

**TEST CHANGE**

**Streptococcus pneumoniae Antibodies, IgG (14 Serotypes)**

0050725, PNEUMO AB

**Specimen Requirements:**

**Patient Preparation:**

**Collect:** Serum separator tube. ~~Postimmunization~~~~Post-immunization~~ specimen should be drawn 30 days after immunization and, if shipped separately, must be received within 60 days of ~~preimmunization~~~~pre-immunization~~ specimen.

**Specimen Preparation:** Separate serum from cells ASAP or within 2 hours of collection. Transfer 1.5 mL serum to an ARUP ~~standard transport tube~~~~Standard Transport Tube~~. (Min: 0.25 mL) MARK SPECIMENS CLEARLY AS "PRE" OR "POST" SO SPECIMENS WILL BE SAVED AND TESTED SIMULTANEOUSLY.

**Transport Temperature:** Refrigerated.

**Unacceptable Conditions:** Plasma or other body fluids. Contaminated, hemolyzed, or severely lipemic specimens.

**Remarks:**

**Stability:** After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: ~~60 days~~~~1-year~~ (avoid repeated freeze/thaw cycles)

**Methodology:** Quantitative Multiplex ~~Chemiluminescent Immunoassay~~~~Bead Assay~~

**Performed:** Sun-Sat

**Reported:** 1-3 days

**Note:**

**CPT Codes:** 86317 x14

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

**Interpretive Data:**

A pre- and postvaccination comparison is required to adequately assess the humoral immune response to the pure polysaccharide Pneumovax 23 (PNX) and/or the protein conjugated Prevnar 7 (P7), Prevnar 13 (P13), Prevnar 20 (P20), and Vaxneuvance (V15) *Streptococcus pneumoniae* vaccines. Prevacination samples should be collected prior to vaccine administration. Postvaccination samples should be obtained at least 4 weeks after immunization. Testing of ~~postvaccination~~~~post-vaccination~~ samples alone will provide only general immune status of the

individual to various pneumococcal serotypes.

In the case of pure polysaccharide vaccine, indication of immune system competence is further delineated as an adequate response to at least 50 percent of the serotypes in the vaccine challenge for those 2-5 years of age and to at least 70 percent of the serotypes in the vaccine challenge for those 6-65 years of age. Individual immune response may vary based on age, past exposure, immunocompetence, and pneumococcal serotype.

Responder Status

Antibody Ratio

~~Nonresponder . . . . . Non-Responder . . . . .~~ Less than ~~twofold increase and postvaccination concentration less~~ 2-fold  
~~Weak Responder . . . . .~~ 2-fold to 4-fold  
~~Good Responder . . . . .~~ Greater than 1.3 ug/mL

~~Good responder . . . . .~~ At least a twofold increase and/or a postvaccination concentration greater than or equal to 1.3 ug/mL ~~4-fold~~

A response to 50-70 percent or more of the serotypes in the vaccine challenge is considered a normal humoral ~~response. (Daly, 2014)~~ response1. Antibody concentration greater than 1.0-~~1.3~~ ug/g/mL is generally considered long-term ~~protection. (Daly, 2015)~~ protection2.

References:

1. Daly TM, Pickering JW, Zhang X, et al. Multilaboratory assessment of threshold versus fold-change algorithms for minimizing analytical variability in multiplexed pneumococcal IgG measurements. *Clin Vaccine Immunol*. 2014;21(7):982-988.
2. Daly TM, Hill HR. Use and ~~clinical interpretation~~ Clinical Interpretation of ~~pneumococcal antibody measurements~~ Pneumococcal Antibody Measurements in the ~~e~~ Evaluation of humoral immune function. *Clin Vaccine Immunol*. 2015;22(2):148-152.

Reference Interval: