

Overview**Method Name**

Enzyme immunoassay (FEIA)

NY State Available

Yes

Specimen**Specimen Type**

Serum

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

0.5 mL

Reject Due To

| | |
|------------------|-----------------------|
| Gross hemolysis: | Mild OK; Gross Reject |
| Thawing: | Warm OK; Cold OK |
| Gross lipemia: | Reject |
| Gross icterus: | NA |
| Other: | NA |

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------|----------|-------------------|
| Serum | Frozen (preferred) | 365 days | |
| | Ambient | 7 days | |
| | Refrigerated | 28 days | |

Clinical & Interpretive

Clinical Information

Although there have been many publications concerning the measurement of allergen-specific IgG, the clinical utility of such tests has not been established except in special situations. Thus, the quantitative IgG test should only be ordered by specialists who recognize the limitations of the test. The normal reference ranges reported represent the expected results for individuals who have no unusual exposure and have not been immunized with the indicated allergen. The ranges reported have no disease-associated significance.

Reference Values

<52.0 mcg/mL

Performance

Method Description

Enzyme immunoassay (FEIA). A standard curve is used to calculate the specific IgG concentrations. The calibrators are referenced to the International Reference Preparation for serum immunoglobulins.

PDF Report

No

Report Available

3 to 7 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](#).

Test Classification

This test was developed and its performance characteristics determined By Viracor Eurofins. It has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information

86001

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|----------------------|--------------------|
| FCANG | Candida albicans IgG | Not Provided |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|----------------------|---------------------|
| FCANG | Candida albicans IgG | Not Provided |