

Reporting Title: Coccidioides Ab, CompF/ImmDiff,S
Performing Location: Rochester

Ordering Guidance:

Specimen Requirements:
Only orderable as a reflex. For more information see COXIS / Coccidioides Antibody Screen with Reflex, Serum.

Forms:

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

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
35942	Coccidioides Ab, CompF,S	Alphanumeric		33379-9
35943	Coccidioides, IgG, ImmDiff,S	Alphanumeric		46182-2
35944	Coccidioides, IgM, ImmDiff,S	Alphanumeric		46183-0

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

Supplemental Report:
No

CPT Code Information:
86635 x 3

Reference Values:
Only orderable as a reflex. For more information see COXIS / Coccidioides Antibody Screen with Reflex, Serum.

COMPLEMENT FIXATION:
Negative
If positive, results are titered.

IMMUNODIFFUSION:
Negative
Results are reported as positive, negative, or equivocal.