

Patient ID SA00550171	Patient Name SAMPLEREPORT, VEDOL	Birth Date 2008-08-08	Gender F	Age 10
Order Number SA00550171	Client Order Number SA00550171	Ordering Physician CLIENT,CLIENT	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 06 May 2019 08:00		

Vedolizumab QN, S
1 SDL

<2.0 mcg/mL
Low

For concentrations of vedolizumab less than or equal to 15.0 mcg/mL, reflex testing for antibodies-to-vedolizumab will be performed.

REFERENCE VALUE

Lower limit of quantitation = 2.0 mcg/mL

Received: 07 May 2019 14:10

Reported: 07 May 2019 14:32

Vedolizumab Ab, S
Vedolizumab Ab, S
SDL

9.8 ng/mL
High
**Reference Value
<9.8**
VEMAB Interpretation
1 SDL

Presence of antibody-to-vedolizumab detected.

Received: 07 May 2019 14:31

Reported: 07 May 2019 14:35

Laboratory Notes

- 1** This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Performing Site Legend

Code	Laboratory	Address
SDL	Mayo Clinic Laboratories - Rochester Superior Drive	3050 Superior Drive NW, Rochester MN 55901