TEST CHANGE

# Liver-Kidney Microsome Antibody, IgG

0099270, LIVER-KID

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| Specimen Requirements: | |
| Patient Preparation: | |
| Collect: | Serum separator tube. |
| Specimen Preparation: | Transfer 1 mL serum to an ARUP Standard Transport Tube. (Min: 0.15 mL) |
| Transport Temperature: | Refrigerated. |
| Unacceptable Conditions: | Severely hemolyzed or lipemic specimens. |
| Remarks: | |
| Stability: | After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month.~~year (avoid repeated freeze/thaw cycles)~~ |
| Methodology: | Semi-Quantitative Indirect Fluorescent Antibody |
| Performed: | Mon-Sat |
| Reported: | 1-3 days |
| Note: | |
| CPT Codes: | 86376 |
| New York DOH Approval Status: | This test is New York DOH approved. |

Interpretive Data:

Liver-Kidney Microsome IgG antibody (anti-LKM), as detected by indirect immunofluorescent antibody (IFA) techniques, may be observed in patients with autoimmune hepatitis type 2 (AIH-2), AIH-2 associated with autoimmune polyendocrinopathy-candidiasis-ectodermal dystrophy (APECED), viral hepatitis C or D, and some forms of drug-induced hepatitis. This IFA does not differentiate among the four types of LKM antibodies (LKM-1, LKM-2, LKM-3, and a fourth type that recognizes CYP1A2 and CYP2A6 antigens). Of these, anti-LKM-1 (cytochrome P450IID6) IgG antibodies are considered specific for AIH-2.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Reference Interval:

Less than 1:20 Normal