

**TEST CHANGE** 

Autoimmune Myelopathy Panel, CSF 3006209, AIMYC

Specimen Requirements:

**Patient Preparation:** 

Collect: CSF

Specimen Preparation: Transfer three 1 mL CSF aliquots to ARUP standard transport

tubes. (Min: 0.5 mL/aliquot)

Transport Temperature: Frozen

Unacceptable Conditions: Fluid other than CSF. Grossly hemolyzed specimens

Remarks:

Stability: After separation from cells: Ambient: 24 hours; Refrigerated: 1

week; Frozen: 1 month (avoid repeated freeze/thaw cycles)

Effective Date: February 20, 2024

Methodology: Semi-Quantitative Cell-Based Indirect Fluorescent

Antibody/Semi-Quantitative Indirect Fluorescent Antibody (IFA)/Qualitative Immunoblot/Semi-Quantitative Enzyme-

Linked Immunosorbent Assay (ELISA)

Performed: Varies

Reported: 3-10 days

Note: If CV2 CSF antibody IgG is positive, then titer will be added.

Additional charges apply. PCCA/ANNA antibody IgG is screened by IFA. If the IFA screen is indeterminate, then a Neuronal Nuclear Antibodies (Hu, Ri, Yo, and Tr/DNER) IgG by Immunoblot will be performed. If the IFA screen is positive at 1:10 or greater, then a PCCA/ANNA antibodies titer and Neuronal Nuclear Antibodies (Hu, Ri, Yo, Tr/DNER) IgG by Immunoblot will be performed. Additional charges apply. If DPPX CSF antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If GABA-BR CSF antibody IgG is positive, then titer will be added. Additional charges apply. If AQP4/NMO CSF antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If mGluR1 CSF antibody IgG by IFA is positive, then titer will be added. Additional

charges apply.

CPT Codes: 86341; 86052; 84182 x2; 86255 x5; if reflexed add 84182 x4;

86256 per titer



Effective Date: February 20, 2024

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

Interpretive Data:

Refer to report

## Reference Interval:

Test Number	Components	Reference Interval
	mGluR1 Ab IgG CBA-IFA Screen, CSF	Less than 1:1
	Glutamic Acid Decarboxylase Antibody CSF	0.0-5.0 IU/mL
	NMO/AQP4 Ab IgG CBA-IFA Screen, CSF	Less than 1:1
	GABA-BR Ab IgG CBA-IFA Screen, CSF	Less than 1:1
	CV2 <del>.1</del> Ab IgG CBA-IFA Screen, CSF	Less than 1:1
	DPPX Ab IgG CBA-IFA Screen, CSF	Less than 1:1
	SOX1 Antibody, IgG by Immunoblot, CSF	Negative
	Amphiphysin Antibody, CSF	Negative
	Paraneoplastic Abs (PCCA/ANNA) IgG, CSF	None Detected

HOTLINE NOTE: There is a reflexive pattern change associated with this test. One or more orderable or component has been added or removed to the reflexive pattern. Refer to the Hotline Test Mix for interface build information.