Cutaneous Immunofluorescence IgG Ab

Order Name: **Skin IgG IFA**
Test Number: 5197387
Revision Date: 07/17/2026

TEST NAME	METHODOLOGY	LOINC CODE
Cutaneous Immunofluorescence IgG Ab	Immunofluorescence Assay (IFA)	

SPECIMEN REQUIREMENTS

Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	**1 mL (0.5 mL)**	**Serum**	**Clot Activator (SST or Red No-Gel)**	**Room Temperature**

Instructions

Specimen: 1mL Serum from an SST Clot Tube or Red No Gel Clot Tube in an approved transport tube.
(Note: Minimum Volume 0.5mL does not allow for repeat testing.)
Stability Requirements: Room temperature 14 days, Refrigerated 14 days, Frozen 14 days (Freeze/thaw cycles Stable x3)
Cause for Rejection: Gross hemolysis; grossly lipemic; gross icterus.

GENERAL INFORMATION

Expected TAT: 3-5 Days

Notes

RESULT CODE	RESULT NAME	LOINC CODE
5197586	Esophag Cell Surface IgG	n/a
5197587	Esophag BMZ IgG	n/a
5197588	Split Skin BMZ Roof IgG	n/a
5197589	Split Skin BMZ Floor IgG	n/a
5197590	Esophag cell Surface IgG Titer	(posible result)
5197591	Esophag BMZ IgG Titer	(posible result)
5197592	Split Skin BMZ Roof IgG Titer	(posible result)
5197593	Split Skin BMZ Floor IgG Titer	(posible result)

CPT Code(s): 86255x4

Service Provided By: labcorp Oklahoma, Inc.