

**Overview****Reflex Tests**

| Test Id | Reporting Name      | Available Separately | Always Performed |
|---------|---------------------|----------------------|------------------|
| FOVAT   | Anti-Ovary Ab Titer | No                   | No               |

**Testing Algorithm**

If FOVAS "Ovarian Ab Screen w/Reflex" is positive, then FOVAT "Anti-Ovary Ab Titer" will be performed at an additional charge.

**Method Name**

Immunofluorescence Assay (IFA)

**NY State Available**

Yes

**Specimen****Specimen Type**

Serum

**Specimen Required**

Draw blood in a plain red-top tube(s), serum gel tube(s) is acceptable. Spin down and send 1 mL of serum refrigerated in a plastic vial.

**Specimen Minimum Volume**

0.3 mL

**Reject Due To**

|           |                       |
|-----------|-----------------------|
| Hemolysis | Mild OK; Gross reject |
| Lipemia   | Mild OK; Gross reject |
| Icterus   | NA                    |
| Other     | NA                    |

**Specimen Stability Information**

| Specimen Type | Temperature | Time | Special Container |
|---------------|-------------|------|-------------------|
|---------------|-------------|------|-------------------|

|       |                          |         |  |
|-------|--------------------------|---------|--|
| Serum | Refrigerated (preferred) | 14 days |  |
|       | Ambient                  | 7 days  |  |
|       | Frozen                   | 30 days |  |

## Clinical & Interpretive

### Reference Values

Anti-Ovary Antibody: Negative

Anti-Ovary Ab Titer: <1:5

## Performance

### PDF Report

No

### Day(s) Performed

Wednesday

### Report Available

2 to 17 days

### Performing Laboratory Location

Quest Diagnostics Nichols Institute

## 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

86255

86256 (if appropriate)

### LOINC® Information

| Test ID | Test Order Name            | Order LOINC® Value |
|---------|----------------------------|--------------------|
| FOVAS   | Ovarian Ab Screen w/Reflex | 21436-1            |

| Result ID | Test Result Name    | Result LOINC® Value |
|-----------|---------------------|---------------------|
| Z3669     | Anti-Ovary Antibody | 21436-1             |