

HOTLINE: Effective February 19, 2019





Additional Technical Information

Methodology:	Quantitative Radioimmunoassay
Performed:	Mon, Thu
Reported:	1-8 days

Specimen Required: Collect: CSF.

<u>Specimen Preparation:</u> Transfer 4 mL CSF to an ARUP Standard Transport Tube. (Min: 0.5 mL) <u>Storage/Transport Temperature:</u> Refrigerated. <u>Unacceptable Conditions:</u> Plasma. Grossly lipemic or icteric specimens. <u>Stability (collection to initiation of testing):</u> Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month (avoid repeated freeze/thaw cycles)

Reference Interval:

Negative	0.0-1.1 pmol/L
Positive	1.2 pmol/L or greater

Interpretive Data: Voltage-Gated Potassium Channel (VGKC) antibodies are associated with neuromuscular weakness as found in neuromyotonia (also known as Issacs syndrome) and Morvan syndrome. VGKC antibodies are also associated with paraneoplastic neurological syndromes and limbic encephalitis; however, VGKC antibody-associated limbic encephalitis may be associated with antibodies to leucine-rich, glioma-inactivated 1 protein (Lgi1) or contactin-associated protein-2 (Caspr-2) instead of potassium channel antigens. The clinical significance of this test can only be determined in conjunction with the patient's clinical history and related laboratory testing.

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

Note:

CPT Code(s): 83519

New York DOH approval pending. Call for status update.

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