

Cryptococcus Antigen Screen with Titer, Spinal Fluid
Test ID: CLFA

EXPLANATION: *Cryptococcus* Ag by lateral flow assay (CLFA) will be replacing the current *Cryptococcus* Ag screen (CCRYR) by latex agglutination due to increased sensitivity demonstrated by the lateral flow methodology. The Fungal Antibody Survey, Spinal Fluid (FSC) is no longer available.

USEFUL FOR: Aid to diagnose cryptococcosis in cerebrospinal fluid. CLFA should be ordered if the CSF specimens is submitted for initial diagnostic purposes *and* the client laboratory has performed routine fungal culture on the CSF specimen (see Note 1 below).

REFLEX TEST

Test ID	Reporting Name	Available Separately	Always Performed
CLFAT	Cryptococcus Ag Titer, LFA, CSF	Yes	No

TESTING ALGORITHM: If screen result is positive, CLFAT - *Cryptococcus* Ag Titer, LFA, CSF will be performed at an additional charge

NOTE 1: According to the College of American Pathologists (CAP, IMM.41840), CSF specimens submitted for initial diagnosis that test positive by the lateral flow assay should also be submitted for routine fungal culture. Fungal cultures are not required for CSF specimens that are submitted to monitor *Cryptococcus* antigen titers during treatment.

METHODOLOGY: Lateral Flow Assay (LFA)

NOTE 2: End point titers are not interchangeable and do not correlate between the latex agglutination (LA; prior 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 2014, at no charge. After this date, only the LFA titer will be performed.

REFERENCE VALUES: Negative

SPECIMEN REQUIREMENTS: CSF

Container/Tube: Sterile container/vial

Specimen Volume: 1.0 mL

Minimum Volume: 0.5 mL

SPECIMEN STABILITY INFORMATION:

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

CPT CODE: 87899 – *Cryptococcus* Ag Screen w/Titer, CSF
87899 – *Cryptococcus* Ag Titer, LFA, CSF (as appropriate)

DAY(S) SET UP: CLFA – Monday through Sunday.
CLFAT – Monday through Sunday.

ANALYTIC TIME: 1 day.

CAUTIONS:

- A traumatic lumbar puncture and contamination of the CSF specimen with serum may lead to a positive *Cryptococcus* antigen result from CSF in patients without neuroinvasive cryptococcosis.
- A negative result does not preclude diagnosis of cryptococcosis, particularly if only a single specimen has been tested and the patient shows symptoms consistent with cryptococcosis.
- 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 populations and should only be performed when clinical evidence suggests the diagnosis of cryptococcal disease.
- 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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