New Test: 3001277  Myelin Oligodendrocyte Glycoprotein (MOG) Antibody, IgG by IFA with Reflex to Titer, Serum

Additional Technical Information

Methodology: Semi-Quantitative Indirect Fluorescent Antibody
Performed: Wed
Reported: 1-8 days

Specimen Required: Collect: Serum Separator Tube (SST) or Plain Red.
Specimen Preparation: Transfer 1 mL serum to an ARUP Standard Transport Tube. (Min: 0.15 mL)
Storage/Transport Temperature: Refrigerated.
Unacceptable Conditions: Hemolyzed, contaminated, or severely lipemic specimens.
Stability (collection to initiation of testing): Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month

Reference Interval: Less than 1:10

Interpretive Data: Myelin oligodendrocyte glycoprotein (MOG) antibody is found in a subset of patients with neuromyelitis optica spectrum disorders, including optic neuritis and transverse myelitis, brainstem encephalitis, and acute disseminated encephalomyelitis. Persistence of antibody positivity may be associated with a relapsing course. Decreasing antibody levels may be associated with therapeutic response; therefore, clinical correlation must be strongly considered. A negative test result does not rule out a diagnosis of CNS demyelinating disease or autoimmune encephalitis.

This indirect fluorescent antibody assay utilizes full-length MOG transfected cell lines for the detection and semi-quantification of MOG IgG antibody.

See Compliance Statement D: www.aruplab.com/CS

Note: If Myelin Oligodendrocyte Glycoprotein (MOG) Antibody, IgG by IFA with Reflex to Titer, Serum is positive, then a Myelin Oligodendrocyte Glycoprotein (MOG) Antibody Titer, IgG is performed. Additional charges apply.

CPT Code(s): 86255; if reflexed, add 86256

New York DOH approval pending. Call for status update.

HOTLINE NOTE: Refer to the Test Mix Addendum for interface build information.