MAYO CLINIC LABORATORIES

TEST OBSOLETE

Notification Date: September 23, 2025
Effective Date: November 4, 2025

Toxoplasma gondii Antibody, IgG, Serum

Test ID: TOXGP

Explanation:
Toxoplasma gondii Antibody, IgG, Serum test will be obsolete on effective date due to a test platform change.

Recommended Alternative Test:

Toxoplasma gondii Antibody, IgG, Serum

Test ID: TXPG

Useful for:
- Quantitative detection of IgG antibodies to *Toxoplasma gondii.*
- This test is **not useful for** diagnosing infection in infants younger than 6 months of age. In that age group, IgG antibodies usually are the result of passive transfer from the mother.

Methods:
Electrochemiluminescence Immunoassay (ECLIA)

Reference Values:
Negative
<1 IU/mL Negative
> or =1-<3 IU/mL Borderline
> or =3 IU/mL Positive
Reference values apply to all ages.

Specimen Requirements:

Supplies:	Sarstedt Aliquot Tube 5 mL (T914)
Collection Container/Tube:	
Preferred:	Serum gel
Acceptable:	Red top
Submission Container/Tube:	Plastic vial
Specimen Volume:	0.6 mL
Minimum Volume:	0.6 mL
Collection Instructions:	Centrifuge and aliquot serum into a plastic vial

Specimen Stability Information:

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	21 days
	Ambient	72 hours
	Frozen	90 days

Cautions:

- Diagnosis of recent or active infection by *Toxoplasma gondii* can only be established based on a combination of clinical and serological data. The result of a single serum sample does not constitute sufficient proof for diagnosis of recent infection.
- A suspected diagnosis of central nervous system or congenital toxoplasmosis should be confirmed by detection of *Toxoplasma gondii* DNA by polymerase chain reaction (PCR) analysis of cerebrospinal fluid or amniotic fluid specimens, respectively (PTOX / *Toxoplasma gondii*, Molecular Detection, PCR, Varies).
- To differentiate between a recently acquired and past infection in patients who are IgM and IgG positive for *Toxoplasma* antibodies, *Toxoplasma* IgG avidity testing should be considered. A high avidity index for IgG antibodies indicates that the infection occurred at least 4 months ago. No clinical interpretation can be deduced from a low avidity result.
- A negative *Toxoplasma* IgM result in combination with a positive IgG result does not completely rule out the possibility of an acute infection with *Toxoplasma.*
- The detection of Toxoplasma-specific IgG antibodies in a single specimen indicates a previous exposure to T. gondii but is not sufficient to distinguish between an acute or latent infection (irrespective of the level of the IgG antibody titer).
- Individuals may not exhibit any detectable IgG antibodies at the early stage of acute infection.
- Elevated anti-IgM or IgG titers may be absent in patients who are immunocompromised. Results should be interpreted with caution in patients who are either HIV-positive, receiving immunosuppressive therapy, or have other disorders leading to immunosuppression.
- The performance of the assay has not been established for cord blood testing. Specimens from neonates, pretransplant patients or body fluids other than serum and plasma, such as urine, saliva or amniotic fluid have not been tested.
- Specimens should not be collected from patients receiving therapy with high biotin doses (ie, > 5 mg/day) until at least 8 hours following the last biotin administration.

CPT Code:

86777

Day(s) Performed: Monday through Saturday **Report Available:** Same day/1 to 3 days

Questions

Contact Dunisha Messmer, Laboratory Resource Coordinator at 800-533-1710.