

**Reporting Title:** Phospholipid Ab IgM, S**Performing Location:** Rochester**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:**

0.4 mL

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	21 days	
	Frozen	21 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
MCLIP	Phospholipid Ab IgM, S	Numeric	MPL	3182-3

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

86147

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**Reference Values:**

MPL refers to IgM phospholipid units. One MPL unit is 1 microgram of IgM antibody.

Negative: <15.0 MPL)

Weakly positive: 15.0-39.9 MPL

Positive: 40.0-79.9 MPL

Strongly positive: > or =80.0 MPL

Reference values apply to all ages.