

Reporting Title: Syphilis Ab by TP-PA, S**Performing Location:** Rochester**Ordering Guidance:**

This assay is recommended by the Centers for Disease Control and Prevention for sera testing positive by a screening treponemal assay and negative by rapid plasma reagin (RPR). The results of this assay assist in determining whether the results of a screening treponemal test are truly or falsely positive.

Specimen Requirements:

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 0.5 mL

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

0.3 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
Serum	Refrigerated (preferred)	14 days	
	Frozen	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
61480	Syphilis Ab by TP-PA, S	Alphanumeric		24312-1

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86780

Reference Values:

Negative