

**Overview**
**Method Name**

Real Time PCR

**NY State Available**

No

**Specimen**
**Specimen Type**

Varies

**Specimen Required**
**Submit only one of the following:**
**Whole Blood:** Collect 1 mL (lavender-top) EDTA or (yellow-top) ACD whole blood. Ship refrigerate.

**Serum:** Draw blood in a plain, red-top tube(s). (Serum gel tube is acceptable.) Separate immediately and submit 1 mL serum refrigerate in a plastic vial.

**Plasma:** Draw blood in a (lavender-top) EDTA or (yellow-top) ACD tube(s). (Plasma gel tube is acceptable.) Separate immediately and submit 1 mL plasma refrigerate in a plastic vial.

**CSF:** Collect 1 mL of spinal fluid (CSF) in sterile leak proof container. Ship refrigerate in a plastic vial.

**Bronchoalveolar Lavage:** Collect 1 mL in sterile leak proof container. Ship refrigerate in a plastic vial.

**Bone Marrow:** Collect 1 mL bone marrow in a (lavender-top) EDTA or (yellow-top) ACD tube. Ship refrigerate.

**Specimen Minimum Volume**

0.3 mL

**Reject Due To**

|            |                    |
|------------|--------------------|
| Hemolysis: | NA                 |
| Thawing:   | Warm OK; Cold OK   |
| Lipemia:   | NA                 |
| Icterus:   | NA                 |
| Other:     | Samples in heparin |

**Specimen Stability Information**

| Specimen Type | Temperature              | Time     | Special Container |
|---------------|--------------------------|----------|-------------------|
| Varies        | Refrigerated (preferred) | 7 days   |                   |
|               | Ambient                  | 48 hours |                   |

## Clinical and Interpretive

### Reference Values

<500 copies/mL

## Performance

### PDF Report

No

### Day(s) and Time(s) Test Performed

Monday through Saturday

### Analytic Time

1 - 3 days

### Maximum Laboratory Time

3 - 7 days

### Performing Laboratory Location

Quest Diagnostics Infectious Disease

## Fees and 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 Regional Manager. For assistance, contact [Customer Service](#).

### Test Classification

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Infectious Disease. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

### CPT Code Information

87533

### LOINC® Information

| Test ID | Test Order Name                  | Order LOINC Value |
|---------|----------------------------------|-------------------|
| FHV6D   | Herpes Virus 6 DNA, Quant RT-PCR | Unable to Verify  |

| Result ID | Test Result Name           | Result LOINC Value |
|-----------|----------------------------|--------------------|
| Z2995     | Source                     | 31208-2            |
| Z2996     | Herpes Virus 6 DNA, QN PCR | 38349-7            |