Lab Dept: Serology

Test Name: HIV-1,2 ANTIGEN/ANTIBODY EVALUATION REFLEX (ANTI-HIV-1,2)

General Information

Lab Order Codes: HIV12

Synonyms: Human Immunodeficiency Virus Types 1 and 2 (combined) Antibodies; Anti-HIV-1,2; Anti-HIV

CPT Codes: 87389 – HIV-1 antigen, with HIV1/2 antibodies, single result
86701 – HIV-1 antibody (if appropriate)
86702 – HIV antibody-type 2 (if appropriate)

Test Includes: HIV-1,2 Ag/Antibody reported as negative or reactive. If HIV-1,2 ag/antibody is reactive, then HIV-1,2 antibody differentiation is performed (by rapid immunographic method) at an additional charge.

Logistics

Test Indications: Screening and confirmation of HIV-1 and HIV-2 infection.

Lab Testing Sections: Serology - Sendouts

Referred to: Mayo Medical Laboratories (Test: HIVCO)

Phone Numbers: MIN Lab: 612-813-6280
STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 1 – 2 days, tests performed Monday - Saturday. Confirmatory testing may increase turnaround times.

Special Instructions: This test is not offered as a screening or confirmatory test for blood donor specimens. See Patient HIV Testing Algorithm (http://www.mayoreferenceservices.org/mrs/media/test-algorithms/hiv_serologic_screening.pdf) for more information.

Specimen

Specimen Type: Blood

Container: SST (Marble, gold or red)
**Draw Volume:** 3 mL (Minimum: 1.5 mL) blood

**Processed Volume:** 1 mL (Minimum 0.5 mL) serum

**Collection:** Routine venipuncture

**Special Processing:** Lab Staff: Centrifuge specimen within 24 hours, remove serum/plasma aliquot into screw-capped round bottom plastic vial. Store and ship at refrigerated temperatures. Forward promptly.

**Patient Preparation:** None

**Sample Rejection:** Specimens other than serum/plasma as indicated; lithium heparin samples are unacceptable; mislabeled or unlabeled specimens; gross hemolysis; gross lipemia; grossly icteric

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**Interpretive**

**Reference Range:** Negative (reported as negative or reactive)

Additional testing at an additional charge will be performed if the specimen is reactive. Refer to [Test Includes](#).

**Critical Values:** N/A

**Limitations:** Reactive results of this assay does not differentiate among reactivity with HIV-1 p21 antigen, HIV-1 antibody, and HIV-2 antibody.

A reactive screening test result is not diagnostic for HIV infection and should be considered preliminary. The positive predictive value of a reactive screening test result is highly dependent on the prevalence of HIV infection in the population tested. The lower the prevalence of HIV infection, the lower the positive predictive value and higher the false-positive rate of the test. Diagnosis of HIV infection must be based on positive results of the supplemental or confirmatory serologic or molecular tests.

**Methodology:**

- HIV-1, Ag/Ab Screen and HIV-2 Aby: Chemoluminescent particle assay
- HIV-1 Differentiation: Rapid Immunographic method
- HIV-2 Differentiation: Rapid Immunographic method

**References:** [Mayo Medical Laboratories Web Page](https://www.mayoclinic.org) June 2016
Updates:

4/6/2004: Test moved from Memorial Blood Center of Minneapolis to Mayo Medical Laboratories. Note: Test now reflexes to supplemental/confirmatory testing (with additional charges) when indicated by reactive findings.

11/18/2008: Method change, previously listed as Enzyme Immunoassay

3/13/2012: EDTA no longer appropriate tube type.

3/1/2013: HIV-2 confirmation now performed by immunoassay at Mayo.

5/19/2014: Method change previously listed as HIV1/2 Ab by Scn by Chemoluminescence (EIA). Now also screen for HIV-1 antigen. CPT code change for screening test. Previously listed as 86709.