TEST CHANGE

Cytomegalovirus Antibody, IgM

0050553, CMV IGM

Specimen Requirements:	
Patient Preparation:	
Collect:	Serum separator tube~~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. (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:	86645
New York DOH Approval Status:	This test is New York DOH approved.

Interpretive Data:

A negative result does not rule out primary infection, please correlate clinically. CMV serology is not useful for the evaluation of active or reactivated infection in immunocompromised patients. Molecular diagnostic tests (i.e., PCR) are preferred in these cases.

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

Reference Interval:

29.9 AU/mL or less:	Not Detected.
30.0-34.9 AU/mL:	Indeterminate - Repeat testing in 10-14 days may be helpful.
35.0 AU/mL or greater:	Detected - IgM antibody to CMV detected, which may indicate a current or recent infection. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.