Reporting Title: Celiac Disease Gluten-Free Cascade
Performing Location: Rochester

Specimen Requirements:
Blood and serum are required.

Specimen Type: Blood
Container/Tube: Yellow top (ACD [solution B])
Specimen Volume: 6 mL
Collection Instructions: Do not transfer blood to other containers.

Specimen Type: Serum
Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Specimen Volume: 2 mL

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	7 days
	Frozen	14 days
Whole Blood ACD-B	Refrigerated (preferred)	
	Ambient	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
DQA	DQ alpha 1 **Also used by tests: CELI**	Alphanumeric		44728-4
DQB	DQ beta 1 **Also used by tests: CELI**	Alphanumeric		43291-4
CELIG	Celiac gene pairs present? **Also used by tests: CELI**	Alphanumeric		In Process
28991	Celiac Disease Interpretation	Alphanumeric		In Process

Components:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
CELI2	HLA-DQ Typing			Yes	Yes (Order CELI)
CDGF1	Celiac Disease Interpretation			Yes	No

CPT Code Information:

86816-HLA-DQ typing
82784-IgA (if appropriate)
83516-Deamidated gliadin IgA (if appropriate)
83516-Deamidated gliadin IgG (if appropriate)
83516-tTG IgA (if appropriate)
83516-tTG IgG (if appropriate)

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
IGA	Immunoglobulin A (IgA), S	1	82784	No	Yes (Order #8157)
TTGA	Tissue Transglutaminase Ab, IgA, S	1	83516	No	Yes
DAGL	Gliadin(Deamidated) Ab, IgA, S	1	83516	No	Yes
DGGL	Gliadin(Deamidated) Ab, IgG, S	1	83516	No	Yes
TTGG	Tissue Transglutaminase Ab, IgG, S	1	83516	No	Yes

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
IGA	IGA	Immunoglobulin A (IgA), S	Numeric	mg/dL	2458-8
TTGA	TTGA	Tissue Transglutaminase Ab, IgA, S	Numeric	U/mL	46128-5
DAGL	DAGL	Gliadin(Deamidated) Ab, IgA, S	Numeric	U	20495-8
DGGL	DGGL	Gliadin(Deamidated) Ab, IgG, S	Numeric	U	63459-2
TTGG	TTGG	Tissue Transglutaminase Ab, IgG, S	Numeric	U/mL	56537-4