

TEST CHANGE

Cytomegalovirus Antibody, IgG

0050165, CMV IGG

Specimen Requirements:

Patient Preparation:

Collect: Serum Separator Tube (SST).

Specimen Preparation: Allow specimen to clot completely at room temperature. Separate from cells ASAP or within 2 hours of collection. Transfer 1 mL serum to an ARUP **standard transport tube**. ~~Standard Transport Tube~~. (Min: 0.5 mL) Parallel testing is preferred and convalescent specimens must be received within 30 days from receipt of the acute specimens.

Transport Temperature: Refrigerated.

Unacceptable Conditions: Contaminated, heat-inactivated, **icteric**, or grossly hemolyzed specimens.

Remarks: Label specimens plainly as "acute" or "convalescent."

Stability: After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year (Avoid repeated freeze/thaw cycles)

Methodology: Semi-Quantitative Chemiluminescent Immunoassay (**CLIA**)

Performed: Sun-Sat

Reported: Within 24 hours

Note:

CPT Codes: 86644

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

In immunocompromised patients, CMV serology (IgG or IgM antibody titers) may not be reliable and may be misleading in the diagnosis of acute or reactivation CMV disease. The preferred method for diagnosis is culture of virus and/or demonstration of viral antigen in peripheral white cells (buffy coat), bronchoalveolar lavage (BAL) cells, or tissue biopsies.

This test should not be used for blood donor screening, associated re-entry protocols, or for screening **human cell, tissues**. ~~Human Cell, Tissues~~ and ~~cCellular~~ and **tissue-based products**. ~~Tissue-Based Products~~ (HCT/P).

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Reference Interval:

0.59 U/mL or less:	Not Detected.
0.60-0.69 U/mL:	Indeterminate - Repeat testing in 10-14 days may be helpful.
0.70 U/mL or greater:	Detected.