## **Enterovirus Antibody Panel (CSF)**

Order Name: CSF ENTERO
Test Number: 5573150
Revision Date: 04/02/2024

TEST NAME	METHODOLOGY	LOINC CODE
Coxsackie A Virus Antibodies - CSF	Complement fixation (CF)	
Echovirus Antibodies - CSF	Complement fixation (CF)	

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	6 mL (2 mL)	CSF (Cerebrospinal Fluid)	Sterile Screwtop Container	Refrigerated
Instructions	Preferred to have four (1 - 2mL) individual aliquots for testing the individual viruses.			

GENERAL INFORMATION		
Testing Schedule	Tue-Sat	
Expected TAT	3-6 Days	
Notes	See individual asays for more information.	
CPT Code(s)	86658x6, 86658x5	
Lab Section	Reference Lab	

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