

# **Test Definition: FVZGC**

Varicella-Zoster Virus Antibody, IgG, CSF

# **Overview**

# **Method Name**

Semi-Quantitative Chemiluminescent Immunoassay

#### **NY State Available**

No

# **Specimen**

# **Specimen Type**

**CSF** 

# **Specimen Required**

Specimen Type: Spinal fluid (CSF)

Container/Tube: Sterile plastic container

**Specimen Volume:** 0.5 mL **Collection Instructions:** 

1. Collect 0.5 mL CSF in sterile plastic container.

2. Ship refrigerated.

# **Specimen Minimum Volume**

0.3 mL

# **Reject Due To**

Hemolysis	Reject
Specimens	Reject
other than CSF	
Contaminated	
or	
heat-inactivate	
d specimens	
Xanthochromic	
specimens	
(yellow color)	

# **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	14 days	



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Frozen	365 days	
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## Clinical & Interpretive

#### **Reference Values**

0.99 S/CO or less: Negative - No significant level of detectable varicella-zoster IgG antibody.

1.00 S/CO or greater: Positive - IgG antibody to varicella-zoster detected, which may indicate a current or past varicella-zoster infection.

#### Interpretation

The detection of antibodies to varicella-zoster in cerebrospinal fluid may indicate central nervous system infection. However, consideration must be given to possible contamination by blood or transfer of serum antibodies across the blood-brain barrier.

#### **Performance**

#### **PDF Report**

No

### Day(s) Performed

Sunday through Saturday

#### Report Available

3 to 5 days

### **Performing Laboratory Location**

**ARUP** Laboratories

#### Fees & Codes

#### **Fees**

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

### **Test Classification**

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.



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104459-3

# **CPT Code Information**

86787

Z4272

# **LOINC®** Information

Test ID FVZGC	VZV Antibody IgG CSF	Order LOINC® Value 104459-3
FVZGC	VZV Altibody igo CSF	104453-5

VZV Antibody IgG CSF