MAYO CLINIC LABORATORIES

Test Definition: FPHET

Anti-Phosphatidylethanolamine Panel

Overview

Method Name
Enzyme-Linked Immunosorbent Assay (ELISA)

NY State Available
Yes

Specimen

Specimen Type
Serum

Specimen Required
Specimen Type: Serum
Container/Tube: Red Top or SST
Specimen Volume: 3 mL
Collection Instructions: Draw blood in a plain red-top tube(s), serum gel tube is acceptable. After collection, allow blood to clot for 30 minutes. Spin down and send 3 mL of serum frozen in a plastic vial.

Specimen Minimum Volume
0.5 mL

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject
List other reasons for rejection	Specimens other than serum. Microbially contaminated specimens.

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Serum	Frozen (preferred)	30 days	
	Refrigerated	14 days	

Clinical & Interpretive

Clinical Information

The anti-phospholipid syndrome (APS) is a disorder of recurrent vascular thrombosis associated with persistently positive anticardiolipin (aCL) or lupus anticoagulant tests. In patients with APS, anticardiolipin antibodies bind a variety of charged phospholipids, including phosphatidylethanolamine, as well as they do cardiolipin. Lupus patients also have high titers of autoantibodies to various phospholipids, including phosphatidylethanolamine.

Presentations of the syndrome include thrombosis of deep veins of the legs, as well as renal, hepatic, inferior vena cava or sagittal veins. Occlusion of the arterial circulation may be manifested as a stroke, ishemic retinopathy, myocardial or bowel infarction, or peripheral gangrene. Thrombosis can occur in veins or arteries of any size. Recurrent pregnancy loss also appears to be the result of thrombosis within the placental vasculature.

Anti-phosphatidyl antibody tests are supplemental tests and should not be used alone for diagnostic purposes. Diagnosis of anti-phospholipid syndrome must be made in conjunction with other clinical indications.

Reference Values

Anti-Phosphatidylethanolamine IgA
<12.0 U/mL

Anti-Phosphatidylethanolamine IgG
<12.0 U/mL

Anti-Phosphatidylethanolamine IgM
<12.0 u/mL

Reference Range applies to Anti-Phosphatidylethanolamine IgA, IgG, & IgM
Normal: <12.0
Equivocal: 12.0-18.0
Elevated: >18.0

Performance

PDF Report

No

Day(s) Performed

Wednesday

Report Available

3 to 11 days

Performing Laboratory Location

BioAgilytix Diagnostics

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

The performance characteristics of the listed assays were validated by BioAgilytix Diagnostics. The US FDA has not approved or cleared these tests. The results of these assays can be used for clinical diagnosis without FDA approval. BioAgilytix Diagnostics is a CLIA certified, CAP accredited laboratory for performing high complexity assays.

CPT Code Information

83520 x 3

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FPHET	Anti-Phosphatidylethanolamine Panel	Not Provided

Result ID	Test Result Name	Result LOINC® Value
Z0150	Anti-Phosphatidylethanolamine IgG	13076-5
Z0142	Anti-Phosphatidylethanolamine IgM	13077-3
Z0143	Anti-Phosphatidylethanolamine IgA	13078-1