MAYO CLINIC LABORATORIES

NEW TEST

Notification Date: October 6, 2026
Effective Date: November 10, 2026

Peripheral Nervous System Comprehensive Neuropathy, Autoimmune Evaluation, Serum

Test ID: CNES

Useful for:
Evaluating patients with suspected immune mediated peripheral neuropathy

Profile Information:

Test ID	Reporting Name	Available Separately	Always Performed
AGN1S	Anti-Glial Nuclear Ab, Type 1	No	Yes
AMPHS	Amphiphysin Ab, S	No	Yes
ANN1S	Anti-Neuronal Nuclear Ab, Type 1	No	Yes
ANN3S	Anti-Neuronal Nuclear Ab, Type 3	No	Yes
APBIS	AP3B2 IFA, S	No	Yes
CNEI	Comprehensive Neuropathy Interp, S	No	Yes
CONCS	Contactin-1 IgG CBA, S	No	Yes
CRMS	CRMP-5-IgG, S	No	Yes
CS1CS	CASPR1-IgG CBA, S	No	Yes
CS2CS	CASPR2-IgG CBA, S	No	Yes
GQ1ES	GQ1b-IgG ELISA, S	Yes	Yes
IG5CS	IgLON5 CBA, S	No	Yes
IGG_D	IgG Disialo. GD1b	No	Yes
IGG_M	IgG Monos. GM1	No	Yes
IGM_D	IgM Disialo. GD1b	No	Yes
IGM_M	IgM Monos. GM1	No	Yes
LG1CS	LGI1-IgG CBA, S	No	Yes
MAGES	MAG IgM, S	Yes	Yes
NF4FS	Neurofascin-155 IgG4, S	No	Yes
PCAB2	Purkinje Cell Cytoplasmic Ab Type 2	No	Yes

Reflex Tests:

Test ID	Reporting Name	Available Separately	Always Performed
AGNBS	AGNA-1 Immunoblot, S	No	No
AGNTS	AGNA-1 Titer, S	No	No
AMIBS	Amphiphysin Immunoblot, S	No	No
AN1BS	ANNA-1 Immunoblot, S	No	No

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Test ID	Reporting Name	Available Separately	Always Performed
AN1TS	ANNA-1 Titer, S	No	No
AN2BS	ANNA-2 Immunoblot, S	No	No
AN3TS	ANNA-3 Titer, S	No	No
APBCS	AP3B2 CBA, S	No	No
APBTS	AP3B2 IFA Titer, S	No	No
APHTS	Amphiphysin Ab Titer, S	No	No
CRMTS	CRMP-5-IgG Titer, S	No	No
CRMWS	CRMP-5-IgG Western Blot, S	No	No
IG5TS	IgLON5 IFA Titer, S	No	No
IGDTS	IgG Disialo GD1b Titer, S	No	No
IGMTS	IgG Monos GM1 Titer, S	No	No
IMDTS	IgM Disialo GD1b Titer, S	No	No
IMMTS	IgM Monos GM1 Titer, S	No	No
MP1BS	MAP1B Immunoblot, S	No	No
PC2TS	PCA-2 Titer, S	No	No

Methods:

- CS1CS, CS2CS, CONCS, IG5CS, LG1CS, APBCS: Cell Binding Assay (CBA)
- GQ1ES, IGG_D, IGG_M, IGM_D, IGM_M, MAGES, IGDTS, IGMTS, IMDTS, IMMTS: Enzyme-Linked Immunosorbent Assay (ELISA)
- NF4FS: Flow Cytometry
- AMPHS, AGN1S, ANN1S, ANN3S, APBIS, CRMS, PCAB2, AGNTS, APHTS, AN1TS, AN3TS, APBTS, CRMTS, IG5TS, PC2TS: Indirect Immunofluorescence Assay (IFA)
- CRMWS: Western Blot (WB)
- AGNBS, AMIBS, AN1BS, AN2BS, MP1BS: Immunoblot (IB)
- CNEI: Technical Interpretation

Reference Values:

Test ID	Reporting Name	Methodology*	Reference Value
CNEI	Comprehensive Neuropathy Interp, S	Interpretation	N/A
AGN1S	Anti-Glial Nuclear Ab, Type 1	IFA	Negative
AMPHS	Amphiphysin Ab, S	IFA	Negative
ANN1S	Anti-Neuronal Nuclear Ab, Type 1	IFA	Negative
ANN3S	Anti-Neuronal Nuclear Ab, Type 3	IFA	Negative
APBIS	AP3B2 IFA, S	IFA	Negative
CONCS	Contactin-1 IgG CBA, S	CBA	Negative
CRMS	CRMP-5-IgG, S	IFA	Negative
CS1CS	CASPR1-IgG CBA, S	CBA	Negative
CS2CS	CASPR2-IgG CBA, S	CBA	Negative
GQ1ES	GQ1b ELISA, S	ELISA	Negative
IG5CS	IgLON5 CBA, S	CBA	Negative
IGG_D	IgG Disialo. GD1b	ELISA	Negative
IGG_M	IgG Monos. GM1	ELISA	Negative
IGM_D	IgM Disialo. GD1b	ELISA	Negative

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Test ID	Reporting Name	Methodology*	Reference Value
IGM_M	IgM Monos. GM1	ELISA	Negative
LG1CS	LGI1-IgG CBA, S	CBA	Negative
MAGES	MAG IgM, S	ELISA	<1500
NF4FS	Neurofascin-155 IgG4, S	FC	Negative
PCAB2	Purkinje Cell Cytoplasmic Ab Type 2	IFA	Negative

*Methodology abbreviations:
Cell-binding assay (CBA)
Enzyme-linked immunosorbent assay (ELISA)
Flow cytometry (FC)
Immunoblot (IB)
Immunofluorescence assay (IFA)
Western blot (WB)

Specimen Requirements:

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)
Collection Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 3 mL
Collection Instructions: Centrifuge and aliquot serum into a plastic vial.
Minimum Volume: 2 mL

Specimen Stability Information:

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	28 days
	Ambient	72 hours
	Frozen	28 days

Cautions:

Negative results do not exclude a diagnosis of an immune-mediated neuropathy. Autoantibody results should always be correlated with the clinical phenotype. The use of immunotherapy prior to sample collection may result in either false positive or false negative results.

The use of immunotherapy prior to sample collection may result in either false-positive or false-negative results.

CPT Code:

86255 x14
83516 x5
83520
84182 AGNBS (if appropriate)
86256 AGNTS (if appropriate)
86256 APHTS (if appropriate)
84182 AMIBS (if appropriate)
84182 AN1BS (if appropriate)
86256 AN1TS (if appropriate)
84182 AN2BS (if appropriate)
86256 AN3TS (if appropriate)

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86255 APBCS (if appropriate)
86256 APBTS (if appropriate)
86256 CRMTS (if appropriate)
84182 CRMWS (if appropriate)
83520 IGDTS (if appropriate)
83520 IGMTS (if appropriate)
86256 IG5TS (if appropriate)
83520 IMDTS (if appropriate)
83520 IMMTS (if appropriate)
84182 MP1BS (if appropriate)
86256 PC2TS (if appropriate)

Day(s) Performed: Monday through Sunday

Report Available: 8 to 12 days

Questions

Contact Amy Ennis or Ellen Lexvold, Laboratory Resource Coordinator at 800-533-1710.

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