

Reporting Title: HIV-1/-2 Ag and Ab Prenatal Scrn, S
Performing Location: Rochester

Ordering Guidance:
If the specimen is obtained from either autopsy or cadaver blood sources, order HV1CD / HIV-1 and HIV-2 Antibodies for Cadaveric or Hemolyzed Specimens, Serum which is the US Food and Drug Administration-approved assay for these specimen types.

This test should **not be used to** test symptomatic individuals (ie, diagnostic purposes). For testing such patients, order HIVDS / HIV-1 and HIV-2 Antigen and Antibody Diagnostic Evaluation, Serum.

This test should **not be used to** screen or test asymptomatic, nonpregnant individuals. For testing such patients, order HIVSS / HIV-1 and HIV-2 Antigen and Antibody Routine Screen, Serum.

New York State clients: This test **should not be** requested for maternal/newborn HIV screening on specimens originating in New York State, due to state regulatory requirements for expedited result reporting.

Specimen Requirements:
Supplies: Sarstedt Aliquot Tube 5 mL (T914)
Collection Container/Tube: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 1.5 mL
Collection Instructions:

1. Centrifuge blood collection tube per manufacturer's instructions (eg, centrifuge and aliquot within 2 hours of collection for BD Vacutainer tubes).
2. Aliquot serum into a plastic vial.

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

Specimen Type	Temperature	Time	Special Container
Serum	Frozen (preferred)	30 days	
	Refrigerated	6 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
HIVS5	HIV-1/-2 Ag and Ab Prenatal, S	Alphanumeric		56888-1

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

Supplemental Report:

No

CPT Code Information:

- 87389
- G0475 (if appropriate)
- 86701 (if appropriate)
- 86702 (if appropriate)
- 87535 (if appropriate)
- 87538 (if appropriate)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
HVPPS	HIV Ab Differentiation Prenatal, S	1	86701	No	Yes
HPS12	HIV-1/HIV-2 RNA Detect Prenatal, S	1	87535	No	Yes

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
HVPPS	618221	HIV-1 Ab Differentiation Prenatal, S	Alphanumeric		68961-2
HVPPS	618222	HIV-2 Ab Differentiation Prenatal, S	Alphanumeric		81641-3
HPS12	616346	HIV-1 RNA	Alphanumeric		25835-0
HPS12	616347	HIV-2 RNA	Alphanumeric		69353-1

Reference Values:

Negative