

TEST CHANGE

Rickettsia typhi (Typhus Fever) Antibody, IgG by IFA

0050381, TYPHU G

Specimen Requirements:

Patient Preparation:

Collect: Serum Separator Tube (SST).

Specimen Preparation: Separate from cells ASAP or within 2 hours of collection. Transfer 1 mL serum to an ARUP [standard transport tube](#). ~~Standard Transport Tube~~. (Min: 0.43 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, hemolyzed, or severely lipemic specimens.

Remarks: Mark 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 Indirect Fluorescent Antibody [\(IFA\)](#)

Performed: Sun-Sat

Reported: 1-3 days

Note:

CPT Codes: 86757

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

Interpretive Data:

Antibody reactivity to *Rickettsia typhi* antigen should be considered group-reactive for the Typhus Fever group, which includes *Rickettsia prowazekii*.

Seroconversion between acute and convalescent sera is considered strong evidence of recent infection. The best evidence for infection is a significant change (fourfold difference in titer) on two appropriately timed specimens, where both tests are done in the same laboratory at the same time. Acute-phase specimens are collected during the first week of illness and convalescent-phase samples are generally obtained 2-4 weeks after resolution of illness. Ideally these samples should be tested simultaneously at the same facility. If the sample submitted was collected during the acute phase of illness, submit a marked convalescent sample within 25 days for paired testing.

Reference Interval:

Less than 1:64	Negative - No significant level of IgG antibody detected.
1:64-1:128	Equivocal - Questionable presence of IgG antibody detected. Repeat testing in 10-14 days may be helpful.
1:256 or greater	Positive - Presence of IgG antibody detected, suggestive of current or past infection.