

TEST CHANGE

Antinuclear Antibody (ANA) with HEp-2 Substrate, IgG by IFA

3000082, ANA IFA AB

Specimen Requirements:

Patient Preparation:

Collect: Serum ~~separator tube~~ Separator Tube (SST).

Specimen Preparation: Separate from cells ASAP or within 2 hours of collection. Transfer 1 mL serum to an ARUP ~~standard transport tube~~ Standard Transport Tube. (Min: 0.15 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Plasma. Contaminated, hemolyzed, or severely 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 (IFA)

Performed: Sun-Sat

Reported: 1-3 days

Note: ANA identified by indirect fluorescence assay (IFA) using HEp-2 substrate and IgG-specific conjugate at a screening dilution of 1:80. Positive nuclear patterns reported include homogeneous, speckled, centromere, nucleolar, or nuclear dots. Positive cytoplasmic patterns reported include reticular/AMA, discrete/GW body-like, polar/golgi-like, rods and rings, or cytoplasmic speckled patterns. All positive results are reported with endpoint titers at no additional charge.

CPT Codes: 86039

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

Interpretive Data:

Presence of antinuclear antibodies (ANA) is a hallmark feature of systemic autoimmune rheumatic diseases (SARD). However, ANA lacks diagnostic specificity and is associated with a variety of diseases (cancers, autoimmune, infectious, and inflammatory conditions) and may also occur in healthy individuals in varying prevalence. The lack of diagnostic specificity requires confirmation

of positive ANA by more specific serologic tests. ANA (nuclear reactivity) positive patterns reported include centromere, homogeneous, nuclear dots, nucleolar, or speckled. ANA (cytoplasmic reactivity) positive patterns reported include reticular/AMA, discrete/GW body-like, polar/golgi-like, cytoplasmic speckled or rods and rings. All positive patterns are reported to endpoint titers (1:2560). Reported patterns may help guide differential diagnosis, although they may not be specific for individual antibodies or diseases. Mitotic staining patterns not reported. Negative results do not necessarily rule out SARD.

Reference Interval:

Less than 1:80
