

CRYPTOCOCCUS ANTIGEN TITER, LFA, SERUM
Test ID: SLFAT

EXPLANATION: *Cryptococcus* Antigen Titer by lateral flow assay (SLFAT) will be replacing the current *Cryptococcus* Antigen (SCRYR) by latex agglutination. The lateral flow assay in the SLFAT demonstrates increased sensitivity over the current method.

USEFUL FOR: Monitoring *Cryptococcus* antigen titers in serum and aiding in the diagnosis of cryptococcosis.

METHODOLOGY: Lateral Flow Assay (LFA)

NOTE: End point titers are not interchangeable and do not correlate between the latex agglutination (LA; previous method) and lateral flow methods (LFA). Providers should transition to monitor end-point titers by the LFA method. End-point titer values by the LA method will be reported alongside the LFA titer result for comparison through August 6, 2014, at no charge. After this date, only the LFA titer will be performed.

REFERENCE VALUES: Negative

SPECIMEN REQUIREMENTS:

Container/Tube:

Preferred: Red top

Acceptable: Serum gel

Specimen Volume: 0.5 mL

Minimum Volume: 0.3 mL

SPECIMEN STABILITY INFORMATION:

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

CPT CODE: 87899

DAY(S) SET UP: Monday through Friday, 1st shift

ANALYTIC TIME: 1 day.

CAUTIONS:

- *Cryptococcus* antigen titers acquired by the LFA may be higher than titers achieved by other *Cryptococcus* antigen assays. Titers acquired by different assay methods are not interchangeable.
- *Cryptococcus* antigen titers should be followed using the same assay.

- A positive result is indicative of cryptococcosis, however all test results should be reviewed in light of other clinical findings.
- Testing should not be performed as a screening procedure for the general population and should only be performed when clinical evidence suggests the diagnosis of cryptococcal disease.
- Testing hemolyzed serum samples may lead to false negative results due to the high background color on the LFA strip.
- Although rare, extremely high concentrations of cryptococcal antigen can result in weak test lines and in extreme instances, yield negative test results.
- This assay has not been evaluated for cross-reactivity in patients with trichosporonosis.

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or
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