Molecular Testing Labs
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Phone: 360-693-8850
CLIA# 50D2050397
Laboratory Director: Dr. Charles Sailey

Laboratory Testing Results

Patient:	John Doe	Accession #:	EX0000000
DOB:	07/10/1988	Collection Date:	01/18/2020
Gender:	Male	Received Date:	01/19/2020
Provider:	Not Provided	Report Generated:	01/21/2020

Sample Type: Urine	**Result**	**Reference Value**
Chlamydia trachomatis (CT):	Not Detected	*Not Detected*
Neisseria gonorrhea (NG):	**Detected**	*Not Detected*

Sample Type: Oral Swab	**Result**	**Reference Value**
Chlamydia trachomatis (CT):	Not Detected	*Not Detected*
Neisseria gonorrhea (NG):	Not Detected	*Not Detected*

Sample Type: Anal Swab	**Result**	**Reference Value**
Chlamydia trachomatis (CT):	Not Detected	*Not Detected*
Neisseria gonorrhea (NG):	**Detected**	*Not Detected*

Molecular Testing Labs' at-home testing kit is >99% accurate. MTL recommends confirmatory testing with a different method for any positive result, or if an unexpected negative result is obtained. Any positive result should be taken to your primary care provider (or state health department) for further analysis and treatment options. If you have a positive result for any of the tests in this panel, the result should be viewed as a "presumptive positive" until a confirmatory test has been performed. A false negative result is possible if testing is performed too early after exposure, or within what is called the "window period." This is the period of time required for the body to produce antibodies after an exposure. For this reason, MTL recommends that testing be repeated after 2 months of obtaining a negative result following a high risk exposure. Other false negative results may be caused by improper specimen collection, concurrent antibiotic therapy, or the number of organisms in the specimen which may be below the detection sensitivity of the test.

***Chlamydia trachomatis* (CT):** Is run on the BD Viper ProbeTec CT Qx Amplified DNA Assay using Strand Displacement Amplification (SDA) technology for the direct, qualitative detection of *Chlamydia trachomatis* DNA in clinician-collected female endocervical specimens, vaginal swabs and male and female urine specimens; and/or the cobas® CT/NG Test, which is an in vitro nucleic acid amplification test that utilizes the Polymerase Chain Reaction and nucleic acid hybridization for the qualitative detection of *Chlamydia trachomatis* (CT) DNA to aid in the diagnosis of chlamydial disease; and/or the Aptima Combo 2 Assay, which is a target amplification nucleic acid probe test that utilizes target capture for the qualitative detection of ribosomal RNA from *Chlamydia trachomatis* (CT). *

***Neisseria gonorrhea* (NG):** Is run on the BD Viper ProbeTec GC Qx Amplified DNA Assay using Strand Displacement Amplification (SDA) technology for the direct, qualitative detection of Neisseria gonorrhea DNA in clinician-collected female endocervical specimens, vaginal swabs and male and female urine specimens; and/or the cobas® CT/NG Test, which is an in vitro nucleic acid amplification test that utilizes the Polymerase Chain Reaction and nucleic acid hybridization for the qualitative detection of Neisseria gonorrhea (NG) DNA to aid in the diagnosis of gonococcal disease; and/or the Aptima Combo 2 Assay, which is a target amplification nucleic acid probe test that utilizes target capture for the qualitative detection of ribosomal RNA from Neisseria gonorrhea (GC). *

* This test was developed and its performance characteristics determined by Molecular Testing Labs. This test 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. This laboratory is regulated under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity testing. Pursuant to the requirements of CLIA, this laboratory has established and verified this test's accuracy and precision.