Lab Dept: Serology

Test Name: CELIAC DISEASE PANEL REFLEX

**General Information**

Lab Order Codes: CELIA

Synonyms: Celiac Disease Panel

CPT Codes: 83516 x4 – Immunoassay for analyte other than infectious agent antibody or infectious agent antigen, qualitative or semiquantitative; multiple step method

82784 – Total IgA (if appropriate)

Test Includes: Anti-Deamidated Gliadin IgA Specific, Anti-Deamidated Gliadin IgG Specific, Anti-Tissue Transglutaminase IgA Specific, Anti-Tissue Transglutaminase IgG Specific; TTGA; TTGG

Reflex: Total IgA will be performed at an additional charge when tTG-IgA is negative, and tTG-IgG is positive, or when the instrument flags a low IgA

**Logistics**

Test Indications: Useful for differential diagnosis of intestinal disorders such as celiac disease and Crohn’s disease. May be useful for monitoring a gluten-free diet.

Lab Testing Sections: Chemistry – Minneapolis campus only

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 1 – 4 days; performed Monday - Friday

Special Instructions: Endomysial Antibody is orderable separately and referred to Mayo Medical Laboratories for testing.

**Specimen**

Specimen Type: Blood

Container: Red top tube

Draw Volume: 1.5 mL (Minimum: 0.9 mL) blood

Processed Volume: 0.5 mL (Minimum: 0.3 mL) serum
**Collection:** Routine venipuncture

**Special Processing:** Lab Staff: Centrifuge specimen, remove serum aliquot and transfer into a screw-top plastic vial. Store at refrigerated temperatures. Freeze at or below -20˚C if not tested within 48 hours.

**Patient Preparation:** None

**Sample Rejection:** Mislabeled or unlabeled specimen

### Interpretive

<table>
<thead>
<tr>
<th>Test Name (all ages)</th>
<th>Negative (Elia U/mL)</th>
<th>Equivocal (Elia U/mL)</th>
<th>Positive (Elia U/mL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tissue transglutaminase IgA (TTGA)</td>
<td>&lt;7</td>
<td>7 - 10</td>
<td>&gt;10</td>
</tr>
<tr>
<td>Tissue transglutaminase IgG (TTGG)</td>
<td>&lt;7</td>
<td>7 - 10</td>
<td>&gt;10</td>
</tr>
<tr>
<td>Deamidated Gliadin antibody IgA (GGP)</td>
<td>&lt;7</td>
<td>7 - 10</td>
<td>&gt;10</td>
</tr>
<tr>
<td>Deamidated Gliadin antibody IgG (AGP)</td>
<td>&lt;7</td>
<td></td>
<td>&gt;10</td>
</tr>
</tbody>
</table>

Reflexive Total IgA (mg/dL) | Please refer to [IgA (Immunoglobulin A)](#) for reference ranges.

**Interpretation:**
- TTGA >10 Elia U/mL: Suggestive of Celiac disease
- TTGA and TTGG both >10 U/mL: Suggestive of Celiac disease
- AGP >10 Elia U/mL or AGP and GLG >10 Elia U/mL and patient <7 years: Possible Celiac disease, recommend HLA, EMA or biopsy

### Critical Values:
- N/A

### Limitations:
- N/A

### Methodology:
- Fluorenyl enzyme immunoassay

### References:
- Phadia AB Elia Directions for Use (August 2010)
Updates:

10/9/2007: Gliadin IgG and IgA updated to deamidated ELISA tests.
10/14/2008: tTG reference range/units update previously listed as <20 Units.
11/2/2009: Testing moved from MML to testing internally at Children’s.
2/2/2012: Gliadin Ab IgG reference range updated.
5/15/2013: Gliadin IgG and IgA changed to Deamidated Gliadin IgG and IgA.