

**TEST CHANGE**

**Autoimmune CNS Demyelinating Disease Reflexive Panel**

3001283, CNS PAN

**Specimen Requirements:**

**Patient Preparation:**

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

**Specimen Preparation:** ~~Separate from cells ASAP or within 2 hours of collection.~~  
Transfer ~~4~~ **1** mL ~~serum to an~~ ARUP **standard transport tube**. ~~Standard Transport Tube.~~ (Min: ~~0.3~~ **3** mL)

**Transport Temperature:** Refrigerated.

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

**Remarks:**

**Stability:** After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month (avoid repeated freeze/thaw cycles)

**Methodology:** Semi-Quantitative Cell-Based Indirect Fluorescent Antibody

**Note:** If Aquaporin-4 Receptor Antibody, IgG by IFA with Reflex to Titer, Serum is positive, then an Aquaporin-4 Receptor Antibody, IgG by IFA, Serum Titer will be added. 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 will be added. Additional charges apply.

**CPT Codes:** 86362; 86052; if reflexed, add 86256 x2

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

**Interpretive Data:**

~~Refer to report.~~ **Refer to report.**

~~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
	MOG Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	NMO/AQP4 Ab IgG CBA-IFA Screen, Serum	Less than 1:10