
Lab Dept: Chemistry

Test Name: BRAZIL NUT IGE, REFLEX TO BRAZIL NUT COMPONENT

General Information

Lab Order Codes: BRAZR: Brazil Nut, Total with reflex to Brazil Nut Component (rBer e 1).

BCB1: Brazil Nut Component only (rBer e 1). An Add-to test code to use when total Brazil Nut result is ≥ 0.1 kUA/L. (Brazil Nut Allergen IgE total should have been tested with in the previous 28 days and the sample available in the lab). Reflex testing is performed at Mayo Clinic Laboratories.

Synonyms: Allergy testing; Specific IgE, Brazil Nut, Component

CPT Codes: 86003 x1 – Allergen specific IgE for total Brazil Nut

Reflex or Component only order:
86008 x1 – (Brazil Nut Component allergen IgE, at an additional charge)

Test Includes: Includes total Brazil Nut and rBer e 1 Brazil Nut Component when appropriate.

Logistics

Test indications: Detect allergen specific-IgE

Lab Testing Sections: Chemistry

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability: Daily, 24 hours(

Turnaround Time: 1 – 2 days, performed Monday - Friday

Special Instructions: N/A

Specimen

Specimen Type: Blood

Container: Red, marble or gold top tube

Draw Volume:	4.5 mL (Minimum: 3 mL) blood
Processed Volume:	1.5 mL (Minimum: 1 mL) serum
Collection:	Routine blood collection
Special Processing:	Lab Staff: Centrifuge specimen, remove serum aliquot into plastic tube. Forward promptly. Store at refrigerated temperatures for up to 1 week.
Patient Preparation:	None
Sample Rejection:	Mislabeled or unlabeled specimens

Interpretive

Reference Range:	Total Brazil Nut IgE and Brazil Nut Components Ranges:	
	kUA/L:	Interpretation:
	<0.1	*Absent
	0.1 – 0.34	Equivocal/Low
	0.35 – 0.69	Low
	0.70 – 3.49	Medium
	3.50 – 17.49	High
	17.50 – 49.99	Very High
	50.00 – 100.00	Very High
	>100.00	Very High
	*If Total Brazil Nut is <0.1 kUA/L, Cashew component testing is not indicated.	

Critical Values: N/A

Limitations: Testing for IgE antibodies is not useful in patients previously treated with immunotherapy to determine if residual clinical sensitivity exists, or in patients in whom the medical management does not depend upon identification of allergen specificity.

Some individuals with clinically insignificant sensitivity to allergens may have measurable levels of IgE antibodies in serum, and results must be interpreted in the clinical context.

False-positive results for IgE antibodies may occur in patients with markedly elevated serum IgE (>2500 kU/L) due to nonspecific binding to allergen solid phases.

Methodology: ImmunoCAP FEIA

References: CH 6.06 Allergens (Specific IgE)

[Mayo Clinic Laboratories](#) (February 2021)