In-Common Laboratories
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Client Name
Client Address 1
Client Address 2 City, Province,
Postal Code,
Country

Patient Name	Sex	Date of Birth (mm/dd/yyyy)
TEST, SAMPLE	**U**	**MM/DD/YYYY**

Order ID
1234567890

Client File No:

Report Copied To:

Health Number
XXXXXXXXXJP

Report Printed
02/07/2024 10:35AM

ICL Login Date (mm/dd/yyyy)
MM/DD/YYYY HH:MM AM

Authorized Requester
Doctor, ICL, MD

Neurofilament Light Chain (NfL), Serum

Sample ID:

Status MM/DD/YYYY HH:MM AM

Collection Date/Time (mm/dd/yyyy)
MM/DD/YYYY HH:MM AM

TEST	RESULT	FLAG	NORMAL/THERAPEUTIC RANGE	UNITS	TEST SITE
Neurofilament Light Chain	8.8	H	<=8.5	pg/mL	GENERAL

Analysis performed by SIMOA using Quanterix Nf-light Advantage assay.
NfL is a biomarker of neuraxonal damage and disease activity and is associated with clinical and MRI outcomes in Multiple Sclerosis patients. High or increasing values are suggestive of increased neurodegeneration and increased risk of progression. Normalized or decreasing values are suggestive of a better prognosis and/or effective treatment. In a cohort of patients tested within 5 years of MS onset, NfL <7.6 pg/mL was 50% sensitive and 89% specific for identifying patients 4.7 times less likely to reach EDSS >4. NfL >15.6 pg/mL were 84% sensitive and 29% specific for progression to EDSS >4 in 15 years. A change in NfL values >30% is beyond the analytical variation and is suggestive of clinically relevant increase/decrease in NfL results. This test has been validated for clinical use.

Reference intervals (95%ile) determined using BMI = 27.2 kg/m^2 from Benkert et al. (The Lancet Neurology. 21 (2022) 246-257)

Reporting Laboratories:
(1) ATL-EORLA, GENERAL: The Ottawa Hospital General Campus, 501 Smyth Road, Ottawa, ON K1H 8L6,

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