Helicobacter pylori Antigen, EIA, Stool

CPT Code: 87338 **Order Code:** 1375

Alternative Names: H. pylori Antigen, H. pylori Stool Antigen

ABN Requirement: No

Specimen: Stool

Minimum Volume: 0.5 mL or 0.5 g or 20 mm diameter

Container: Sterile, plastic leak-proof container (no preservatives)

Collection:

• Collect 0.5 mL or 0.5 g of semisolid stool or 20 mm diameter of solid stool and transfer to properly labeled sterile, plastic, leak-proof container.

Patient Preparation: To confirm eradication, testing should be done at least 4 weeks following the completion of treatment. However, a positive test result 7 days post therapy is indicative of treatment failure.

This test is cleared for use with specimens from pediatric patients.

For initial diagnostic purposes, no special patient preparation is required. Patients are not required to be off of medications or to fast before this test. While positive test results from patients taking agents such as proton pump inhibitors and antimicrobials should be considered accurate, false negative results may be obtained. For this reason, physicians may suggest the patient go off medications for two weeks and repeat test if negative results are obtained.

Transport: Store stool <u>frozen</u> at -20°C after collection and ship the same day per packaging instructions provided with the Cleveland HeartLab shipping box.

Stability:

Plastic leakproof container

Room temperature: 4 days

Refrigerated (cold packs): 4 days

Frozen: 14 days

Cary-Blair or C&S transport medium container

Room temperature: 4 days

Refrigerated (cold packs): 4 days

Frozen: Unacceptable

Causes for Rejection: Concentrated fecal specimens; Stool in transport media

other than those listed above; Swab

Methodology: Immunoassay (IA)

Turn Around Time: 2 to 4 days

Reference Range: Not detected

Clinical Significance: Colonization with *H. pylori* is associated with increased risk of patients developing gastritis, peptic ulcer disease, and gastric adenocarcinoma. Stool antigen testing provides a sensitive measure of infection including during and after treatment.

Limitations: There may be possible false-negative results associated with recent PPI use.

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.