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**Lab Dept:** Serology

**Test Name:** HEPATITIS A IgM ANTIBODY (ANTI-HAV IgM)

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***General Information***

**Lab Order Codes:** HAVM

**Synonyms:** Hepatitis A Virus IgM Antibody; Anti-hepatitis A; Hepatitis A IgM

**CPT Codes:** 86709 – Hepatitis A antibody, IgM

**Test Includes:** Hepatitis A IgM Antibody reported positive or negative.

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***Logistics***

**Test Indications:** Useful for diagnosis of a recent acute or subclinical hepatitis A infection. In most cases, antibody against hepatitis A antigen is detectable at the onset of symptoms (usually 15-45 days after exposure). Initial antibody consists almost entirely of the IgM subclass. Anti-HAV, IgM usually falls to undetectable levels 3-6 months after hepatitis A infection. Anti-HAV, IgG levels rise quickly once the virus is cleared and may persist for many years.

**Lab Testing Sections:** Serology - Sendouts

**Referred to:** Mayo Medical Laboratories (Test: HAIGM)

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

STP Lab: 651-220-6550

**Test Availability:** Daily, 24 hours

**Turnaround Time:** 1 – 2 days, test performed Monday - Saturday

**Special Instructions:** N/A

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***Specimen***

**Specimen Type:** Blood

**Container:** SST (Gold, marble or red) tube

**Draw Volume:** 3 mL (Minimum: 0.6 mL) blood

**Processed Volume:** 1 mL (Minimum: 0.2 mL) serum

<b>Collection:</b>	Routine blood collection
<b>Special Processing:</b>	Lab Staff: Allow specimen to clot, centrifuge, remove serum aliquot into a screw-capped round bottom plastic vial. Store and ship at refrigerated temperatures. Forward promptly.
<b>Patient Preparation:</b>	None
<b>Sample Rejection:</b>	Specimens other than serum; gross hemolysis; gross lipemia; grossly icteric; mislabeled or unlabeled specimens

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### ***Interpretive***

<b>Reference Range:</b>	Negative
<b>Critical Values:</b>	N/A
<b>Limitations:</b>	<p>Testing too early (&lt;2 weeks) after exposure to hepatitis A (HAV) may yield negative anti-HAV IgM results.</p> <p>False-positive results may be due to the presence of cross-reactive antibodies from other viral infection or underlying illnesses (such as non-Hodgkin lymphoma). Positive results should be correlated with patient's clinical history and epidemiologic exposure.</p> <p>The presence of heterophilic antibodies and human antimouse antibodies (in patients who have received preparations of mouse monoclonal antibodies for diagnosis or therapy) in serum may interfere with the assay and cause erroneous results (false-positive or false-negative).</p> <p>Performance characteristics have not been established for the following specimens: Grossly icteric (total bilirubin &gt;20 mg/dL), grossly hemolyzed (hgb level &gt;500 mg/dL), grossly lipemic (triglyceride &gt;3,000 mg/dL), containing particulate matter, heat-inactivated, cadaveric specimens.</p>
<b>Methodology:</b>	Chemiluminescence Microparticle Immunoassay (CMIA)
<b>References:</b>	<a href="#">Mayo Medical Laboratories</a> February 2018
<b>Updates:</b>	<p>4/6/2004: Test moved from Memorial Blood Center of Minneapolis to Mayo Medical Laboratories.</p> <p>12/23/2014: Method update, previously listed as Enzyme Immunoassay (EIA)</p> <p>1/16/2017: Tube type to SST.</p> <p>9/21/2017: Storage update, method update.</p>