

Reporting Title: Neurochondrin CBA, CSF
Performing Location: Rochester

Specimen Requirements:

- Only orderable as a reflex. For more information see:
- DMC2 / Dementia, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
 - ENC2 / Encephalopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
 - EPC2 / Epilepsy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
 - MAC1 / Myelopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
 - MDC2 / Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid
 - PCDEC / Pediatric Autoimmune Encephalopathy/CNS Disorder Evaluation, Spinal Fluid

Container/Tube: Sterile vial
Specimen Volume: 1.5 mL

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	28 days	
	Frozen	28 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
615864	Neurochondrin CBA, CSF	Alphanumeric		101449-7

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

Supplemental Report:
No

CPT Code Information:
86255

Reference Values:

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Negative