

TEST CHANGE

Autoimmune Pediatric CNS Disorders, Serum 3006210, AIPEDS

Specimen Requirements:

Patient Preparation: N/A

Collect: Serum separator tube (SST)

Specimen Preparation: Separate from cells ASAP or within 2 hours of collection.

Transfer three 1 mL serum aliquots to ARUP standard transport

Effective Date: April 21, 2025

tubes. (Min: 0.5 mL/aliquot)

Transport Temperature: Frozen

Unacceptable Conditions: Amniotic fluid, ocular fluid, peritoneal fluid, synovial fluid, CSF,

or plasma. Contaminated, hemolyzed, icteric, or lipemic

specimens.

Remarks:

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

week; Frozen: 30 days (avoid repeated freeze/thaw cycles)

Methodology: Semi-Quantitative Cell-Based Indirect Fluorescent

Antibody/Semi-Quantitative Indirect Fluorescent Antibody (IFA)/Semi-Quantitative Enzyme-Linked Immunosorbent Assay

(ELISA)

Performed: Varies

Reported: 3-10 days

Note: If NMDA antibody IgG is positive, then titer will be performed.

Additional charges apply. PCCA/ANNA antibody IgG is screened by IFA. If the IFA screen is indeterminate, then a Neuronal Nuclear Antibodies (Hu 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 and Tr/DNER) IgG by Immunoblot will be performed. Additional charges apply. If LGI1 antibody IgG is positive, then titer will be added.

Additional charges apply. If CASPR2 antibody IgG is positive,

then titer will be added. Additional charges apply. If AQP4/NMO antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If GABA-BR antibody IgG by

IFA is positive, then titer will be added. Additional charges



apply. If MOG antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If DPPX antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If mGluR1 antibody IgG by IFA is positive, then titer will be added. Additional charges apply. If GABA-AR antibody IgG by IFA is positive, then titer will be added. Additional charges apply If AMPA antibody IgG by IFA is positive, then titer will be added. Additional charges apply

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CPT Codes: 86341; 86362; 86052; 86255 x9x8; if reflexed add 84182 x2;

86256 per titer

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

Interpretive Data:

Refer to report.

Reference Interval:

Test Number	Components	Reference Interval
	Purkinje Cell/Neuronal Nuclear IgG Scrn	None Detected
	Glutamic Acid Decarboxylase Antibody	0.0-5.0 IU/mL
	NMDA Receptor Ab IgG CBA-IFA, Serum	Less than 1:10
	NMO/AQP4 Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	GABA-BR Ab IgG CBA-IFA Scrn, Ser	Less than 1:10
	AMPA Receptor Ab IgG CBA-IFA Scrn. Serum	Less than 1:10
	MOG Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	DPPX Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	GABA-AR Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	mGluR1 Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	CASPR2 Ab IgG CBA-IFA Screen, Serum	Less than 1:10
	LGI1 Ab IgG CBA-IFA Screen, Serum	Less than 1:10

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

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.