Labcorp Oklahoma, Inc. Test Directory

Saccharomyces cerevisiae Antibody, IgG

Order Name: **GASCA** Revision Date: 10/11/2019

TEST NAME		MET	HODOLOGY	LOINC CODE	
Saccharomyces cerevisiae Antibody, IgG					
SPECIMEN REQUIREM	IENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	0.5 mL (0.4 mL)	Serum	Serum Gel Tube	Refrigerated	
Instructions	Label specimen with Mobilab label or with patient name (first and last), date of birth, date and time of collection, collector initials, and test(s) being ordered.				
Reference Range	An interpretive report will be provided.				
Methodology	Enzyme-Linked Immunosorbent Assay (ELISA)				
GENERAL INFORMATION					

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Testing Schedule	Monday-Friday; 1700		
Expected TAT	2 Days		
Notes	Specimen Stability: Refrigerated (preferred) - 21 Days Frozen - 21 Days		
CPT Code(s)	86671		
Lab Section	NRLS-Mayo Medical Laboratories		