TEST CHANGE

CV2.1 Antibody, IgG~~Screen~~ by CBA-IFA with Reflex to Titer, Serum

2013956, CV2.1 SCRN

Specimen Requirements:	
Patient Preparation:	
Collect:	Serum separator tube~~Separator Tube~~ (SST) or plain red~~Plain Red~~
Specimen Preparation:	Transfer 1 mL serum to an ARUP standard transport tube.~~Standard Transport Tube.~~ (Min: 0.25 mL)
Transport Temperature:	Refrigerated
Unacceptable Conditions:	Hemolyzed, contaminated, or severely lipemic specimens
Remarks:	
Stability:	Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year
Methodology:	Semi-Quantitative Cell-Based Indirect Fluorescent Antibody
Performed:	Thu
Reported:	1-8 days
Note:	If CV2.1 Antibody IgG Screen by IFA is positive, then CV2.1 Antibody IgG Titer by IFA will be added. Additional charges apply.
CPT Codes:	86255; if reflexed, add 86256
New York DOH Approval Status:	This test is New York DOH approved.

Interpretive Data:

CV2.1 antibodies aid in discriminating between chronic paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-CV2.1 is associated with small-cell lung cancer and thymoma. A negative test result does not rule out a diagnosis of autoimmune neurologic disease. Results should be interpreted in correlation with the patient's clinical history and other laboratory findings.

This indirect fluorescent antibody assay utilizes CV2.1 transfected cell lines for the detection and semiquantification of the CV2.1 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:

Test Number	Components	Reference Interval
	CV2.1 Ab~~Antibody~~ IgG CBA-IFA Screen, Serum ~~by IFA~~	Less than 1:10