



Reporting Title: HCV Ab Scrn w/Reflex to HCV PCR, S

Performing Location: Rochester

Ordering Guidance:

This test is not intended for testing symptomatic individuals (ie, diagnostic purposes). For testing such patients with or without risk factors for hepatitis C virus (HCV) infection, order HCVDX / Hepatitis C Virus (HCV) Antibody with Reflex to HCV RNA, PCR, Symptomatic, Serum.

For testing autopsy/cadaver or hemolyzed specimens, order HCCAD / Hepatitis C Virus Antibody Screen for Cadaveric or Hemolyzed Specimens, Asymptomatic, Serum for asymptomatic individuals or HCCDD / Hepatitis C Virus Antibody in Cadaveric or Hemolyzed Specimens, Symptomatic, Serum for symptomatic individuals.

For patients with acute or recent HCV infections (<3 months from time of exposure) or are repeatedly reactive by screening tests and should be confirmed by a more HCV-specific test, order HCVQN / Hepatitis C Virus (HCV) RNA Detection and Quantification by Real-Time Reverse Transcription-PCR (RT-PCR), Serum.

Shipping Instructions:

If shipment will be delayed for more than 24 hours, freeze serum at -70 degrees C until shipment on and transport on dry ice.

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: 1.3 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 plastic vial.

Specimen Minimum Volume:

0.9 mL

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)	84 days	
	Refrigerated	6 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
HCVA5	HCV Ab Screen, S	Alphanumeric		40726-2

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86803
G0472 (if appropriate for government payers)
87522 Hepatitis C, quantification (if appropriate)

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
HCVQN	HCV RNA Detect/Quant, S			No	Yes

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
HCVQN	97291	HCV RNA Detect/Quant, S	Alphanumeric	IU/mL	11011-4



Reference Values:

Negative

See Viral Hepatitis Serologic Profiles