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**Lab Dept:** Serology

**Test Name:** EHRlichia ANTIBODY PANEL

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***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.

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***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 Medical 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

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***Specimen***

**Specimen Type:** Blood

**Container:** Red top tube

**Draw Volume:** 1.5 mL (Minimum: 0.75 mL) blood

**Processed Volume:** 0.5 mL (Minimum: 0.25 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

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### ***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 Medical Laboratories Web Page](#) March 2015