Lab Dept:	Serology
Test Name:	BRUCELLA ANTIBODY SCREEN, IGG/IGM
General Information	
Lab Order Codes:	BRUA
Synonyms:	Brucella Serology; Brucella meletensis; Brucella suis
CPT Codes:	86622 X2 – Antibody; Brucella
	86622 – Antibody, Brucella (additionally, confirmatory testing by bacterial agglutination, if appropriate)
Test Includes:	Brucella IgG antibody, IgM antibody and Interpretation. Reported as positive, negative or equivocal. If Brucella antibody screen is positive or equivocal, Brucella Antibody by bacterial agglutination will be sent out for confirmatory testing at an additional charge.
Logistics	
Test Indications:	Useful for detection of antibodies in patients suspected of having brucellosis.
Lab Testing Sections:	Serology - Sendouts
Referred to:	Mayo Medical Laboratories (Test: BRCMG) and possible reflex (Test: BRUTA) for confirmatory testing.
Phone Numbers:	MIN Lab: 612-813-6280
	STP Lab: 651-220-6550
Test Availability:	Daily, 24 hours
Turnaround Time:	1 – 3 days, test set up is Monday, Wednesday, Friday
Special Instructions:	N/A
Specimen	
Specimen Type:	Blood
Container:	SST (Gold, marble or red) tube

Draw Volume: 3 mL (Minimum: 1.2 mL) blood

Processed Volume:	1 mL (Minimum: 0.4 mL) serum
Collection:	Routine blood collection
Special Processing:	Lab Staff: Centrifuge specimen, remove serum aliquot into a screw- capped round bottom vial. Store refrigerated. Ship refrigerated. Forward promptly.
Patient Preparation:	None
Sample Rejection:	Specimens other than serum; gross hemolysis; gross lipemia; mislabeled or unlabeled specimens
Interpretive	
Reference Range:	IgG: Negative
	IgM: Negative
	Note: Results will be reported as Positive, Negative or Equivocal. If results are reported as positive or equivocal, reflex confirmatory testing will be performed by agglutination.
	Reflex confirmatory titer: <1:80
Critical Values:	N/A
Limitations:	This test utilizes antigen derived from <i>Brucella abortus</i> strain W99. However, significant cross-reactivity exists with other Brucella species and, therefore, the assays should not be used to differentiate infection at the species level.
	<i>Brucella canis,</i> a rare cause of brucellosis, may not be detected by this method.
	Detection of specific IgM or IgG-class antibody to <i>Brucella melitensis</i> and <i>Brucella suis</i> by this method has not been determined.
	ELISA tests are intended to be used as a screen only. Positive results should be followed up using an agglutination assay for confirmation. Results must be used in conjunction with symptoms, patient history, and other clinical findings.
	<i>B abortus</i> strain RB51 is used for vaccination of animals in the US. There are currently no serologic tests to detect an antibody response to strain RB51 in humans. Per CDC guidelines, routine clinical serology tests for <i>Brucella</i> do not detect an antibody response to strain RB51. Note that other strains besides RB51 may be used for vaccinating animals outside of the US.

Methodology:	Enzyme-Linked Immunosorbent (ELISA) Confirmatory test: Direct Agglutination
References:	Mayo Clinic Laboratory July 2020
Updates:	 12/16/03: New method implemented at Mayo. Previously Agglutination. New test separates out IgG and IgM determinations. Draw volume previously 1.5 mL. 5/11/2009: MML change in test # (previously 84327), and addition of reflex test to bacterial agglutination for positive/equivocal results. 11/16/2010: MML change to internal reflex testing, previously sent to ARUP. 12/22/2017: Collection container update. 7/14/2020: Updated collection volumes