

**New Test**      **3003017**      **Autoimmune Neuromuscular Junction Reflexive Panel**      **MUWA R2**



Additional Technical Information



Supplemental Resources

**Methodology:** Quantitative Radioimmunoassay/Qualitative Radiobinding Assay/Semi-Quantitative Flow Cytometry/Semi-Quantitative Indirect Fluorescent Antibody  
**Performed:** Refer to individual components  
**Reported:** 2-8 days

**Specimen Required:** Collect: Serum separator tube (SST).  
Specimen Preparation: Separate serum from cells ASAP or within 2 hours of collection. Transport 2 mL serum. (Min: 1 mL)  
Storage/Transport Temperature: Refrigerated.  
Unacceptable Conditions: Plasma. Contaminated, hemolyzed, or severely lipemic specimens.  
Stability (collection to initiation of testing): Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year

**Reference Interval:**

Test Number	Components	Reference Interval	
0080009	Acetylcholine Receptor Binding Antibody	Negative	0.0-0.4 nmol/L
		Positive	0.5 nmol/L or greater
0099580	Acetylcholine Receptor Blocking Antibody	Negative:	0-26 percent blocking
		Indeterminate:	27-41 percent blocking
		Positive:	42 percent or greater blocking
0099521	Acetylcholine Receptor Modulating Antibody	Negative	0-45 percent modulating
		Positive	46 percent or greater modulating
0092628	P/Q-Type Voltage-Gated Calcium Channel (VGCC) Antibody	Negative	0.0 to 24.5 pmol/L
		Indeterminate	24.6 to 45.6 pmol/L
		Positive	45.7 pmol/L or greater
	N-Type Voltage-Gated Calcium Channel (VGKC) Antibody	Negative	0.0 to 69.9 pmol/L
		Indeterminate	70.0 to 110.0 pmol/L
		Positive	110.1 pmol/L or greater
3003020	Ganglionic Acetylcholine Receptor Antibody	Negative	pmol/L or less
		Indeterminate	pmol/L
		Positive	pmol/L or greater
2004890	Voltage-Gated Potassium Channel (VGKC) Antibody, Serum	Negative	31 pmol/L or less
		Indeterminate	32-87 pmol/L
		Positive	88 pmol/L or greater
2005636	Titin Antibody	Negative	0.00-0.45 IV
		Indeterminate	0.46-0.71 IV
		Positive	0.72 IV or greater
0050746	Striated Muscle Antibodies, IgG with Reflex to Titer	Less than 1:40	

HOTLINE: Effective **November 16, 2020**

2009456	Leucine-Rich, Glioma-Inactivated Protein 1 Antibody, IgG with Reflex to Titer, Serum	Less than 1:10
2009452	Contactin-Associated Protein-2 Antibody, IgG with Reflex to Titer, Serum	Less than 1:10

**Interpretive Data:**

Refer to report.

See Compliance Statement A: [www.aruplab.com/CS](http://www.aruplab.com/CS)

**Note:** If Acetylcholine Receptor Binding Antibody result is greater than 0.4 nmol/L or Acetylcholine Receptor Blocking Antibody result is greater than 26 percent, then Acetylcholine Receptor Modulating Antibody will be added. If Striated Muscle Ab is detected, then a titer will be added. If VGKC is Indeterminate or Positive, LGI1 Antibody IgG and CASPR2 Antibody IgG will be added. If LGI1 antibody IgG is positive, then LGI1 antibody IgG titer will be added. If CASPR2 antibody IgG is positive, then CASPR2 antibody IgG titer will be added. Additional charges apply.

**CPT Code(s):** 83519 x5; 83516 x2; 86255; if reflexed, add 83516 and/or 86256 and/or 86255x2, if further reflexed add 86256 per titer

New York DOH approval pending. Call for status update.

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