

TEST CHANGE

Echinococcus Antibody, IgG

2007220, ECHINO IGG

Specimen Requirements:

Patient Preparation:

Collect: Serum separator tube (SST) or plain red.

Specimen Preparation: Separate serum from cells ASAP or within 2 hours of collection. Transfer 1 mL serum to an ARUP standard transport tube. (Min: 0.15 mL) Parallel testing is preferred and convalescent specimens must be received within 30 days from receipt of acute specimens. Mark specimens plainly as acute or convalescent.

Transport Temperature: Preferred transport temp: Refrigerated. Also acceptable: Frozen

Unacceptable Conditions: Contaminated, heat-inactivated, grossly hemolyzed, or severely lipemic specimens.

Remarks:

Stability: After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month (avoid repeated freeze/thaw cycles)

Methodology: Semi-Quantitative Enzyme-Linked Immunosorbent Assay (ELISA)

Performed: ~~Tue~~ ~~Mon~~, ~~Thu~~

Reported: 1-~~8~~5 days

Note:

CPT Codes: 86682

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

Interpretive Data:

Patients with collagen vascular diseases, hepatic cirrhosis, schistosomiasis, and other parasitic infections can produce false-positive results. There is a strong cross-reaction between echinococcosis- and cysticercosis-positive sera.

Seroconversion between acute and convalescent sera is considered strong evidence of recent infection. The best evidence for infection is a significant change on two appropriately timed specimens where both tests are done in the same laboratory at the same time.

Component	Interpretation
Echinococcus Antibody IgG	<p>0-8</p> <p>U.....Negative: No significant level of Echinococcus IgG antibodies detected. 9-11</p> <p>U.....Equivocal: Recommend repeat testing in 2-4 weeks with fresh sample. 12 U or greater.....Positive: IgG antibodies to Echinococcus detected, indicating current or past infection.</p>

Reference Interval:

Test Number	Components	Reference Interval
	Echinococcus Antibody IgG	8 U or less