

**Overview****Method Name**

Quantitative Sandwich Enzyme Immunoassay (EIA)

**NY State Available**

Yes

**Specimen****Specimen Type**

Varies

**Specimen Required**

Submit only 1 of the following specimens:

**Bronchial Washing**

Collect 2 mL of Bronchial Washing in leak proofed container.

Ship refrigerate.

Required:

1. Label specimen appropriately (Bronchial Washing)

**Body Fluid**

Collect 2 mL of Body Fluid in leak proofed container.

Ship refrigerate.

Required:

1. Label specimen appropriately (Type of Body Fluid)

**Note:** 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.

**Note:** Minimum volume does not allow for repeats.

**Specimen Minimum Volume**

0.5 mL

**Reject Due To**

Other	Specimen that is too viscous to pipette. Tissue, biopsy, sputum, bronchial brush, tracheal aspirate, FNA, bone marrow aspirate, stool or samples in transport media, fixative or Isolator tubes
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**Specimen Stability Information**

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

**Clinical & Interpretive****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