

Overview**Useful For**

Evaluation of individuals with possible hypogammaglobulinemia

Method Name

Hemagglutination

NY State Available

Yes

Specimen**Specimen Type**

Serum Red

Shipping Instructions

Specimen must arrive within 10 days of draw.

Specimen Required

Container/Tube: Red top

Submission Container/Tube: Serum Aliquot tube

Specimen Volume: 2.5 mL

Pediatric: 2 mL

Forms

If not ordering electronically, complete, print, and send a [Benign Hematology Test Request Form](#) (T755) with the specimen.

Specimen Minimum Volume

1 mL

Reject Due To

Gross hemolysis	OK
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Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Serum Red	Ambient (preferred)	4 days	
	Frozen	10 days	
	Refrigerated	10 days	

Clinical and Interpretive

Clinical Information

Isoagglutinins are antibodies produced by an individual that cause agglutination of RBCs in other individuals. People possess isoagglutinins directed toward the A or B antigen absent from their own RBCs. For example, type A or O individuals will usually possess anti-B. The anti-B is formed in response to exposure to B-like antigenic structures found in ubiquitous non-red cell biologic entities (eg, bacteria).

Isoagglutinins present in the newborn are passively acquired from maternal circulation. Such passively acquired isoagglutinins will gradually disappear, and the infant will begin to produce isoagglutinins at 3 to 6 months of age.

Isoagglutinin production may vary in patients with certain pathologic conditions. Decreased levels of isoagglutinins may be seen in patients with acquired and congenital hypogammaglobulinemia and agammaglobulinemia.

Reference Values

Interpretation depends on clinical setting. No defined reference values.

Interpretation

The result is reported as antiglobulin phase, in general representing IgG antibody. The result is the reciprocal of the highest dilution up to 1:1024 at which macroscopic agglutination (1+) is observed. Dilutions above 1:1024 are reported as >1024.

Cautions

Decreased isoagglutinin titers may be seen in normal elderly individuals and in children 12 months or younger.

This test will not be performed for individuals with blood type B or AB.

Clinical Reference

AABB Technical Manual. 19th edition. Edited by MK Fung, AF Eder, SL Spitalnik, CM Westhoff: AABB 2017

Performance

Method Description

[Twofold serial dilutions of patient's serum are tested with appropriate type A and B erythrocytes. Antiglobulin phase of reactivity is examined. The result is the reciprocal of the highest dilution at which macroscopic agglutination \(1+\) is observed up to greater than 1024. Parallel titration of control antiserum is used for standardization.\(AABB Technical Manual. 18th edition. Edited by MK Fung, BJ Grossman, CD Hillyer, CM Westhoff: AABB. 2014\)](#)

PDF Report

No

Day(s) Performed

Monday through Friday, Sunday

Report Available

1 to 4 days

Specimen Retention Time

14 days

Performing Laboratory Location

Rochester

Fees and Codes**Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their Regional Manager. For assistance, contact [Customer Service](#).

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

86886

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
BTR	Isoagglutinin Titer, Anti-B	34464-8

Result ID	Test Result Name	Result LOINC Value
BTR	Isoagglutinin Titer, Anti-B	34464-8