

Overview**Method Name**

Enzyme Immunoassay (FEIA)

NY State Available

No

Specimen**Specimen Type**

Serum

Specimen Required

Draw blood in a plain red-top tube(s), serum gel tube(s) is acceptable. Spin down and send 0.5 mL of serum refrigerated in a plastic vial.

Specimen Minimum Volume

0.5 mL

Reject Due To

| | |
|-----------|----|
| Hemolysis | NA |
| Lipemia | NA |
| Icterus | NA |
| Other | NA |

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------------|----------|-------------------|
| Serum | Refrigerated (preferred) | 28 days | |
| | Frozen | 365 days | |
| | Ambient | 7 days | |

Clinical & Interpretive**Reference Values**

Reference ranges have not been established for food-specific IgG tests. The clinical utility of food-specific IgG tests has not been established. These tests can be used in special clinical situations to select foods for evaluation by diet

elimination and challenge in patients who have food-related complaints. It should be recognized that the presence of food-specific IgG alone cannot be taken as evidence of food allergy and only indicates immunologic sensitization by the food allergen in question. This test should only be ordered by physicians who recognize the limitations of the test.

Performance

PDF Report

No

Day(s) Performed

Monday through Friday

Report Available

3 to 7 days

Performing Laboratory Location

Eurofins Viracor

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

[This test was developed and its performance characteristics determined by Viracor Eurofins. It has not been cleared or approved by the U.S. Food and Drug Administration.](#)

CPT Code Information

86001

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|-----------------|--------------------|
| FVANG | Vanilla IgG | 60412-4 |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|------------------|---------------------|
| FVANG | Vanilla IgG | 60412-4 |