


Rubeola (Measles) Virus Antibody IgG

Order Name: **Rubeola Ab IgG**
Test Number: 5571226
Revision Date: 10/23/2017

TEST NAME	METHODOLOGY	LOINC CODE
Rubeola IgG Antibody	Chemiluminescence Assay	5244-9
Rubeola IgG Interpretation		35275-7

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1 mL	Serum	Clot Activator SST	Refrigerated or Frozen
Instructions	Allow specimen to clot completely at room temperature. Separate serum or plasma from cells ASAP or within 2 hours of collection. Stability After separation from cells: Ambient 4hours, Refrigerated 9 days, Frozen 1 month (avoid repeated freeze/thaw cycles).			

GENERAL INFORMATION	
Testing Schedule	Mon-Sat
Expected TAT	1-2 Days
Clinical Use	This test is not recommended as an individual order unless testing for evidence of antibody production from vaccination.
CPT Code(s)	86765
Service Provided By	 labcorp Oklahoma, Inc.