



Reporting Title: West Equine Enceph Ab Panel, CSF

Performing Location: Rochester

Ordering Guidance:

This assay detects Western equine antibodies only. For a complete arbovirus panel, order ABOPC / Arbovirus Antibody Panel, IgG and IgM, Spinal Fluid.

New York State clients: This test is not available for specimens originating in New York.

Specimen Requirements:

Container/Tube: Sterile vial

Preferred: Vial number 1

Acceptable: Any vial

Specimen Volume: 0.8 mL

Specimen Minimum Volume:

0.7 mL

Forms:

If not ordering electronically, complete, print, and send Infectious Disease Serology Test Request (T916) with the specimen.

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	14 days	
	Frozen	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
26371	West Equine Enceph Ab, IgG, CSF	Alphanumeric		9315-3
26372	West Equine Enceph Ab, IgM, CSF	Alphanumeric		9316-1

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No



CPT Code Information:

86654 x 2

Reference Values:

IgG: <1:1

IgM: <1:1

Reference values apply to all ages.