

## Quarterly HOTLINE: Effective February 19, 2019

**New Test** 

3001277

Myelin Oligodendrocyte Glycoprotein (MOG) Antibody, IgG by

**MOG SER** 

IFA with Reflex to Titer, Serum



Additional Technical Information

Methodology: Semi-Quantitative Indirect Fluorescent Antibody

**Performed:** Wed **Reported:** 1-8 days

Specimen Required: Collect: Serum Separator Tube (SST) or Plain Red.

Specimen Preparation: Transfer 1 mL serum to an ARUP Standard Transport Tube. (Min: 0.15 mL)

Storage/Transport Temperature: Refrigerated.

<u>Unacceptable Conditions:</u> Hemolyzed, contaminated, or severely lipemic specimens.

Stability (collection to initiation of testing): Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month

Reference Interval: Less than 1:10

**Interpretive Data:** Myelin oligodendrocyte glycoprotein (MOG) antibody is found in a subset of patients with neuromyelitis optica spectrum disorders, including optic neuritis and transverse myelitis, brainstem encephalitis, and acute disseminated encephalomyelitis. Persistence of antibody positivity may be associated with a relapsing course. Decreasing antibody levels may be associated with therapeutic response; therefore, clinical correlation must be strongly considered. A negative test result does not rule out a diagnosis of CNS demyelinating disease or autoimmune encephalitis.

This indirect fluorescent antibody assay utilizes full-length MOG transfected cell lines for the detection and semi-quantification of MOG IgG antibody.

See Compliance Statement D: www.aruplab.com/CS

**Note:** If Myelin Oligodendrocyte Glycoprotein (MOG) Antibody, IgG by IFA with Reflex to Titer, Serum is positive, then a Myelin Oligodendrocyte Glycoprotein (MOG) Antibody Titer, IgG is performed. Additional charges apply.

**CPT Code(s):** 86255; if reflexed, add 86256

New York DOH approval pending. Call for status update.

**HOTLINE NOTE:** Refer to the Test Mix Addendum for interface build information.