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**Lab Dept:** Chemistry

**Test Name:** HEXOSAMINIDASE A & TOTAL  
HEXOSAMINIDASE, SERUM

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***General Information***

**Lab Order Codes:** HEXAT

**Synonyms:** B-N-Acetylglucosaminidase; GM2 Gangliosidosis; Sandhoff Carrier Screening; Tay Sachs Carrier Screening

**CPT Codes:** 83080 x2 – b-Hexosaminidase, each assay

**Test Includes:** Total Hexosaminidase level reported in nmol/min/mL, Hexoaminidase A reported as a % of total.

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***Logistics***

**Test Indications:** Diagnosing Tay-Sachs disease, carriers of Tay-Sachs, Sandhoff's disease, and carriers of Sandhoff's disease.

**Lab Testing Sections:** Chemistry - Sendouts

**Referred to:** Mayo Medical Laboratories (MML Test: NAGS)

**Phone Numbers:** MIN Lab: 612-813-6280

STP Lab: 651-220-6550

**Test Availability:** Daily, 24 hours

**Turnaround Time:** 8 – 15 days, performed on Tuesdays

**Special Instructions:** For females of child-bearing age: If females wish screening for carrier status of hexoaminidase A deficiency, they must be tested prior to pregnancy. Serum assay results are often ambiguous on pregnant females and will not be run.

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***Specimen***

**Specimen Type:** Blood

**Container:** Red top tube

**Draw Volume:** 3 mL (Minimum: 1.5 mL) blood

<b>Processed Volume:</b>	1 mL (Minimum: 0.5 mL) serum
<b>Collection:</b>	Routine venipuncture
<b>Special Processing:</b>	Lab Staff: Centrifuge specimen. Remove serum aliquot and place into a screw-capped plastic vial. Ship and store at frozen temperatures.
<b>Patient Preparation:</b>	None
<b>Sample Rejection:</b>	Warm specimens; samples from pregnant females; mislabeled or unlabeled specimens

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### ***Interpretive***

**Reference Range:**

<b>Hexosaminidase A and Total, Serum (nmol/min/mL)</b>	
≤15 years:	≥20 nmol/min/mL
≥16 years:	10.4 – 23.8 nmol/min/mL
<b>Percent A (%)</b>	
≤15 years:	20 – 90%
≥16 years:	56 – 80%
Interpretation is provided with report.	

**Critical Values:** N/A

**Limitations:** This test cannot be performed on pregnant females.

GM2 activator deficiency (CM2-gangliosidosis, AB variant) is a rare disorder with clinical features similar to Tay-Sachs and Sandhoff diseases; however, levels of both hexosaminidase A and B are normal. GM2 activator deficiency cannot be identified through testing offered at Mayo Medical Laboratories.

**Methodology:** Heat inactivation, Fluorometric, Automated

**References:** [Mayo Medical Laboratories](#) July 2013

**Updates:** 7/18/2013: Note change in units change for Hexoaminidase A, previously reported as U/L. Also reference ranges have been amended for age groups.  
1/27/2016: CPT update