
Reporting Title: Lyme Disease Ab, Immunoblot, S
Performing Location: Rochester**Specimen Requirements:**

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 0.75 mL

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

0.5 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	Refrigerated (preferred)	14 days	
	Frozen	30 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
5744	IgG Immunoblot	Alphanumeric		6320-6
2992	IgG detected against:	Alphanumeric	kDa	13502-0
23931	IgM Immunoblot	Alphanumeric		6321-4
23932	IgM detected against:	Alphanumeric	kDa	13503-8
6241	Interpretation	Alphanumeric		12781-1

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86617 x 2

Reference Values:

IgG: Negative

IgM: Negative

Reference values apply to all ages