

Reporting Title: Rubella Ab, IgG, S

Performing Location: Rochester

Specimen Requirements:

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Instructions: Plastic vial

Specimen Volume: 0.5 MI

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Forms:

If not ordering electronically, complete, print, and send [Infectious Disease Serology Test Request](#) (T916) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	14 days	
	Frozen	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
RBG	Rubella Ab, IgG, S	Alphanumeric		40667-8
DEXG2	Rubella IgG Antibody Index	Numeric		5334-8

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86762

Reference Values:

Vaccinated: positive (> or =1.0 AI)

Unvaccinated: negative (< or =0.7 AI)

Reference values apply to all ages.