

**Reporting Title:** M. pneumoniae Ab, IgM, S  
**Performing Location:** Rochester

**Specimen Requirements:**  
Only orderable as part of a profile. For more information see MYCO / *Mycoplasma pneumoniae* Antibodies, IgG and IgM, Serum.

**Collection Container/Tube:**  
**Preferred:** Serum gel  
**Acceptable:** Red top  
**Submission Container/Tube:** Plastic vial  
**Specimen Volume:** 1 mL  
**Collection Instructions:** Centrifuge and aliquot serum into a plastic vial.

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

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
MYCOM	M. pneumoniae Ab, IgM, S	Alphanumeric		5257-1

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

**Supplemental Report:**  
No

**CPT Code Information:**  
86738

**Reflex Tests:**

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
MMYCO	M. pneumoniae Ab, IgM, S by IFA	1	86738	No	No

**Result Codes for Reflex Tests:**

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
MMYCO	29326	M. pneumoniae Ab, IgM, S by IFA	Alphanumeric		58708-9

**Reference Values:**

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Negative