Hepatitis A IgM Antibody

CPT Code: 86709 **Order Code:** 512

Includes: Hepatitis A IgM Antibody

ABN Requirement: No

Specimen:

Preferred: Serum

Alternative: EDTA Plasma

Volume: 1.0 mL

Minimum Volume: 0.5 mL

Container:

Preferred: Gel-barrier tube (SST)

Alternative: EDTA (Lavender Top) Tube

Collection:

Serum:

1. Collect and label sample according to standard protocols.

- 2. Gently invert tube 5 times immediately after draw. DO NOT SHAKE.
- 3. Allow blood to clot 30 minutes.
- 4. Centrifuge for 10 minutes.

EDTA Plasma:

- 1. Collect and label sample according to standard protocols.
- 2. Gently invert tube 10 times immediately after draw. DO NOT SHAKE.
- ${\it 3. Centrifuge \ specimen \ for \ 10 \ minutes.}$
- 4. Pre-squeeze transfer pipet bulb and draw off approximately 2/3 of the upper plasma.

Note: This ensures that the buffy coat and red cells remain undisturbed.

5. Aliquot plasma into transport tube labeled as "EDTA Plasma" and cap tightly. Discard original tube.

Collection Instructions: Dietary supplements containing biotin may interfere in assays and may skew analyte results to be either falsely high or falsely low. For patients receiving the recommended daily doses of biotin, draw samples at least 8

hours following the last biotin supplementation. For patients on mega-doses of biotin supplements, draw samples at least 72 hours following the last biotin supplementation.

Transport: Store specimen at 2°C to 8°C after collection and ship the same day per packaging instructions included with the provided shipping box.

Stability:

Ambient (15-25°C): 14 days **Refrigerated (2-8°C):** 14 days

Frozen (-20°C): 30 days

Causes for Rejection: Improper labeling; samples not stored properly; samples older than stability limits; gross hemolysis; gross lipemia

Methodology: Immunoassay (IA)

Turn Around Time: 1 to 3 days

Reference Range: Non-Reactive

Clinical Significance: IgM antibodies to Hepatitis A suggest a current, acute or recent Hepatitis A infection.

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.