
Lab Dept: Serology

Test Name: VZV IgG ANTIBODY

General Information

Lab Order Codes: VZG

Synonyms: Anti-VZV Antibodies-IgG ; VZV IgG Serology; Varicella Zoster IgG Antibody

CPT Codes: 86787 – Antibody, varicella zoster (IgG)

Test Includes: Anti-VZV Antibodies, IgG

Logistics

Test Indications: Intended for the qualitative detection of IgG antibodies to Varicella Zoster Virus in human sera to indicate the following: no exposure to VZV or previous infection with VZV.

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: 1 - 3 days, testing is performed daily, Mon – Fri, during normal business hours

Special Instructions: N/A

Specimen

Specimen Type: Blood

Container: SST (Red, marble, or gold top tube)

Draw Volume: 1 mL blood

Processed Volume: 0.3 mL serum

Collection: Blood should be collected aseptically by venipuncture and placed in a plain, red top tube or other plain sterile tube without anticoagulant and allowed to clot at room temperature.

Special Processing: Lab Staff: Centrifuge specimen as early as possible after clotting; transfer serum to a plain polypropylene tube and refrigerate. If testing is delayed longer than 48 hours, 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.	
<135	Negative
>165	Positive
135 - 165	Equivocal
Interpretation:	
IgG Result	Interpretation
Negative	Patient not exposed or too early
Positive	Immunity from past exposure, not acute disease
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 VZV infection may not have detectable levels of antibody. In such cases, it is recommended that a second serum sample be obtained 2-3 weeks later.

Positive results on VZV-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.

Performance characteristics with individuals vaccinated with VZV (ROD strain) have not been established.

Methodology: Chemiluminescent Immunoassay (CLIA)

References:

Liaison® VZV IgG (January 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:

2/1/2006: Test previously included both IgM and IgG testing. IgM testing is now orderable separately.

8/29/2011: Testing method change, previously listed as ELISA. Note updated reference ranges.

2/9/2016: Update container types