

TEST CHANGE

Anti-Phospholipase A2 Receptor (PLA2R) Antibody, IgG by ELISA

3016767, ANTI-PLA2R

Specimen Requirements:

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

Collect: Serum separator tube.

Specimen Preparation: Transfer 1 mL serum to an ARUP standard transport tube. (Min: 0.5 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Contaminated, heat-inactivated, grossly hemolyzed, grossly icteric, or grossly lipemic specimens.

Remarks:

Stability: After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 2 weeks

Methodology: Semi-Quantitative Enzyme-Linked Immunosorbent Assay (ELISA)

Performed: Mon, ~~Wed~~, ~~Thu~~, ~~Fri~~

Reported: 1-~~7~~4 days

Note:

CPT Codes: 83516

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

Interpretive Data:

A positive anti-phospholipase A2 receptor (PLA2R) antibody result by ELISA or IFA in conjunction with clinical symptoms and other laboratory findings is suggestive of primary membranous nephropathy (pMN). Absence of circulating anti-PLA2R receptor autoantibodies does not rule out a diagnosis of pMN. Anti-PLA2R antibody titers, due to its high predictive value, can be useful for assessing disease severity and monitoring clinical remission. In patients with pMN undergoing treatment, low antibody titers are associated with disease remission and high titers indicate loss of kidney function and need for an aggressive therapeutic approach.

Component	Interpretive Data
Anti-Phospholipase A2 Receptor, IgG	Negative: Less than 14 RU/mL Borderline: 14-19 RU/mL Positive: Greater than or

	equal to 20 RU/mL
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Reference Interval:

Test Number	Components	Reference Interval
	Anti-Phospholipase A2 Receptor, IgG	< 14 RU/mL