

# **Test Definition: HBABY**

Hepatitis B Virus Perinatal Exposure Follow-up Panel, Serum

Reporting Title: Hepatitis B Perinatal Exposure, S

Performing Location: Rochester

### **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 containing biotin (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: 1.2 mL Collection Instructions:

- 1. Centrifuge blood collection tube per collection tube 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)	90 days	
	Refrigerated	6 days	
	Ambient	72 hours	

#### **Result Codes:**

Result ID Reporting Name	Type	Unit	LOINC®
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Result ID	Reporting Name	Туре	Unit	LOINC®
H_BAG	HBs Antigen, S	Alphanumeric		5196-1
	Also used by tests: HBAG			
НВС	HBc Total Ab, S	Alphanumeric		13952-7
	Also used by tests: HBC			
HB_AB	HBs Antibody, S	Alphanumeric		10900-9
	Also used by tests: HBAB, HBABE			
HBSQN	HBs Antibody, Quantitative, S	Alphanumeric	mIU/mL	5193-8
	Also used by tests: HBABP, HBAB, HBBSN, HBABE			

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
HBAG	HBs Antigen, S			Yes	Yes
НВС	HBc Total Ab, S			Yes	Yes
HBAB	HBs Antibody, S			Yes	Yes

# **CPT Code Information:**

86706 86704 87340

87341 (if appropriate)



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#### **Reflex Tests:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
HBGNT	HBs Antigen Confirmation, S			No	No

# **Result Codes for Reflex Tests:**

Test ID	Result ID	Reporting Name	Туре	Unit	LOINC®
HBGNT	HBGNT	HBs Antigen Confirmation, S	Alphanumeric		7905-3

## **Reference Values:**

Negative

See Viral Hepatitis Serologic Profiles.