recommended

- **BORDERLINE**
  - Confirmatory repeat test recommended

- **NORMAL**
  - Can also occur in successfully treated cancer patients with “no evidence of disease” and in advanced or terminal patients with antibody failure

- **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 and sensitivity greater than 99%; in single determinant of patients and controls, ref.4,6, and 8); AMAS antibody, determined in this test, tends to be detected earlier than antigens, and is as a diagnostic aid late in the disease. The level of AMAS is quantitatively related to survival in known cancer patients; the higher the predicted survival. As in all clinical laboratory disease, and its results can only be assessed as an aid to diagnosis, detection or monitoring of disease in relation to the history, of the patient.

References
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