

MYCOBACTERIUM TUBERCULOSIS BY QUANTIFERON IN-TUBE, B
#83896

USEFUL FOR: Indirect test for Mycobacterium tuberculosis complex infection (latent tuberculosis infection and active disease).

Prior to ordering this test, you must complete the questionnaire at the link below. Processing instructions, as well as kit ordering information are available through this link:

<http://www.mayomedicallaboratories.com/qtb/>

METHODOLOGY: Enzyme Linked Immunosorbent Assay (ELISA)

REFERENCE VALUES: Negative (all ages)

SPECIMEN REQUIREMENTS: Collect 1 mL of blood in each of the 3 tubes. **Please see the detailed collection and processing instructions included in each kit.** Incubate and centrifuge according to instructions. Do not aliquot or remove from the original collection tube. Send all 3 tubes refrigerate in the bag provided in the kit.

CAUTIONS: A false negative QuantiFERON-TB test result can be caused by incorrect blood sample collection or improper handling of the specimen. Blood must be incubated with stimulation antigens within 16 hours of collection.

LIST FEE: \$115.00

CPTCODE: 86480

ANALYTIC TIME: 1 day

DAY(S) SET-UP: Monday through Sunday

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Kim Baker, Mayo Medical Laboratories' Technologist Support
Telephone: 800-533-1710



MAYO CLINIC
 Mayo Medical Laboratories

TEST DEFINITION

4/27/2009

MML NAME/ORDER CODE CROSS-REFERENCE
 CODE NAME

83896 M. TUBERCULOSIS BY QUANTIFERON, B

MML MML TEST SETUP INFORMATION

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
83896	8/12/2005		M. TUBERCULOSIS BY QUANTIFERON, B			SDL

UNIT CODE ALWAYS MESSAGE - [Z83896]
 DIAGNOSING OR EXCLUDING TUBERCULOSIS DISEASE, AND ASSESSING
 THE PROBABILITY OF LTBI, REQUIRE A COMBINATION OF
 EPIDEMIOLOGICAL, HISTORICAL, MEDICAL, AND DIAGNOSTIC
 FINDINGS THAT SHOULD BE TAKEN INTO ACCOUNT WITH INTERPRETING
 QUANTIFERON-TB RESULTS.

TRANSPORT TEMP : REFRIG\AMBIENT <72 HOURS OK\FROZEN NO
 83896 M. TUBERCULOSIS BY QUANTIFERON, B

*PERFORMING SITE LEGEND

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SDL	MAYO CLINIC DPT OF LAB MED & PATHOLOGY	LAB DIRECTOR:	FRANKLIN R. COCKERILL, III, M.D.
	SUPERIOR DR.		
	3050 SUPERIOR DR. NW		
	ROCHESTER, MN 55901		

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MML MESSAGES USED AS NORMALS
 CODE TEXT

TOTAL OF 0 NORMALS CODES

*** END OF REPORT ***

Patient Name TESTING,83896	Patient ID	Age	Gender	Order # W2990974
Ordering Phys		DOB		
Client Order # W2990974	Account Information C7999998-STUSTEST	Report Notes		
Collected 10/21/2009 06:00	200 FIRST STREET SW ROCHESTER, MN 55901			
Printed 10/21/2009 11:17	(507)266-5730			

Test	Flag	Results	Unit	Reference Value	Perform Site*
M. tuberculosis by QuantiFERON, B		Negative		REPORTED 10/21/2009 11:14	SDL
<p>M. tuberculosis infection unlikely, but cannot be excluded especially when:</p> <ol style="list-style-type: none"> Any illness is consistent with TB disease Likelihood of progression to disease (e.g., because of immunosuppression is increased) <p>Diagnosing or excluding tuberculosis disease, and assessing the probability of LTBI, require a combination of epidemiological, historical, medical, and diagnostic findings that should be taken into account with interpreting QuantiFERON-TB results.</p>					

* Performing Site:

SDL	Mayo Clinic Dpt of Lab Med & Pathology Superior Dr 3050 Superior Dr. NW Rochester, MN 55901	Lab Director: Franklin R. Cockerill, III, M.D.
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Patient Name TESTING,83896	Collection Date and Time 10/21/2009 06:00	Report Status Final
Page 1 of 1		** End of Report **

* Report times for Mayo performed tests are CST/CDT