Test Definition: FARWB

Anti-retinal autoantibodies follow up, WB

Overview

Special Instructions

- OHSU Requisition Form

Method Name

Western Blot (WB)

NY State Available

Yes

Specimen

Specimen Type

Varies

Specimen Required

Note: This test should only be ordered as follow up to previous Anti-retinal autoantibodies performed at Oregon Health Sciences University (OHSU) Ocular Immunology Laboratory.

Submit only one of the following specimens:

Serum:

Draw blood in a plain, red-top tube(s), serum gel tube(s) is acceptable. Spin down and send 5 mL serum refrigerated in a plastic vial.

Plasma:

Draw blood in a lavender-top (EDTA) tube(s). Spin down and send 5 mL EDTA plasma refrigerated in a plastic vial.

Complete and submit with specimen:

1. Completed OHSU Ocular request form
2. Clinical history
3. Referring physician information (name & phone number)

-NOTE: Without this information, testing cannot be completed.

Specimen Minimum Volume

3 mL

Reject Due To

Hemolysis:	Mild reject; Gross reject

Thawing:	Warm reject; Cold OK

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated	7 days	

Clinical & Interpretive

Reference Values
A final report will be attached in MayoAccess.

Performance

PDF Report
Referral

Day(s) Performed
Batched

Report Available
16 to 35 days

Performing Laboratory Location
Ocular Immunology Laboratory OHSU

Fees & 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 account representative. For assistance, contact Customer Service.

CPT Code Information
84182

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value

FARWB	Anti-Retinal Autoantibody, WB	Not Provided

Result ID	Test Result Name	Result LOINC® Value
FARWB	Anti-Retinal Autoantibody, WB	Not Provided