

Reporting Title: Histoplasma Ag, Quant EIA, U
Performing Location: Rochester

Specimen Requirements:

Supplies: Sarstedt 5 mL Aliquot Tube (T914)

Container/Tube: Plastic vial

Specimen Volume: 4 mL

Collection Instructions:

1. Collect a random urine specimen.
2. No preservative.
3. Do not centrifuge to remove particulates.

Specimen Minimum Volume:

2.5 mL

Forms:

If not ordering electronically, complete, print, and send Infectious Disease Serology Test Request (T916) with the specimen.

Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)	14 days	
	Frozen	31 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
HISTF	Histoplasma Ag Result	Alphanumeric		44524-7
DEXUH	Histoplasma Ag Value	Alphanumeric	ng/mL	48952-6

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

87385

Reference Values:**HISTOPLASMA ANTIGEN RESULT:**

Not Detected

HISTOPLASMA ANTIGEN VALUE

Not Detected

Detected: <0.2 ng/mL

Detected: 0.2-25.0 ng/mL

Detected: >25.0 ng/mL