
Reporting Title: Immune Assessment B Cell Subsets, B**Performing Location:** Rochester**Ordering Guidance:**

This test requires multiple whole blood specimens to perform all testing. If only one whole blood specimen type is received, only the testing associated with that specimen type will be performed. Be advised that this may change the degree of interpretation received with the report. If only the refrigerate EDTA sample is received, this test will be canceled and converted to RBCS / Relative B-Cell Subset Analysis Percentage, Blood, which provides the relative B-cell subset values without quantitation.

This test is a screening test, and further analyses will be required to complete a diagnostic workup for common variable immunodeficiency (CVID) (eg, CVID / Common Variable Immunodeficiency Confirmation Flow Panel, Blood) and hyper-IgM (XHIM / X-Linked Hyper IgM Syndrome, Blood and CD40 / B-Cell CD40 Expression by Flow Cytometry, Blood).

Shipping Instructions:

Specimens must be received in the laboratory weekdays and by 4 p.m. on Friday. Collect and package specimens as close to shipping time as possible.

It is recommended that specimens arrive within 24 hours of collection.

Samples arriving on the weekend and observed holidays may be canceled.

Necessary Information:

1. Date of collection is required.
2. Ordering physician's name and phone number are required.

Specimen Requirements:

Two separate EDTA whole blood specimens are required: 1 refrigerated and 1 at ambient transport temperature.

For serial monitoring, it is recommended that specimens are collected at the same time of day.

Specimen Type: Whole blood for TBBS / Quantitative Lymphocyte Subsets: T, B, and Natural Killer (NK) Cells, Blood

Container/Tube: 4 mL Lavender top (EDTA)

Specimen Volume: 3 mL

Collection Instructions:

1. Send whole blood specimen in original tube. Do not aliquot.
2. Label specimen as blood for TBBS

Specimen Stability Information: Ambient <52 hours

Specimen Type: Whole blood for IABC / B-Cell Phenotyping Screen for Immunodeficiency and Immune Competence Assessment, Blood

Container/Tube: Lavender top (EDTA)

Specimen Volume: 10 mL

Pediatric (< or =14 years old) Volume: 4 mL

Collection Instructions:

1. Send whole blood specimen in original tube. Do not aliquot.
2. Label specimen as blood for IABC.

Specimen Stability Information: Refrigerated <48 hours

Specimen Minimum Volume:

TBBS: 1 mL

IABC: 5 mL; for pediatric patients: 3 mL

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Varies	48 hours	PURPLE OR PINK TOP/EDTA

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
3321	CD45 Total Lymph Count Also used by tests: CD4NY, TCD4, TBBS, TBNY	Unknown	thou/mcL	27071-0
3316	% CD3 (T Cells) Also used by tests: TBNY, CD4NY, TBBS, TCD4	Unknown	%	8124-0
3322	CD3 (T Cells) Also used by tests: TBBS, TCD4, CD4NY, TBNY	Unknown	cells/mcL	8122-4
3319	% CD4 (T Cells) Also used by tests: TCD4, TBNY, TBBS, CD4NY	Unknown	%	8123-2
3325	CD4 (T Cells) Also used by tests: TBBS, TBNY, TCD4, CD4NY	Unknown	cells/mcL	24467-3
3320	% CD8 (T Cells) Also used by tests: TBBS, TCD4, CD4NY, TBNY	Unknown	%	8101-8
3326	CD8 (T Cells) Also used by tests: TBBS, TCD4, CD4NY, TBNY	Unknown	cells/mcL	14135-8
3318	% CD19 (B Cells) Also used by tests: TBBS, TBNY	Unknown	%	8117-4

Result ID	Reporting Name	Type	Unit	LOINC®
3324	CD19 (B Cells) Also used by tests: TBNY, TBBS	Unknown	cells/mcL	8116-6
4054	% CD16+CD56 (NK cells) Also used by tests: TBNY, TBBS	Unknown	%	8112-5
4055	CD16+CD56 (NK cells) Also used by tests: TBNY, TBBS	Unknown	cells/mcL	20402-4
3327	4/8 Ratio Also used by tests: TCD4, TBNY, TBBS, CD4NY	Unknown		54218-3
6657	Comment Also used by tests: TBNY, TBBS	Alphanumeric		80722-2
30296	CD19+ % of total Lymphocytes	Unknown	%	8117-4
29094	CD20+ % of total Lymphocytes	Unknown	%	8119-0
30298	CD27+ % of CD19+ B cells	Unknown	%	89358-6
30300	CD27+ IgM+ IgD+ % of CD19+ B cells	Unknown	%	89352-9
30302	CD27+ IgM- IgD- % of CD19+ B cells	Unknown	%	89350-3
30304	CD27+ IgM+ IgD- % of CD19+ B cells	Unknown	%	89348-7
30306	IgM+ % of CD19+ B cells	Unknown	%	89346-1
30308	CD38+ IgM- % of CD19+ B cells	Unknown	%	89344-6
30310	CD38+ IgM+ % of CD19+ B cells	Unknown	%	89341-2
30312	CD21+ % of CD19+ B cells	Unknown	%	89356-0
30314	CD21- % of CD19+ B cells	Unknown	%	89355-2
30297	CD19+	Alphanumeric	cells/mcL	8116-6
29095	CD20+	Alphanumeric	cells/mcL	9558-8
30299	CD27+	Alphanumeric	cells/mcL	89353-7
30301	CD27+ IgM+ IgD+	Alphanumeric	cells/mcL	89351-1
30303	CD27+ IgM- IgD-	Alphanumeric	cells/mcL	89349-5
30305	CD27+ IgM+ IgD-	Alphanumeric	cells/mcL	89347-9
30307	IgM+	Alphanumeric	cells/mcL	89345-3
30309	CD38+ IgM-	Alphanumeric	cells/mcL	89343-8
30311	CD38+ IgM+	Alphanumeric	cells/mcL	89357-8
30313	CD21+	Alphanumeric	cells/mcL	25164-5

Result ID	Reporting Name	Type	Unit	LOINC®
30315	CD21-	Alphanumeric	cells/mcL	89354-5
30316	Interpretation	Alphanumeric		80722-2

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
TBBS	QN Lymphocyte Subsets: T, B, and NK			Yes	Yes
IABC	Immune Assessment B Cell Subsets, B			Yes	No

CPT Code Information:

86355-B cells, total count
86357-Natural killer (NK) cells, total count
86359-T cells, total count
86360-Absolute CD4/CD8 count with ratio
86356 x7 - Mononuclear cell antigen, quantitative

Reference Values:

The appropriate age-related reference values will be provided on the report.