NEW TEST

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CV2 Antibody, IgG by CBA-IFA With Reflex to Titer, Serum

3016999, CV2 SER

Specimen Requirements:	
Patient Preparation:	
Collect:	Serum separator tube (SST) or plain red
Specimen Preparation:	Transfer 1 mL serum to an ARUP standard transport tube. (Min: 0.25 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 Antibody IgG Screen by IFA is positive, then CV2 Antibody IgG Titer by IFA will be added. Additional charges apply.
CPT Codes:	86255; if reflexed, add 86256
New York DOH Approval Status:	Specimens from New York clients will be sent out to a New York DOH approved laboratory, if possible.

Interpretive Data:

CV2 antibodies aid in discriminating between chronic paraneoplastic neurological disorder (PND) and other inflammatory disorders of the nervous system. Anti-CV2 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 transfected cell lines for the detection and semiquantification of the CV2 IgG antibody.

Reference Interval:

Test Number	Components	Reference Interval
	CV2 Ab IgG CBA-IFA Screen, Serum	Less than 1:100

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