Labcorp Oklahoma, Inc. Test Directory

Blastomyces dermatitidis Ab

Code

Notes

CPT Code(s)

Lab Section

Labcorp Test Code: 165052

86612; if reflexed, add 86612

Reference Lab

Order Name: Blasto Ab
Test Number: 5501505
Revision Date: 02/19/2024

TEST NAME			METHODOLOGY	LOINC CODE	
Blastomyces dermatition	lis Ab		Enzyme immunoassay (EIA)	16471-5	
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	1 mL (0.5 mL)	Serum	Clot Activator (SST or Red No-Gel)	Room Temperature	
Instructions	Specimen Type: Gel-barrier Tube, Serum from a Gel-barrier Tube, Serum from a Red-top Tube, Serum Transfer Tube Special Instructions: If Blastomyces antibodies are equivocal or positive by EIA then Blastomyces Antibodies, Quantitative, DID will be added at an additional charge. Specimen Stability: Ambient: 14 days, Refrigerated: 14 days, Frozen: 14 days				
GENERAL INFORMATION Expected TAT 1 - 3 days					
Clinical Use	current infection. Diagnosis of Blastomycos serologic evaluation for b is highly specific, the orga Similarily, molecular testil response to Blastomyces immunosuppressed patie A positive result indicates evidence that the patient Blastomyces were not de However, the specimen in suspected, another speci	Diagnosis of Blastomycosis relies on a combination of assays, including culture and molecular testing on appropriate specimens and serologic evaluation for both antibodies to and antigen released from Blastomyces. Although culture remains the gold standard method and is highly specific, the organism can take several days to weeks to grow, and sensitivity is diminished in cases of acute or localized disease. Similarily, molecular testing offers high specificity and a rapid turnaround time, however, sensitivity is imperfect. Detection of an antibody response to Blastomyces offers high specificity, however, results may be falsely negative in acutely infected patients and in immunosuppressed patients. A positive result indicates that IgG and/or IgM antibodies to Blastomyces were detected. The presence of antibodies is presumptive evidence that the patient was or is currently infected with (or was exposed to) Blastomyces. A negative result indicates that antibodies to Blastomyces were not detected. The absence of antibodies is presumptive evidence that the patient was not infected with Blastomyces. However, the specimen may have been obtained before antibodies were detectable or the patient may be immunosuppressed. If infection is suspected, another specimen should be collected 7 to 14 days later and submitted for testing.			
Performing Labcorp Te	st 165052				

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