
Reporting Title: MuSK Autoantibody, S
Performing Location: Rochester**Specimen Requirements:**

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)
Collection Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 1.5 mL
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

1 mL

Forms:

If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:

- Neurology Specialty Testing Client Test Request (T732)
- General Request (T239)

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	28 days	
	Frozen	28 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
64277	MuSK Autoantibody, S	Numeric	nmol/L	51716-9

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86366

Reference Values:

< or =0.02 nmol/L