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Date of incubation: 12/11/2024
Lab number: CXXXX

Patient name: XXXXX XXXXX
Sent from: XXXXX animal clinic

Antigen	Intensity	Class	o	(+)	+	++	+++
Amphiphysin	2	o	<div></div>				
CV2	4	o	<div></div>				
PNMA2/Ta	1	o	<div></div>				
Ri	2	o	<div></div>				
Yo	38	++	<div></div>				
Hu	4	o	<div></div>				
Recoverin	4	o	<div></div>				
SOX1	0	o	<div></div>				
Titin	56	++	<div></div>				
Zic4	10	(+)	<div></div>				
GAD65	4	o	<div></div>				
Tr (DNER)	2	o	<div></div>				

Intensity	Class	Explanation
0 - 7	o	Negative
8 - 14	(+)	Borderline
15 - 35	+	Positive
36 - 70	++	Positive
71 - 255	+++	Strong positive

Signature: _____

Explanation of results for the Early Cancer Diagnostics test

Detected Antibody	Associated tumors	Associated diseases
	FT: Most frequent tumors OT: Other tumors	FS: Most frequent syndromes OS: Other syndromes
Anti-Amphiphysin	FT: mammary tumors, lung cancer OT: thymoma, lymphoma, intestinal tumors	FS: stiff dog syndrome OS: congenital myasthenic syndromes, polyneuropathy (autonomic, sensory, sensory-motor), encephalitis, opsoclonus-myoclonus syndrome, cerebellar ataxia
Anti-CV2	FT: lung cancer, thymoma, lymphoma OT: uterine tumors, prostate cancer, kidney cancers, intestinal tumors, mammary tumors, thyroid cancer, squamous cell carcinoma	FS: limbic encephalitis OS: cerebellar degeneration, polyneuropathy (autonomic, sensory, sensory-motor), retinopathy, uveitis, congenital myasthenic syndromes, chronic intestinal pseudo-obstruction, epilepsy, chorea, rhombencephalitis
Anti-PNMA2 (Ma2/Ta)	FT: testicular tumors OT: lung cancer, salivary gland adenocarcinoma, mammary tumors, ovarian tumors, intestinal tumors, kidney cancers, lymphoma	FS: rhombencephalitis, limbic encephalitis, brain stem encephalopathy OS: opsoclonus-myoclonus syndrome, cerebellar degeneration, epilepsy, retinopathy
Anti-Ri	FT: lung cancer, mammary tumors OT: lymphoma, brain tumors, bladder cancer, ovarian tumors, testicular tumors	FS: opsoclonus-myoclonus syndrome cerebellar ataxia OS: cerebellar degeneration, rhombencephalitis
Anti-Yo	FT: ovarian tumors, mammary tumors, uterine tumors OT: esophageal cancer, prostate cancer, gallbladder tumor, bladder cancer, lymphoma, thymoma, melanoma	FS: cerebellar degeneration OS: opsoclonus-myoclonus syndrome, cerebellar ataxia
Anti-Hu	FT: lung cancer, neuroblastoma OT: prostate cancer, bladder tumor, ovarian tumors, mammary tumors, pancreatic cancer, intestinal tumors	FS: encephalitis, polyneuropathy (autonomic, sensory, sensory-motor) OS: cerebellar degeneration, epilepsy, congenital myasthenic syndrome, retinopathy, chronic intestinal pseudo-obstruction

Detected Antibody	Associated tumors	Associated diseases
	FT: Most frequent tumors OT: Other tumors	FS: Most frequent syndromes OS: Other syndromes
Anti-Recoverin	FT: lung cancer, melanoma, mammary tumors, ovarian tumors, uterine tumors OT: intestinal tumors, kidney cancers, pancreatic cancer, prostate cancer, lymphoma, basal cell and squamous cell carcinomas	FS: retinopathy
Anti-SOX1	FT: lung cancer OT: thyroid cancer	FS: congenital myasthenic syndromes, cerebellar degeneration
Anti-Titin	FT: thymoma	FS: myasthenia gravis
Anti-Zic4	FT: lung cancer OT: ovarian tumors, mammary tumors, thyroid cancer, lymphoma	FS: cerebellar degeneration
Anti-GAD65*	FT: lung cancer, thymoma, mammary tumors, intestinal tumors, lymphoma, kidney cancers OT: uterine tumors, pancreatic cancer, multiple myeloma, testicular tumors	FS: stiff dog syndrome, cerebellar ataxia
Anti-Tr (DNER)	FT: lymphoma, mammary tumors, lung cancer, uterine tumors, brain tumors	FS: cerebellar degeneration

Results in the **borderline range (+)** should be evaluated as increased but negative and may need attention.

* Lower-Risk Antibody

Onconeural Antibodies Detected

Onconeural antibodies represent a special group of antibodies, which are associated with cancer and cancer-related Paraneoplastic Neurological syndromes (PNS). PNS are defined as neurological clinical syndromes that accompany malignant tumors. They are caused by tumor-released immunological mechanisms, which take their effect distally from the primary and/or metastatic tumor site.

Note that onconeural antibodies can be detected **with** or **without** a neurological syndrome and are specific for malignancy rather than for a particular neurological syndrome.

Detection of an onconeural antibody in a patient with or without neurological symptoms should lead to a prompt investigation for cancer.

Onconeural Antibodies Not Detected

The absence of detectable onconeural antibodies substantially decreases the possibility of cancer and Paraneoplastic Neurological syndromes for a tested patient but does not exclude the presence of **other type of tumors** not listed in this test.