

Reporting Title: Aspergillus Ag, S
Performing Location: Rochester

Ordering Guidance:

For bronchoalveolar lavage specimens, order ASPBA / Aspergillus Antigen, Bronchoalveolar Lavage.

Specimen Requirements:

Container/Tube: Serum gel (red-top tubes are not acceptable)

Specimen Volume: 1.5 mL

Collection Instructions:

1. Avoid exposure of specimen to atmosphere to prevent sample contamination from environment.
2. Centrifuge and send specimen in original tube. Do not aliquot or open tube.

Specimen Minimum Volume:

1 mL

Forms:

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

-General Request (T239)

-Infectious Disease Serology Test Request (T916)

Specimen Type	Temperature	Time	Special Container
Serum SST	Refrigerated (preferred)	14 days	SERUM GEL TUBE
	Frozen	14 days	SERUM GEL TUBE

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
84356	Aspergillus Ag, S	Numeric	index	44357-2

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

87305

Reference Values:

<0.5 index

Reference values apply to all ages.