
Lab Dept: Serology

Test Name: CYTOMEGALOVIRUS (CMV) ANTIBODY, IGG

General Information

Lab Order Codes: CMVG

Synonyms: Anti-CMV Antibodies-IgG; Cytomegalovirus Antibodies – IgG; CMV Antibodies, IgG

CPT Codes: 86644 – CMV antibodies (IgG)

Test Includes: Anti-CMV Antibodies – IgG

Logistics

Test Indications: Intended for the qualitative detection of IgG antibodies to Cytomegalovirus in human sera to indicate exposure to CMV.

Lab Testing Sections: Chemistry (Performed on the St. Paul campus)

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 2 – 10 hours, testing is performed daily

Special Instructions: N/A

Specimen

Specimen Type: Blood

Container: SST (Gold, marble or red)

Draw Volume: 1 mL blood

Processed Volume: 0.2 mL serum

Collection: Blood should be collected aseptically by venipuncture and placed in a sterile SST tube without anticoagulant and allowed to clot at room temperature.

Special Processing: Lab Staff: Centrifuge specimen as early as possible after it has clotted; transfer serum to a plain polypropylene tube and refrigerate. If testing is delayed longer than 2 days, serum should be frozen at -20°C or colder. Do not store serum in a self-defrosting freezer.

Patient Preparation: None

Sample Rejection: Sera exhibiting a high degree of hemolysis, icterus, lipemia or microbial contamination are not recommended because these conditions may cause aberrant results. Mislabeled or unlabeled specimens.

Interpretive

Reference Range:

The results will be reported as a numerical value with interpretation.
Expected values: **Negative** – No exposure to CMV. No detectable IgG antibodies present.

Interpretation:

IgG Result		Interpretation
<0.6	Negative	No exposure to CMV or too early for antibody response
≥0.7	Positive	Patient has been exposed to CMV
0.60 – 0.69	Equivocal	Equivocal Result: "Borderline Result" – suggest repeat specimen be obtained in 7 - 14 days.

Critical Values: N/A

Limitations: Samples collected early in the course of a CMV infection may not have detectable levels of antibody. In such cases, it is recommended that a second serum sample be obtained 10-21 days later.

Positive results on CMV-IgG antibody in neonates should be interpreted with caution, since maternal IgG is transferred passively from mother to baby before birth. IgM assays are generally more useful indicators of infection in children below the age of 6 months.

Results from immunosuppressed patients should be interpreted with caution. Assay characteristics have not been established for immune compromised patients.

Methodology: Chemiluminescent Immunoassay (CLIA)

References: Liaison® CMV IgG (310740) (February 2009) Directions for Use, DiaSorin, Inc., Stillwater, MN 55082

NCCLS Guideline I/LA 18-A2 (September 2001) Specifications for Immunological Testing for Infectious Diseases; Approved Guideline-Second Edition, Vol 21, No 15

Updates:

8/29/2011: Testing method change, previously listed as ELISA. Note updated reference ranges.
2/9/2016: Updated container types
8/13/2019: Updated TAT and stability