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**Reporting Title:** HBs Antibody, S**Performing Location:** Rochester**Ordering Guidance:**

If patient is being monitored for hepatitis B immune globulin (HBIG) therapy after organ transplantation, order HBABT / Hepatitis B Virus Surface Antibody Monitor, Post-Transplant, Serum.

This test should not be used for screening asymptomatic, nonpregnant individuals with or without risk factors for hepatitis B virus (HBV) infection. For screening such patients, order HBBSN / Hepatitis B Virus Surface Antibody Screen, Qualitative/Quantitative, Serum.

This test should not be used for prenatal screening of pregnant individuals with or without risk factors for HBV infection. For screening such patients, order HBABP / Hepatitis B Virus Surface Antibody Prenatal, Qualitative/Quantitative, Serum.

**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 (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: 0.7 mL

Collection Instructions:

1. Centrifuge blood collection tube per manufacturer's instructions (eg, centrifuge and aliquot within 2 hours of collection for BD Vacutainer tubes).
2. Aliquot serum into a plastic vial.

**Specimen Minimum Volume:**

0.6 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®
HB_AB	HBs Antibody, S <b>Also used by tests: HBABE</b>	Alphanumeric		10900-9
HBSQN	HBs Antibody, Quantitative, S <b>Also used by tests: HBABP, HBBSN, HBABE</b>	Alphanumeric	mIU/mL	5193-8

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

86706

**Reference Values:****HEPATITIS B SURFACE ANTIBODY**

Unvaccinated: Negative

Vaccinated: Positive

**HEPATITIS B SURFACE ANTIBODY, QUANTITATIVE**

Unvaccinated: <8.5 mIU/mL

Vaccinated: > or =11.5 mIU/mL

See Viral Hepatitis Serologic Profiles.