

**TEST CHANGE**

CV2.1 **Antibody, IgG** Screen by CBA-IFA with Reflex to Titer, CSF  
3002257, CV2.1 CSF

**Specimen Requirements:**

**Patient Preparation:**

**Collect:** CSF.

**Specimen Preparation:** Transfer 0.5 mL CSF to an ARUP **standard transport tube**. ~~Standard Transport Tube~~. (Min: 0.15 mL)

**Transport Temperature:** Refrigerated.

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

**Remarks:**

**Stability:** Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 month

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

**Performed:** Thu

**Reported:** 1-8 days

**Note:** If CV2.1 Antibody IgG Screen by IFA, CSF is positive, then CV2.1 Antibody IgG Titer, CSF 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.**

**Reference Interval:**

Less than 1:1



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and its Department of Pathology*

Effective Date: **August 21, 2023**