MAYO CLINIC LABORATORIES

Test Definition: FHST

MVista Histoplasma Ag Quantitative EIA

Overview

Method Name
Quantitative Sandwich Enzyme Immunoassay (EIA)

NY State Available
Yes

Specimen

Specimen Type
Varies

Specimen Required
Specimen Type: Bronchial washing or body fluid
Container/Tube: Sterile, leak-proof screw cap container
Specimen Volume: 2 mL
Collection Instructions:
1. Collect 2 mL of bronchial washing or body fluid in a sterile, leak-proof screw cap container.
2. **Label with specimen type (required)**.
3. Send refrigerate.
Note:
1. MiraVista will test most body fluids with the following disclaimer: The reference range and other method performance specifications have not been established for this test in this type of body fluid. The test results should be integrated into the clinical context for interpretation.
2. New York approved for Urine, Serum, Plasma, spinal fluid (CSF), and bronchoalveolar lavage (BAL) specimens.

Specimen Minimum Volume
Bronchial washing/Body fluid: 0.5 mL (Note: Minimum volume does not allow for repeats.)

Reject Due To

Specimen that is too viscous to pipette.	Reject
Tissue, biopsy, sputum, bronchial brush, tracheal aspirate, fine needle	Reject

aspirate, bone marrow aspirate, stool or specimens	
Specimens in transport media, fixative or Isolator tubes	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	14 days	
	Ambient	14 days	
	Frozen		

Clinical & Interpretive

Clinical Information
Refer to https://miravistalabs.com/

Reference Values
Reference interval: None Detected

Reportable Range: Positive Results reported in ng/mL from 0.20 ng/mL to 20.00 ng/mL

Positive Results above 20.00 ng/mL are reported as “Above the Limit of Quantification"

Cautions
Cross-reactions are seen with blastomycosis, paracoccidioidomycosis, penicilliosis, less frequently in coccidioidomycosis, rarely in aspergillosis and possibly sporotrichosis.
Sputolysin, sodium hydroxide and potassium hydroxide treatment degrade the analyte detected in the assay.

Performance

PDF Report
No

Day(s) Performed
Monday through Friday

Report Available
3 to 5 days

Performing Laboratory Location
MiraVista Diagnostics

Fees & 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 account representative. For assistance, contact Customer Service.

Test Classification
This test was developed and its performance characteristics determined by MiraVista Diagnostics. It has not been cleared or approved by the FDA; 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.

CPT Code Information
87385

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FHST	MVista Histoplasma Antigen	57766-8

Result ID	Test Result Name	Result LOINC® Value
Z1746	Specimen Type	31208-2
Z1747	Result	57766-8
Z1748	Interpretation	59464-8