
Reporting Title: Varicella-Zoster Ab, IgG, S
Performing Location: Rochester

Specimen Requirements:

Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Specimen Volume: 0.5 mL

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	14 days
	Frozen	14 days

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
VZG	Varicella-Zoster Ab, IgG, S	Alphanumeric		In Process
DEXG4	Varicella IgG Antibody Index	Numeric		In Process

CPT Code: 1 x 86787

Reference Values:

Vaccinated: Positive
Unvaccinated: Negative