

Reporting Title: Phospholip Ab (Cardiolip) IgM/IgG**Performing Location:** Rochester**Specimen Requirements:**

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

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

Forms:

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

-Coagulation Test Request (T753)

-Renal Diagnostics Test Request (T830)

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 Also used by tests: MCLIP	Numeric	MPL	3182-3
GCLIP	Phospholipid Ab IgG, S Also used by tests: GCLIP	Numeric	GPL	3181-5

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
MCLIP	Phospholipid Ab IgM, S			Yes	Yes
GCLIP	Phospholipid Ab IgG, S			Yes	Yes

CPT Code Information:

86147 x 2

Reference Values:

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

Negative: <15.0 MPL or GPL
Weakly positive: 15.0-39.9 MPL or GPL
Positive: 40.0-79.9 MPL or GPL
Strongly positive: > or =80.0 MPL or GPL

Reference values apply to all ages.