

Test Definition: RAVMP

Ravulizumab Monitoring Panel, Serum

Reporting Title: Ravulizumab Monitoring Panel, S

Performing Location: Rochester

Ordering Guidance:

To measure only serum concentration of ravulizumab, order RAVU / Ravulizumab, Serum.

Specimen Requirements:

Patient Preparation:

1. Fasting preferred.

2. Suggest discontinuing natalizumab at least 4 weeks prior to testing for ravulizumab quantitation in serum. Patient should consult the healthcare provider who prescribed this drug to determine if discontinuation is an option. If not, ok to proceed with testing while taking natalizumab.

Supplies: Aliquot Tube, 5 mL (T914)

Collection Container/Tube: Red top (serum gel/SST are **not acceptable**)

Submission Container/Tube: 2 Plastic vials

Specimen Volume: 2 mL in 2 plastic vials, each vial containing 1 mL

Collection Instructions:

- 1. Draw blood immediately before next scheduled dose.
- 2. Immediately after specimen collection, place the tube on wet ice.
- 3. After sample has clotted on wet ice, centrifuge at 4 degrees C and aliquot serum into two 5 mL plastic vials.
- 4. Freeze specimen within 30 minutes of centrifugation. Sample must be placed on dry ice if not frozen immediately.

Specimen Type	Temperature	Time	Special Container
Serum	Frozen	14 days	
Serum Red	Frozen	14 days	

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
609500	Ravulizumab Complement Blockage, S	Numeric	%of norm	74520-8
609420	Ravulizumab, S	Numeric	mcg/mL	97184-6
619952	Ravulizumab Interpretation	Alphanumeric		59462-2

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

Supplemental Report:

No

Components:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
RAVU	Ravulizumab, S	1	80299	Yes	Yes



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RAVU	Ravulizumab Complement Blockage,	1	86161	Yes	No
M	S				
RAVIN	Ravulizumab Interpretation, S			Yes	No

CPT Code Information:

80299

86161

Reference Values:

RAVULIZUMAB COMPLEMENT BLOCKAGE:

> or =46% normal

RAVULIZUMAB:

Lower limit of quantitation =5.0 mcg/mL

>175 mcg/mL: Therapeutic concentration for paroxysmal nocturnal hemoglobinuria and atypical hemolytic uremic syndrome