

Rheumatoid Factor Test Report

Medical Institution Details

Name:

Address:

Phone Number:

Website:

Patient Details

Full Name:

Date of Birth:

Gender:

Patient ID:

Contact Number:

Email Address:

Referred by Dr./Physician:

Test Details

Date Sample Collected:

Date of Analysis:

Lab Technician:

Lab ID or Location:

Symptoms Reported by Patient

- Joint pain: _____ (Yes/No)
- Morning stiffness: _____ (Yes/No)
- Joint swelling: _____ (Yes/No)
- Fatigue: _____ (Yes/No)
- Fever: _____ (Yes/No)
- Other symptoms: _____

Rheumatoid Factor Test Results

Parameter	Result	Reference Range
RF (IU/mL)		Typically <14 IU/mL

Interpretation

- **Negative (<14 IU/mL):** No significant levels of rheumatoid factor detected.
- **Low Positive (14-25 IU/mL):** Low levels of rheumatoid factor detected. Further evaluation may be needed.
- **Moderate Positive (26-50 IU/mL):** Moderate levels of rheumatoid factor detected. Indicates a higher likelihood of rheumatoid arthritis or another autoimmune condition.
- **High Positive (>50 IU/mL):** High levels of rheumatoid factor detected. Strongly indicates rheumatoid arthritis or another autoimmune condition.

Recommendations & Physician's Notes

Next Steps or Follow-Up

Physician's Signature: _____ Date: _____

Note: A positive RF test does not confirm a diagnosis of rheumatoid arthritis. Other tests and clinical evaluations are necessary for a definitive diagnosis. Always consult with a healthcare professional regarding any concerns or changes in treatment.