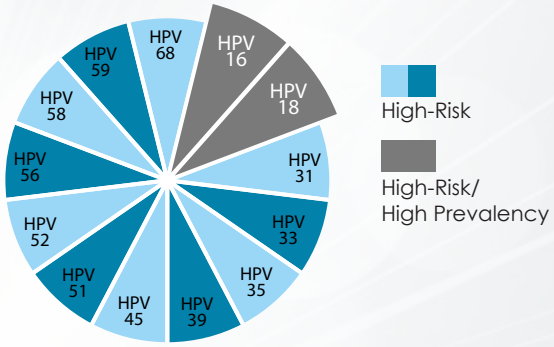
An Even Better Choice....

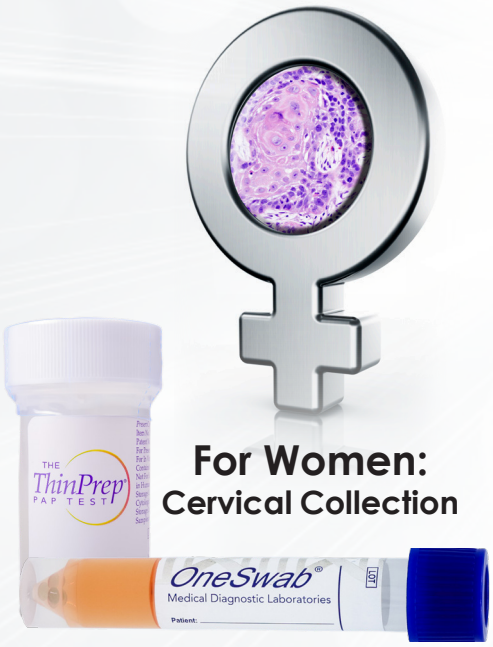
HPV Type-Detect 4.0® by Multiple Real-Time PCR

Simple & Convenient Specimen Collection

- Differentiates between 13 HR HPVs
- Determines patient's specific HPV type(s)
- Detects newly acquired HPV infections
- Detects multiple infections
- No cross-reaction with other HPV types
- Not affected by blood & excess mucus

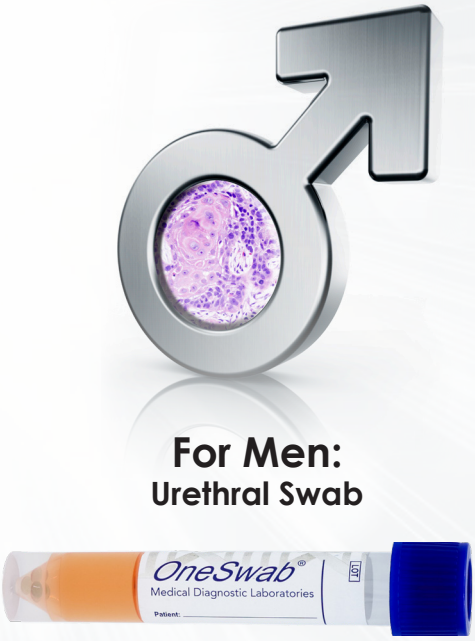
Classification of HPV Types





For Women:
Cervical Collection

The only test that offers type specific detection of 13 HPV types in a single vial



For Men:
Urethral Swab

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COLLEGE of AMERICAN PATHOLOGISTS

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A DIVISION OF GENESIS CLINICAL DIAGNOSTICS

IH0034 upd: 9_2023

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2439 KUSER ROAD
HAMILTON, NJ 08690-3303
TL: 609-570-1000 FX: 609-570-1050 TF: 877-269-0090
www.mdlab.com

Final

MDL#: 11833564

* Test Results

Patient Information:	**SSN:** N/A	**DOB:** 2/28/1976 (Age:45)	**Ordering Physician/Lab:**	**NPI:** 2121212121
DOE, JANE 123 LIBERTY DR WILLOWBROOK, FL 60527 Sex: Female			**JOHN DOE MD1** **JOHN DOE, MD** 21 QUAKERBRIDGE ROAD SUITE 200 DAYTON, NJ 08810 **Tel: (345) 262-7171** **Fax: (609) 245-7645**	

Patient ID: Date Received: **8/27/2021** Date Reported: **8/27/2021**

Test	Specimen	Date Collected / Comment	Results: Normal	Results: Abnormal	Reference/Units/Comments
HPV Type-Detect 4.0 by Real Time PCR High Risk Types Only 739 Verified 8/27/2021	* *Thin-Prep - 1*	8/26/2021 Cervical		**Detected**	**Types HPV: 16, 18, 31. See explanation below.**

*This test was developed and its performance characteristics determined by the laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary.

Thin-Prep-1;739:HPV Type-Detect 4.0 by Real Time PCR High Risk Types Only

HPV-16 is the most common type among cervical cancer cases. It accounts for about half of all cases of squamous cell carcinoma worldwide. It is also the second most prevalent type in patients with cervical adenocarcinomas. The presence of HPV-16 places a woman at 38 times the risk for the development of cervical cancer compared to those who are HPV negative. In accordance with ACOG recommendations, women with a negative cytology screen who test positive for HPV-16 should have another cytology screen, and HPV test in 6 to 12 months. The following were tested: High Risk: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, and 68.

Thin-Prep-1;739:HPV Type-Detect 4.0 by Real Time PCR High Risk Types Only

HPV-18 is the second most common type found in patients with cervical squamous cell carcinoma. It is the most prevalent type of infection in patients with cervical adenocarcinomas. In accordance with ACOG recommendations, women with a negative cytology screen who test positive for HPV-18 should have another cytology screen, and HPV test in 6 to 12 months. A vaccine that prevents persistent infection with this virus is now commercially available. The following were tested: High Risk: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, and 68.

Thin-Prep-1;739:HPV Type-Detect 4.0 by Real Time PCR High Risk Types Only

HPV-31 is the fourth most common type detected in patients with cervical squamous cell carcinoma. Occasionally it is found in mixed infections with other HPV types, notably HPV-16. In accordance with ACOG recommendations, women with a negative cytology screen who test positive for HPV-31 should have another cytology screen, and HPV test in 6 to 12 months. The following were tested: High Risk: 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, and 68.

A positive result is provided for bacteria, virus, parasites, and/or fungal species when PCR amplification (real-time PCR), sequence information (Pyrosequencing), and/or sequencing analysis occurs above cut-off levels established by the laboratory. Pertinent reference intervals for the tests reported above are available from the laboratory upon request.

View:	M				
Mail:	Ye s	USPS	Fax:	Yes	*Manual*
	Al l	Yes		All	No

Medical Director, Mats Sanden, M.D.

MDL#: 11833564 40979
9/16/2021
PATH Final