

TEST CHANGE

Toxoplasma gondii Antibody, IgM

0050557, TOXEIGM

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: 86778

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

Interpretive Data:

This test is performed using the DiaSorin LIAISON. As suggested by the CDC, any indeterminate or detected *Toxoplasma gondii* IgM result should be retested in parallel with a specimen collected 1-3 weeks later. Further confirmation may be necessary using a different test from another reference laboratory specializing in toxoplasmosis testing where an IgM ELISA should be ordered. Caution should be exercised in the use of IgM antibody levels in prenatal screening. Any *Toxoplasma gondii* IgM in pregnant patients that have also been confirmed by a second reference laboratory should be evaluated by amniocentesis and PCR testing for *Toxoplasma gondii*.

For male and **nonpregnant**~~non-pregnant~~ female patients with indeterminate or detected

Toxoplasma gondii IgM results, PCR may also be useful if a specimen can be collected from an affected body site.

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).

For additional information, refer to the CDC website:
www.cdc.gov/parasites/toxoplasmosis/health_professionals/index.html.

The magnitude of the measured result is not indicative of the amount of antibody present.

Reference Interval:

7.9 AU/mL or less:	Not Detected.
8.0-9.9 AU/mL:	Indeterminate - Repeat testing in 10-14 days may be helpful.
10.0 AU/mL or greater:	Detected - Significant level of <i>Toxoplasma gondii</i> IgM antibody detected and may indicate a current or recent infection. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.