## **Celiac Disease HLA DQ Association**

Order Name: **CELIAC HLA**Test Number: 5194335
Revision Date: 12/12/2022

TEST NAME		METH	ODOLOGY	LOINC CODE	
Celiac Disease HLA DQ Association		Polym	erase Chain Reaction		
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	7 mL mL (3 mL)	EDTA Whole Blood	EDTA (Lavender Top)		
Alternate 1	See Instructions	Buccal swab	See Instructions	See Instructions	
Instructions	Notes: 3 mL or four buccal swabs				
	Specimen Type: Lavender-top (EDTA) tube or four buccal swabs in a sealed envelope (buccal swab kit). If submitting buccal swabs, please use the				
	kit provided by LabCorp. To obtain the buccal swab kit or to discuss other specimen types, please telephone 800-533-1037.				
	Specimen Storage: Maintain spe	cimen at room temperature. Protect	from extreme heat or cold.		
	Specimen Collection: Not Availa	ble			
	Special Instructions: If you have questions, please telephone HLA customer service at 800-533-1037 for assistance in selecting the appropriate			nce in selecting the appropriate	
	HLA test for the patient.				

Specimen Stability: Ambient: Not Available, Refrigerated : Not Available, Frozen: Not Available

GENERAL INFORMATION		
Expected TAT	3-7 Days	
Clinical Use	Aids in the diagnosis of celiac disease. The HLA DQ Association test provides genotyping for detection of HLA-DQ2 (DQA1*05:01 or 05:05 and DQB1*02:01 or 02:02) and HLA-DQ8 (DQB1*03:02). Patients with DQ2, half DQ2 and/or DQ8 are predisposed to celiac disease. A negative result essentially rules out celiac disease. In addition to DQ2 and DQ8 status, the report also includes complete DQA and DQB genotypes, homozygosity for DQB1*02, and genetic risk assessment.	
Performing Labcorp Test Code	167082	
Notes	Labcorp Test Code: 167082	
CPT Code(s)	81377x2	
Lab Section	Reference Lab	

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