

**Mumps Virus Antibody IgG**

Order Name: **Mumps Ab IgG**  
Test Number: **5566716**  
Revision Date: **06/14/2019**

TEST NAME	METHODOLOGY	LOINC CODE
Mumps IgG Antibody	Chemiluminescence Assay	25418-5
Mumps IgG Interpretation		6476-6

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. <b>Separate serum from cells ASAP or within 2 hours of collection.</b> 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
Clinical Use	This test will demonstrate immunity.
CPT Code(s)	86735
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.