

**Reporting Title:** Hepatitis Be Ag and Ab, S  
**Performing Location:** Rochester

**Ordering Guidance:**  
If ordered with HBVQN / Hepatitis B Virus (HBV) DNA Detection and Quantification by Real-Time PCR, Serum; send separate vials.

**Additional Testing Requirements:**

**Necessary Information:**  
Date of collection is required

**Specimen Requirements:**  
**Patient Preparation:** For 24 hours before specimen collection, patient **should not** take multivitamins or dietary supplements (eg, hair, skin, and nail supplements) containing biotin (vitamin B7).  
**Supplies:** Sarstedt Aliquot Tube, 5 mL (T914)  
**Collection Container/Tube:** Serum gel  
**Submission Container/Tube:** Plastic vial  
**Specimen Volume:** 0.8 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 1 of the following:  
[-Gastroenterology and Hepatology Test Request](#) (T728)  
[-Infectious Disease Serology Test Request](#) (T916)

Specimen Type	Temperature	Time	Special Container
Serum SST	Frozen (preferred)	90 days	
	Refrigerated	6 days	
	Ambient	72 hours	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
EAG	Hepatitis Be Ag, S	Alphanumeric		13954-3
HEAB	HBe Antibody, S	Alphanumeric		33463-1

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
EAG	Hepatitis Be Ag, S	1	87350	Yes	Yes
HEAB	HBe Antibody, S	1	86707	Yes	Yes

CPT Code Information:

86707

87350

Reference Values:

HEPATITIS Be ANTIGEN:

Negative

HEPATITIS Be ANTIBODY:

Negative

For more information see [Viral Hepatitis Serologic Profiles](#).