

**Overview****Method Name**

Enzyme Immunoassay

**NY State Available**

Yes

**Specimen****Specimen Type**

Serum

**Specimen Required****Specimen Type:** Serum**Container/Tube:** Red or SST**Specimen Volume:** 0.5 mL**Collection Instructions:** Draw blood in a plain red-top tube(s), serum gel tube(s) is acceptable. Spin down and send 0.5 mL of serum refrigerated in a plastic vial.**Specimen Minimum Volume**

0.5 mL

**Reject Due To**

|         |        |
|---------|--------|
| Lipemia | Reject |
|---------|--------|

**Specimen Stability Information**

| Specimen Type | Temperature              | Time     | Special Container |
|---------------|--------------------------|----------|-------------------|
| Serum         | Refrigerated (preferred) | 28 days  |                   |
|               | Ambient                  | 28 days  |                   |
|               | Frozen                   | 365 days |                   |

**Clinical & Interpretive****Reference Values**

Negative

**Interpretation**

The Phadia Phadiatop test is an allergy screening test with excellent sensitivity and specificity for inhalant allergy. It uses an ImmunoCAP with a balanced mixture of representative allergens, including grasses, trees, weeds, cat, dog, mites and molds. A positive result indicates that the patient is allergic to one or more of these allergens; a negative indicates the patient is not allergic to inhalant allergens. Note that the test does not assess a patient's sensitivity to food, drug, chemical or certain unusual or rare allergens.

**Performance****PDF Report**

No

**Day(s) Performed**

Monday through Friday

**Report Available**

3 to 6 days

**Performing Laboratory Location**

Eurofins Viracor

**Fees & Codes****Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

**CPT Code Information**

86005

**LOINC® Information**

| Test ID   | Test Order Name            | Order LOINC® Value  |
|-----------|----------------------------|---------------------|
| FPHAS     | Phadiatop (Allergy Screen) | 57036-6             |
| Result ID | Test Result Name           | Result LOINC® Value |
| FPHAS     | Phadiatop (Allergy Screen) | 57036-6             |