

Reporting Title: Cutaneous Immfluor. Ab, S (IgG)
Performing Location: Rochester

Specimen Requirements:
Collection Container/Tube:
Preferred: Serum gel
Acceptable: Red top
Submission Container/Tube: Plastic vial
Specimen Volume: 2 mL
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Forms:

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	14 days	
	Frozen	30 days	
	Ambient	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
21539	Cell Surface Ab IgG	Alphanumeric		21352-0
21540	Basement Membrane IgG	Alphanumeric		29994-1
21541	Primate Esophagus IgG	Alphanumeric		66881-4
21542	Primate Split Skin IgG	Alphanumeric		45178-1
21638	Other	Alphanumeric		48767-8

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

Supplemental Report:
No

CPT Code Information:
88346
88350

Reference Values:
Report includes presence and titer of circulating antibodies. If serum contains basement membrane zone antibodies on split-skin substrate, patterns will be reported as:
1) Epidermal pattern, consistent with pemphigoid
2) Dermal pattern, consistent with epidermolysis bullosa acquisita

Negative in normal individuals