


**Gliadin Deamidated Antibody, IgG**

Order Name: **GLIAD IGG**  
Test Number: **5537550**  
Revision Date: 01/01/2022

TEST NAME	METHODOLOGY	LOINC CODE
Gliadin Deamidated Antibody, IgG	<u>Chemiluminescence Assay</u>	63459-2

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1.0 mL (0.5 mL)	Serum	Clot Activator SST	Frozen
Instructions	Allow specimen to clot completely at room temperature. <b>Separate serum from cells ASAP or within 2 hours of collection.</b> Stability: Room Temperature 8hrs, Refrigerated: 48hrs, Frozen: 30 days. Transport Frozen			

GENERAL INFORMATION	
Testing Schedule	Mon - Fri
Expected TAT	1-3 Days
Clinical Use	Assist in diagnosis of celiac disease; however, interpret results with caution due to the propensity of assay false positives. Useful to monitor diet compliance in celiac patients.
CPT Code(s)	86258
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.