

Overview**Method Name**

Enzyme Linked Immunosorbent Assay (ELISA)

NY State Available

Yes

Specimen**Specimen Type**

CSF

Specimen Required**Specimen Type:** Spinal Fluid**Sources:** CSF**Container/Tube:** Sterile container**Specimen Volume:** 1 mL**Collection Instructions:** Submit 1 mL of spinal fluid (CSF) in a sterile, plastic screw-cap vial. Refrigerate specimen after collection and ship at refrigerate temperature.**Specimen Minimum Volume**

0.5 mL

Reject Due To

Hemolysis	Mild OK; Gross reject
Lipemia	Mild OK; Gross reject
Icterus	Mild OK; Gross reject
Other	Non CSF specimens; bacterially contaminated specimens

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	14 days	
	Frozen	30 days	
	Ambient	7 days	

Clinical and Interpretive

Reference Values

Reference Range:

IgG:<0.90

IgM:<0.80

INTERPRETIVE CRITERIA:

IgG:

<0.90Antibody not detected

0.9-1.09Equivocal

>or=1.10Antibody detected

IgM:

<0.80Antibody not detected

0.80-0.99Equivocal

Interpretation

Diagnosis of central nervous system infections can be accomplished by demonstrating the presence of intrathecally-produced specific antibody. Interpreting results may be complicated by low antibody levels found in CSF, passive transfer of antibody from blood and contamination via bloody taps. The interpretation of CSF results must consider CSF-serum antibody ratios to the infectious agent.

Performance**PDF Report**

No

Day(s) and Time(s) Test Performed

Tuesday, Friday

Analytic Time

1-5 days

Maximum Laboratory Time

3-7 days

Performing Laboratory Location

Quest Diagnostics Infectious Disease

Fees and Codes**Fees**

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- 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](#).

CPT Code Information

86777-IgG

86778-IgM

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
FGGMC	Toxoplasma gondii IgG and IgM, CSF	Not Provided

Result ID	Test Result Name	Result LOINC Value
Z5528	T. gondii IgG	30038-4
Z5529	T. gondii IgM	31178-7