

**Reporting Title:** Toxoplasma gondii IgG and IgM, CSF**Performing Location:** Quest Diagnostics**Specimen Requirements:**

Specimen Type: Spinal Fluid

Sources: CSF

Container/Tube: Sterile container

Specimen Volume: 1 mL

Collection Instructions: Submit 1 mL of spinal fluid (CSF) in a sterile, plastic screw-cap vial. Refrigerate specimen after collection and ship at refrigerate temperature.

**Specimen Minimum Volume:**

0.5 mL

| Specimen Type | Temperature              | Time    | Special Container |
|---------------|--------------------------|---------|-------------------|
| CSF           | Refrigerated (preferred) | 14 days |                   |
|               | Frozen                   | 30 days |                   |
|               | Ambient                  | 7 days  |                   |

**Result Codes:**

| Result ID | Reporting Name | Type         | Unit | LOINC®  |
|-----------|----------------|--------------|------|---------|
| Z5528     | T. gondii IgG  | Alphanumeric |      | 30568-0 |
| Z5529     | T. gondii IgM  | Alphanumeric |      | 30569-8 |

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

86777-IgG

86778-IgM

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**Reference Values:**

Reference Range:

IgG: &lt;0.90

IgM: &lt;0.80

## INTERPRETIVE CRITERIA:

|           |                       |
|-----------|-----------------------|
| IgG:      | Â                     |
| <0.90     | Antibody not detected |
| 0.9-1.09  | Equivocal             |
| >or=1.10  | Antibody detected     |
| Â         | Â                     |
| IgM:      | Â                     |
| <0.80     | Antibody not detected |
| 0.80-0.99 | Equivocal             |
| >or=1.00  | Antibody detected     |