

# STI Standard-5 Panel

Provider: Sex: Collected:
Patient: Date of Birth: Received:
Accession #: Completed:

Tests - DBSResultsFlagReference RangeHIV 1/2 Antigen/Antibody (4th Generation)NegativeNegativeSyphilis IgGNegativeNegative

Tests - UrineResultsFlagReference RangeChlamydia trachomatis DNANegativeNegativeNeisseria gonorrhoeae DNANegativeNegativeTrichomonas vaginalis DNANegativeNegative

## **About These Tests:**

#### HIV 1/2 Antigen-Antibody (EIA)

HIV 1/2 Antigen-Antibody is a primary screening test. A negative result is negative for all three components, HIV-1 antigen and HIV-1/HIV-2 antibodies.

A Positive HIV 1/2 Antigen-Antibody test should be followed up with a supplemental antibody test that differentiates HIV-1 antibodies from HIV-2 antibodies.

The limit of detection (LoD) for DBS HIV 1/2 Ag-Ab is 1/32 titer dilution. A negative HIV 1/2 Ag-Ab test result does not exclude the possibility of an exposure below the level of detection of this assay, as sometimes seen in early infection. If there is a possibility of a low level or early infection leading to a possible false negative antigen/antibody test, such as when recent exposure is suspected, consider testing for HIV-1/2 PCR, or follow-up testing at least 3 months after suspected exposure date with an Ag-Ab test.

# Treponema pallidum (Syphilis) Antibody (EIA)

Anti-treponemal (Syphilis) antibody testing has been shown to be an effective way to screen for infection with Treponema pallidum. Negative results indicate that Syphilis is unlikely. Because anti-treponemal antibodies persist after treated infection, guidelines recommend performing a non-treponemal (RPR) test to determine if the infection is current or past when the Syphilis antibody test result is positive. For follow-up testing on RPR, please submit a serum specimen.

The limit of detection (LoD) for DBS Syphilis antibody is 1 titer dilution. A negative Syphilis antibody test result does not exclude the possibility of exposure to T. pallidum (Syphilis) at a level below the detection limit of this assay, as sometimes seen in early infection. If there is a possibility of a low level or early infection leading to a false negative antibody test, such as when recent exposure is suspected, consider follow-up testing at least 6 weeks after suspected exposure date.

### **DBS Testing**

The result from a dried blood spot (DBS) specimen is an estimation of the result that an individual would have received from a venous blood specimen.

A DBS result can be affected by how the sample is collected, stored, and transported.

Thus, it is important to adhere to strict collection procedures and specimen stability windows.

The DBS tests are developed with analytical performance characteristics determined and validated by US BioTek Laboratories in pursuant of the CLIA regulations. These tests have not been cleared or approved by the U.S. Food and Drug Administration (FDA).

## **Health Information and Privacy**

US BioTek Laboratories is required to report positive results for Chlamydia, Gonorrhea, HIV, Syphilis, HBV, and HCV to public health authorities.

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