Lab Dept: Serology

Test Name: EHRLICHIA ANTIBODY PANEL

General Information

Lab Order Codes:	EHRP
Synonyms:	E. chaffeensis; Ehrlichiosis Serology; HEG; HME; Human Granulocytic Ehrlichiosis; Tick Borne Diseases; Anaplasma phagocytophilum
CPT Codes:	86666 x2 – Ehrlichia
Test Includes:	Anaplasma phagocytophilum Ab IgG and Ehrlichia chaffeensis Ab IgG reported as a titer value.

Logistics

Test Indications:	As an adjunct in the diagnosis of ehrlichiosis. In the seroepidemiological surveys of the prevalence of the infection in certain populations.
Lab Testing Sections:	Serology - Sendouts
Referred to:	Mayo Clinic Laboratories (MML Test: EHRCP)
Phone Numbers:	MIN Lab: 612-813-6280 STP Lab: 651-220-6550
Test Availability:	Daily, 24 hours
Turnaround Time:	1 – 3 days, test performed Monday - Friday
Special Instructions:	N/A

Specimen

Specimen Type:	Blood
Container:	SST (Gold, marble or red) tube
Draw Volume:	1.5 mL (Minimum: 1.5 mL) blood
Processed Volume:	0.5 mL (Minimum: 0.5 mL) serum
Collection:	Routine venipuncture

Special Processing:	Lab Staff: Centrifuge specimen, remove serum aliquot into a screw-capped round bottom plastic vial. Store and ship at refrigerated temperatures. Forward promptly.
Patient Preparation:	None
Sample Rejection:	Specimens other than serum; hemolysis; lipemic; heat-inactivated specimens; unlabeled or mislabeled specimens

Interpretive

Reference Range:	Titer: <1:64 **Interpretation:** Serology for IgG may be negative during the acute phase of the infection but a diagnostic titer usually appears by the third week of onset. A positive result for either antibody performed by immunofluorescence (IFA) assay suggests a previous infection. In general, the higher the titer, the more likely it is that the patient has an active infection. Four fold rises in titer also indicate active infection. Previous episodes of ehrlichiosis may produce a positive serology although antibody levels decline significantly during the year following infection.
Critical Values:	N/A
Limitations:	Performance characteristics have not been established for hemolyzed or lipemic specimens.
Methodology:	Immunofluorescence Assay (IFA)
References:	Mayo Clinic Laboratories January 2022
Updates:	1/27/2022: Update minimum volumes per Mayo.