

Reporting Title: B. pertussis Ab, IgM w/Reflex
Performing Location: ARUP Laboratories, Interface

Specimen Requirements:

Draw blood in a plain, red-top tube(s). (Serum gel tube is acceptable.) Send 1 mL of serum refrigerate in a plastic vial.

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	14 days
	Frozen	365 days
	Ambient	48 hours

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
FBPAM	B. pertussis Ab, IgM w/Reflex	Alphanumeric		N/A

CPT Code: 1 × 86615

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
FBAMI	B. pertussis Ab, IgM Immunoblot			No	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
FBAMI	Z3206	B. pertussis Ab, IgM Immuno Interp	Alphanumeric		In Process
FBAMI	Z3207	B. pertussis, IgM Immunoblot PT	Alphanumeric		In Process
FBAMI	Z3208	B. pertussis, IgM Immunoblot FHA	Alphanumeric		In Process

Reference Values:

<= 1.1 U/mL