Overview

Method Name
Immunoassay; Ex Vivo Challenge; Cell Culture and Histamine Analysis

NY State Available
Yes

Specimen

Specimen Type
Serum

Specimen Required

Patient preparation: Patients taking calcineurin inhibitors should stop medication 72 hours prior to draw. Patients taking prednisone should be off their medication for 2 weeks prior to draw.

Specimen Type: Serum

Container/Tube: Red or SST

Specimen Volume: 3 mL

Collection Instructions: Draw blood in Red-top tube (SST is acceptable). Separate from cells within 2 hours of draw. Send 3 mL of serum refrigerate in a plastic vial.

Specimen Minimum Volume
1 mL

Reject Due To

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hemolysis</td>
<td>NA</td>
</tr>
<tr>
<td>Thawing:</td>
<td>Warm OK; Cold OK</td>
</tr>
<tr>
<td>Lipemia:</td>
<td>NA</td>
</tr>
<tr>
<td>Icterus:</td>
<td>NA</td>
</tr>
<tr>
<td>Other:</td>
<td>NA</td>
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</table>

Specimen Stability Information

<table>
<thead>
<tr>
<th>Specimen Type</th>
<th>Temperature</th>
<th>Time</th>
<th>Special Container</th>
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</thead>
<tbody>
<tr>
<td>Serum</td>
<td>Refrigerated (preferred)</td>
<td>7 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Frozen</td>
<td>7 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ambient</td>
<td>5 days</td>
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</tbody>
</table>
Clinical and Interpretive

Reference Values
Anti-Thyroid Peroxidase IgG: <35 IU/mL
Anti-Thyroglobulin IgG: <40 IU/mL
TSH (Thyrotropin): 0.4 – 4.0 uIU/mL
CU Index: <10.0

The CU Index test is the second generation Functional Anti-FceR test. Patients with a CU Index greater than or equal to 10 have basophil reactive factors in their serum which supports an autoimmune basis for disease.

Performance

PDF Report
No

Day(s) and Time(s) Test Performed
Monday, Wednesday, Friday

Analytic Time
2 - 5 days

Maximum Laboratory Time
4 - 9 days

Performing Laboratory Location
Viracor Eurofins

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 performance characteristics determined by Viracor Eurofins. It has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information
84443
86343
86376
### Test Definition: FCUIP

**CU (Chronic Urticaria) Index Panel**

### LOINC® Information

<table>
<thead>
<tr>
<th>Test ID</th>
<th>Test Order Name</th>
<th>Order LOINC Value</th>
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<tbody>
<tr>
<td>FCUIP</td>
<td>CU (Chronic Urticaria) Index Panel</td>
<td>69040-4</td>
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<table>
<thead>
<tr>
<th>Result ID</th>
<th>Test Result Name</th>
<th>Result LOINC Value</th>
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<tbody>
<tr>
<td>Z3144</td>
<td>Anti-Thyroid Peroxidase IgG</td>
<td>18332-7</td>
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<tr>
<td>Z3145</td>
<td>Anti-Thyroglobulin IgG</td>
<td>56635-6</td>
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<tr>
<td>Z3146</td>
<td>TSH (Thyrotropin)</td>
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<tr>
<td>Z3147</td>
<td>CU Index</td>
<td>63369-3</td>
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