

St. John Health System Lab Catalog

> Order Name: Mumps Ab G/M Test Number: 5564751 Revision Date: 08/04/2020

TEST NAME			METHODOLOGY	LOINC CODE	
Mumps IgM			Indirect Fluorescent Antibody	22420-4	
Mumps Virus Antibody IgG			Chemiluminescence Assay	Group Test	
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	2 mL	Serum	Clot Activator SST	Refrigerated or Frozen	
Instructions		Allow specimen to clot completely at room temperature. Separate serum from cells ASAP or within 2 hours of collection. Stability After separation from cells: Ambient 4hours, Refrigerated 7 days, Frozen 1 months (avoid repeated freeze/thaw cycles).			

GENERAL INFORMATION			
Testing Schedule	Mon-Sat		
Expected TAT	1-2 Days		
CPT Code(s)	86735x2		
Service Provided By	Oklahoma, Inc.		

