

**TEST CHANGE**

Aquaporin-4 Antibody, IgG by CBA-IFA, CSF with Reflex to Titer

2011699, AQP4 CSF

Specimen Requirements:

Patient Preparation:

Collect: CSF.

Specimen Preparation: Transfer 0.5 mL CSF to an ARUP [standard transport tube](#). ~~Standard Transport Tube~~. (Min: 0.15 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Hemolyzed, contaminated specimens or severely lipemic specimens.

Remarks:

Stability: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year

Methodology: Semi-Quantitative Cell-Based Indirect Fluorescent Antibody

Performed: Mon, Wed, Fri

Reported: 1-6 days

Note: If AQP4 antibody IgG is positive, then an AQP4 antibody IgG titer is reported. Additional charges apply.

CPT Codes: 86052; if reflexed, add 86256

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

Interpretive Data:

~~Neuromyelitis optic~~[Diagnosis of neuromyelitis-optica](#) (NMO) [commonly presents with optic neuritis or requires the presence of longitudinally extensive transverse acute myelitis \(lesions extending over 3 or more vertebral segments\) and optic neuritis](#). Approximately 75% ~~percent~~ of patients with NMO ~~have express~~ antibodies to the aquaporin-4 (AQP4) receptor. While the absence of AQP4 receptor antibodies does not rule out a diagnosis of NMO, presence of this antibody is diagnostic for NMO.

[This indirect fluorescent antibody assay utilizes AQP4 receptor transfected cell lines for the detection and semiquantification of AQP4 IgG antibody.](#)

~~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 1:1

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