

Reporting Title: Chikungunya IgM and IgG, Ab, S
Performing Location: Rochester

Ordering Guidance:
Testing a patient in a convalescent period is recommended because specimens collected too early following infection may be negative for antibodies to Chikungunya virus.

Specimen Requirements:
Collection Container/Tube:
Preferred: Serum gel
Acceptable: Red top
Submission Container/Tube: Plastic vial
Specimen Volume: 0.5 mL
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

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

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

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
CHIKI	Chikungunya Interpretation	Alphanumeric		69048-7
CHIKG	Chikungunya IgG, Ab, S	Alphanumeric		88630-9
CHIKM	Chikungunya IgM, Ab, S	Alphanumeric		88629-1

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
CHIKM	Chikungunya IgM, Ab, S	1	86790	Yes	No
CHIKG	Chikungunya IgG, Ab, S	1	86790	Yes	No
CHIKI	Chikungunya Interpretation			Yes	No

CPT Code Information:

86790 x2

Reference Values:

IgM: Negative

IgG: Negative

Reference values apply to all ages.