General Information

Lab Order Codes: AHEPR

Synonyms: Acute Hepatitis Profile

CPT Codes:
- 80074 – Acute Hepatitis Panel includes HBs antigen, HBc IgM Ab, Hepatitis A IgM Ab, Hepatitis C antibody screen
- AND
- 87341 – HBsAG confirmation (if appropriate)
- 87522 – Hepatitis C, quantification (if appropriate)

Test Includes: Hepatitis A Antibody IgM (HAVM), Hepatitis B Core Antibody IgM (HBCM), Hepatitis B Surface Antigen (HBAG), Hepatitis C Antibody (HEPC) with reflex. Note: Each test can also be ordered individually, see individual listings. Reflex information: If the Hepatitis B Surface Antigen is positive, the Hepatitis B Surface Antigen Neutralization Confirmation will automatically be performed at an additional charge. If the Hepatitis C antibody screen, Hepatitis C by PCR will be performed at an additional charge.

Logistics

Test Indications: The differential diagnosis of recent acute infection.

Lab Testing Sections: Serology - Sendouts

Referred to: Mayo Medical Laboratories (MML Test: AHEP)

Phone Numbers:
- MIN Lab: 612-813-6280
- STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 1 – 2 days, tests are performed daily

Special Instructions: Heparinized specimens will not be tested.

Specimen

Specimen Type: Blood
Container: SST (Gold or Marble)

Draw Volume: 9 mL (Minimum: 6 mL) blood

Processed Volume: 3 mL (Minimum: 2 mL) serum

Collection: Routine venipuncture

Special Processing: Lab Staff: Centrifuge specimen, remove serum aliquot. Serum must be removed from clot within 24 hours of draw. Store and ship at frozen temperatures. Forward promptly.

Patient Preparation: None

Sample Rejection: Specimens other than serum, lipemia, hemolysis, icteric, mislabeled or unlabeled specimens

**Interpretive**

<table>
<thead>
<tr>
<th>Reference Range</th>
<th>(\text{Hepatitis Bs Ag (HbsAg)})</th>
<th>Negative (reported as positive or negative)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(\text{Hepatitis Bs Ag Confirmation (if appropriate)})</td>
<td>Negative</td>
<td></td>
</tr>
<tr>
<td>(\text{Hepatitis A Ab, IgM})</td>
<td>Negative</td>
<td></td>
</tr>
<tr>
<td>(\text{Hepatitis Bc Ab, IgM})</td>
<td>Negative</td>
<td></td>
</tr>
<tr>
<td>(\text{Hepatitis C Ab (Anti-HCV)})</td>
<td>Negative (reported as positive or negative)</td>
<td></td>
</tr>
<tr>
<td>(\text{HCV RNA Detection and Quantification RT-PCR (if appropriate)})</td>
<td>Undetected</td>
<td></td>
</tr>
</tbody>
</table>

Interpretation depends on clinical setting.

Critical Values: N/A
Limitations:

Consider administration of immune globulin to individuals exposed to patients with hepatitis A.

Consider administration of hepatitis B immune globulin (HBIG) and/or hepatitis B vaccine to individuals exposed to hepatitis B patient’s blood or body fluids.

Positive HbsAg and/or positive anti-HAV, IgM test results should be reported by the attending physician to the State Department of Health, as required by law in some states.

Performance characteristics have not been established for the following specimen characteristics: icteric, lipemic, hemolysis, containing particulate matter, cadaveric specimens.

Methodology:

See individual hepatitis tests for more information.

References:

Mayo Medical Laboratories (September 2017)

Updates:

4/6/2004: Test moved from Memorial Blood Center of Minneapolis to Mayo Medical Laboratories.
7/8/2004: Draw volume changed from 6.0 mL to 7.5 mL. Serum volume was previously 2.0 mL and now is 2.5 mL with a Minimum of 2.0 mL serum/plasma.
11/7/2005: Added to special instructions – heparinized specimens will not be tested.
2/6/2007: Plasma samples no longer acceptable as per Ortho to MML communication.
3/10/2015: CPT update due to new standards requiring Hepatitis C reflex to PCR for confirmation.
8/22/2016: Tube type update.