

**Reporting Title:** Adalimumab QN with Antibodies, S**Performing Location:** Rochester**Ordering Guidance:**

If there is a known justification for performing both quantitation and antibody levels, this is the correct test to order. If there is not a known reason to perform the antibody levels component, consider ADALX / Adalimumab Quantitative with Reflex to Antibody, Serum. ADALX testing begins with adalimumab quantitation and only performs testing for antibodies when the quantitation results are 8.0 mcg/mL or less.

**Specimen Requirements:**

**Patient Preparation:** For 12 hours before specimen collection, it is recommended that the patient not take multivitamins or dietary supplements containing biotin (vitamin B7), which is commonly found in hair, skin, and nail supplements and multivitamins.

**Collection Container/Tube:**

Preferred: Serum gel

Acceptable: Red top

**Submission Container/Tube:** Plastic vial

**Specimen Volume:** 1.0 mL

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

**Specimen Minimum Volume:**

0.7 mL

**Forms:**

If not ordering electronically, complete, print, and send a Gastroenterology and Hepatology Test Request (T728) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	28 days	
	Frozen	28 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
QNADL	Adalimumab QN, S <b>Also used by tests: QNADL</b>	Numeric	mcg/mL	86894-3

Result ID	Reporting Name	Type	Unit	LOINC®
ABADL	Adalimumab Ab, S	Numeric	AU/mL	90779-0
INTAD	Adalimumab Interpretation	Alphanumeric		77202-0

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**Components:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
QNADL	Adalimumab QN, S			Yes	Yes (ADALX)
ABADL	Adalimumab Ab, S			Yes	No
INTAD	Adalimumab Interpretation			Yes	No

**CPT Code Information:**

80145  
83520

**Reference Values:****ADALIMUMAB QUANTITATIVE:**

Limit of quantitation is 0.8 mcg/mL. Optimal therapeutic ranges are disease specific.

**ADALIMUMAB ANTIBODY:**

<14.0 AU/mL