

**Celiac Disease Comprehensive Cascade for Patients on a Gluten-Free Diet
#89200**

EXPLANATION: This test requires **both blood and serum**. Please draw and send both specimens together. Testing can not be performed without both specimens present. If serum is the only specimen available, test #89199, Celiac Disease Serology Cascade should be considered.

PROFILE INFORMATION:

Unit Code	Reporting Name	Available Separately	Always Performed
31928	HLA-DQ Typing	Yes (Order #88906)	Yes
29035	Celiac Disease Interpretation	No	Yes

REFLEX TESTS:

Unit Code	Reporting Name	Available Separately	Always Performed
29033	Immunoglobulin A (IgA), S	Yes (Order #8157)	No
82587	Tissue Transglutaminase Ab, IgA, S	Yes	No
89029	Gliadin(Deamidated) Ab, IgA, S	Yes	No
89030	Gliadin(Deamidated) Ab, IgG, S	Yes	No
83660	Tissue Transglutaminase Ab, IgG, S	Yes	No

SPECIMEN REQUIREMENTS:

- **Blood:** Draw blood in a yellow-top (ACD [solution B]) tube(s) and send 7 mL of ACD (solution B) whole blood. Do not transfer blood to other containers. Forward promptly at ambient temperature only.
- **Serum:** Draw blood in a plain, red-top tube(s) or a serum gel tube(s). Spin down and send 2 mL of serum refrigerated.

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Brad Bellin, Mayo Medical Laboratories' Technical Support
Telephone: 800-533-1710