

TEST CHANGE

Occupation Screen - MMR/VZV Antibody Assessment Panel, IgG

2011375, MMRV PAN

Specimen Requirements:

Patient Preparation:

Collect: Serum separator tube.

Specimen Preparation: Separate serum from cells ASAP or within 2 hours of collection. Transfer 1.0 mL serum to an ARUP [standard transport tube](#). ~~Standard Transport Tube~~. (Min: 0.5 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Body fluid, CSF, plasma or urine specimens. Contaminated, heat-inactivated, hemolyzed, lipemic, or severely icteric specimens.

Remarks:

Stability: After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year

Methodology: Semi-Quantitative Chemiluminescent Immunoassay

Performed: Sun-Sat

Reported: Within 24 hours

Note:

CPT Codes: 86765; 86735; 86762; 86787

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

Interpretive Data:

Reference Interval:

Test Number	Components	Reference Interval
	Measles Virus (Rubeola) Antibody IgG	13.4 AU/mL or less: Negative - No significant level of detectable measles (rubeola) IgG antibody. 13.5-16.4 AU/mL: Equivocal - Repeat testing in 10-14 days may be helpful. 16.5 AU/mL or greater: Positive - IgG antibody to measles (rubeola) detected, which may

		indicate a current or past exposure/immunization to measles (rubeola).
	Mumps Virus Antibody IgG	8.9 AU/mL or less: Negative - No significant level of detectable IgG mumps virus antibody. 9.0-10.9 AU/mL: Equivocal - Repeat testing in 10-14 days may be helpful. 11.0 AU/mL or greater: Positive - IgG antibody to mumps virus detected, which may indicate a current or past exposure/immunization to mumps virus.
	Rubella Virus Antibody IgG	Less than 9 IU/mL: Not Detected. 9-9.9 IU/mL: Indeterminate - Repeat testing in 10-14 days may be helpful. 10 IU/mL or greater: Detected.
	Varicella-zoster Virus Ab IgG	0-134.9 S/COIV or less: Negative - No significant level of detectable varicella-zoster IgG antibody. <u>1</u> 135.0-164.9 IU: Equivocal - Repeat testing in 10-14 days may be helpful. 165.0 S/COIV or greater: Positive - IgG antibody to varicella-zoster detected, which may indicate a current or past varicella-zoster infection.

HOTLINE NOTE: There is a numeric map change associated with this test. Refer to the Hotline Test Mix for interface build information.

HOTLINE NOTE: There is a unit of measure change associated with this test. Refer to the Hotline Test Mix for interface build information.