

**EPSTEIN-BARR VIRUS BY RAPID PCR**  
**#600002**

**NOTE:** The testing and reporting is equivalent to Rochester test Epstein-Barr Virus by Rapid PCR, 81239

**USEFUL FOR:** Rapid qualitative detection of EBV DNA in cerebrospinal fluid (CSF) specimens for laboratory diagnosis of CNS disease due to this virus.

**METHODOLOGY:** Real-Time Polymerase Chain Reaction (PCR)/DNA Probe Hybridization

**REFERENCE VALUES:** Negative

**NOTE:** Positive results will be reported as EBV DNA detected.

**SPECIMEN REQUIREMENTS:** 0.5 mL of spinal fluid. **Do not centrifuge.** Send specimen refrigerated in a screw-capped, sterile vial. Maintain sterility and forward promptly. The high sensitivity of amplification by PCR requires the specimen to be processed in an environment in which contamination of the specimen by EBV DNA is not likely.

**CAUTIONS:** A negative result does not eliminate the possibility of EBV infection of the CNS.

**LIST FEE:** \$ 275.50

**CPT CODE:** 87798

**ANALYTIC TIME:** 1 day

**DAY(S) SET UP:** Monday and Thursday, 1<sup>st</sup> Shift

**QUESTIONS:** Contact your Mayo Medical Laboratories' Regional Manager  
Mary Erath, Mayo Medical Laboratories' Technologist Support  
Telephone: 800-533-1710



**MAYO CLINIC**  
 Mayo Medical Laboratories

# TEST DEFINITION

5/12/2009

MML NAME/ORDER CODE CROSS-REFERENCE

CODE NAME  
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 600002 EPSTEIN BARR VIRUS BY RAPID PCR

MML MML TEST SETUP INFORMATION

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
600002	4/27/2009		EPSTEIN BARR VIRUS BY RAPID PCR			NEL
		209026	TRANSPORT TEMP : REFRIG\FROZEN OK\AMBIENT NO SPECIMEN SOURCE			
600002			EPSTEIN BARR VIRUS BY RAPID PCR			
			TEST CODE ALWAYS MESSAGE - [ZASR] ZASR ANALYTE SPECIFIC REAGENT			
			THIS TEST WAS DEVELOPED AND ITS PERFORMANCE CHARACTERISTICS DETERMINED BY LABORATORY MEDICINE AND PATHOLOGY, MAYO CLINIC. THIS TEST HAS NOT BEEN CLEARED OR APPROVED BY THE U.S. FOOD AND DRUG ADMINISTRATION.			

\*PERFORMING SITE LEGEND

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 NEL MAYO MEDICAL LABORATORIES NEW ENGLAND LAB DIRECTOR: LYNN A. CHERYK, PH.D.  
 160 DASCOMB ROAD  
 ANDOVER, MA 01810  
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MML MESSAGES USED AS NORMALS

CODE TEXT  
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TOTAL OF 0 NORMALS CODES

\*\*\* END OF REPORT \*\*\*



## LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, EBVQUAL		PATIENT NUMBER		AGE 30	SEX F	ACCESSION # G9126375
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 05/07/09 08:48 A	RECEIVED 05/07/09 08:48 A	REPORT PRINTED 05/11/09 02:48 P		SPECIMEN INFORMATION DATE OF BIRTH:		
DATE	TIME	DATE	TIME			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
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**Epstein Barr Virus by Rapid PCR**

<b>Specimen Source</b>	<b>CSF</b>	<b>NEL</b>
<b>Epstein Barr Virus by Rapid PCR</b>	<b>EPSTEIN-BARR VIRUS DNA DETECTED</b>	<b>NEL</b>

**SIGNIFICANT RESULT****Analyte Specific Reagent**

This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. This test has not been cleared or approved by the U.S. Food and Drug Administration.

**\* PERFORMING SITE**

NEL	Mayo Medical Laboratories New England 160 Dascomb Road Andover, MA 01810	Lab Director: Lynn A. Cheryk, Ph.D.
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PATIENT NAME TESTING, EBVQUAL	ORDER STATUS Final	COLLECTION DATE AND TIME 05/07/09 08:48 A
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