

**Overview****Method Name**

Quantitative Polymerase Chain Reaction

**NY State Available**

Yes

**Specimen****Specimen Type**

Varies

**Specimen Required****Submit only one of the following:****CSF:**

Collect 1 mL spinal fluid (CSF) in sterile plastic container and ship frozen.

**Serum:**

Draw blood in serum gel tube(s). Spin down and send 1 mL of serum frozen in a plastic vial.

**Plasma:**

Draw blood in lavender (EDTA), pink (K2EDTA) tube(s), or (yellow ACD) tube(s). Spin down and send 1 mL of plasma frozen in a plastic vial.

**Note:**

1. Source required.
2. Separate orders required for each specimen.

**Specimen Minimum Volume**

0.5 mL

**Reject Due To**

Hemolysis	Mild OK; Grossly Reject
Lipemia	NA
Icterus	NA
Other	Heparinized specimens, Stool

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Frozen (preferred)	90 days	
	Refrigerated	5 days	

## Clinical and Interpretive

### Reference Values

Not detected

The quantitative range of this assay is 3.0 – 6.0 log copies/mL (1,000 - 999,000 copies/mL).

A negative result (less than 3.0 log copies/mL or less than 1,000 copies/mL) does not rule out the presence of PCR inhibitors in the patient specimen or HHV6 DNA in concentrations below the level of detection of the test. Inhibition may also lead to underestimation of viral quantitation.

### Cautions

No international standard is currently available for calibration of this assay. Caution should be taken when interpreting results generated by different assay methodologies.

## Performance

### PDF Report

No

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

Tuesday through Saturday

### Analytic Time

1 - 4 days

### Maximum Laboratory Time

3 - 8 days

### Performing Laboratory Location

ARUP Laboratories

## 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

Analyte specific reagents (ASR) are used in many laboratory tests necessary for standard medical care and generally do not require U.S. Food and Drug Administration (FDA) approval or clearance. This test was developed

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and its performance characteristics determined by ARUP Laboratories. The U.S. Food and Drug Administration has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions. This test should not be regarded as investigational or for research use.

**CPT Code Information**

87533

**LOINC® Information**

Test ID	Test Order Name	Order LOINC Value
FH6AB	HHV-6A and HHV-6B	38351-3

Result ID	Test Result Name	Result LOINC Value
Z4275	HHV6 by PCR Source	31208-2
Z4276	HHV6 by PCR Type	38348-9
Z4277	HHV6 Quant by PCR (copy/mL)	38349-7
Z4278	HHV6 Quant by PCR (log copy/mL)	38350-5
Z4279	HHV6 by PCR interp	51730-0