

**Southwest Allergy Panel**

Order Name: **A SW G PNL**  
Test Number: **5622225**  
Revision Date: **08/01/2023**

| TEST NAME                            | METHODOLOGY | LOINC CODE |
|--------------------------------------|-------------|------------|
| Cat Dander Allergen                  | ImmunoCAP   | 15609-1    |
| Dog Dander Allergen                  | ImmunoCAP   | 15685-1    |
| Cladosporium herbarum Allergen       | ImmunoCAP   | 6075-6     |
| Alternaria alternata Allergen        | ImmunoCAP   | 15530-9    |
| Dust Mite (D. farinae) Allergen      | ImmunoCAP   | 15680-2    |
| Meadow Grass, Kentucky Blue Allergen | ImmunoCAP   | 15744-6    |
| Mountain Juniper Tree Allergen       | ImmunoCAP   | 15615-8    |
| Johnson Grass Allergen               | ImmunoCAP   | 15743-8    |
| Elm Tree Allergen                    | ImmunoCAP   | 15697-6    |
| Bermuda Grass Allergen               | ImmunoCAP   | 15738-8    |
| Rough Marshelder Allergen            | ImmunoCAP   | 15693-5    |
| Walnut Tree Allergen                 | ImmunoCAP   | 16076-2    |
| Oak Tree Allergen                    | ImmunoCAP   | 6189-5     |
| Ragweed Common Short Allergen        | ImmunoCAP   | 15975-6    |

| SPECIMEN REQUIREMENTS |                                                                                                                                                                                                                                                             |               |                    |                       |
|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------|-----------------------|
| Specimen              | Specimen Volume (min)                                                                                                                                                                                                                                       | Specimen Type | Specimen Container | Transport Environment |
| Preferred             | 6 mL (2.8 mL)                                                                                                                                                                                                                                               | Serum         | Clot Activator SST | Room Temperature      |
| Instructions          | <b>Specimen Type:</b> Red-top tube or gel-barrier tube,<br>Separate Serum from Cells into a screwtop transport container.<br><b>Stability Requirements:</b> Room temperature 14 days, Refrigerated 14 days, Frozen 3 months. (Freeze/thaw cycles Stable x3) |               |                    |                       |

| GENERAL INFORMATION |                                                                                                                      |
|---------------------|----------------------------------------------------------------------------------------------------------------------|
| Expected TAT        | 3-5 Days                                                                                                             |
| Notes               | Testing Performed at Labcorp Phoenix as Individual Allergens.                                                        |
| CPT Code(s)         | 86003x14                                                                                                             |
| Service Provided By |  <b>labcorp</b><br>Oklahoma, Inc. |