

# **ANA Screen, IFA, Reflex Titer/Pattern, and Reflex to Multiplex 11 Ab Cascade**

**CPT Code:** 86038

**Order Code:** 16814

**Includes:** The ANA Screen, IFA, Reflex Titer/Pattern, and Reflex to Multiplex 11 Ab Cascade begins with an ANA Screen, IFA. If ANA Screen, IFA is positive, then ANA Titer and Pattern will be performed at an additional charge (CPT code(s): 86039). Additionally, five antibodies will be performed at an additional charge: dsDNA (CPT code(s): 86225), Sm/RNP (CPT code(s): 86235), RNP (CPT code(s): 86235), Sm (CPT code(s): 86235), and Chromatin (CPT code(s): 86235).

If any of those five antibodies are positive, the cascade stops and the results are reported. If all five of those antibodies are negative, four additional antibodies will be performed at an additional charge: SSA (CPT code(s): 86235), SSB (CPT code(s): 86235), Scl-70 (CPT code(s): 86235), Jo-1 (CPT code(s): 86235).

If any of those four antibodies are positive, the cascade stops and the results are reported. If all four of those antibodies are negative, the following two additional antibodies will be performed at an additional charge: Ribosomal P (CPT code(s): 83516) and Centromere B (CPT code(s): 86235).

Please note the cascade stops upon the first positive antibody result(s) found in a group and an interpretive message is applied based on this information. It is possible that antibodies in subsequent groups are also positive, but will not be added, billed, or reported. Please contact your local Quest Diagnostics Laboratory if you are interested in adding this additional testing.

**Alternative Names:** Systemic Lupus Erythematosus (SLE), Fluorescent ANA, Dermatomyositis, Hep-2, MCTD, Calcinosis, Mixed Connective Tissue Disease, FANA, Progressive ANA, Sclerodactyly, CREST, Telangiectasia, Raynaud's phenomena, Multiplex Cascade, Esophageal dysmotility, Antinuclear Antibody Screen

**ABN Requirement:** No

**Specimen:** Serum

**Volume:** 4.0 mL

**Minimum Volume:** 2.0 mL

**Container:** Gel-barrier tube (SST, Tiger Top)

**Collection:**

1. Collect and label sample according to standard protocols.
2. Gently invert tube 5 times immediately after draw. DO NOT SHAKE.
3. Allow blood to clot 30 minutes.
4. Centrifuge for 10 minutes.

**Transport:** Store serum at 2°C to 8°C after collection and ship the same day per packaging instructions included with the provided shipping box.

**Stability:**

**Ambient (15-25°C):** 4 days

**Refrigerated (2-8°C):** 7 days

**Frozen (-20°C):** 30 days

**Causes for Rejection:** Specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits; gross hemolysis; gross lipemia; gross icterus; microbial contamination

**Methodology:** See Individual Tests

**Turn Around Time:** 3 to 4 days

**Reference Range:**

<b>ANA Screen</b>	Negative
<b>ANA Titer</b>	
<1:40	Negative
1:40-1:80	Low antibody level
>1:80	Elevated antibody level

**Clinical Significance:** Antinuclear antibodies are associated with rheumatic diseases including Systemic Lupus Erythematosus (SLE), mixed connective tissue disease, Sjogren's syndrome, scleroderma, polymyositis, CREST syndrome, and neurologic SLE.

*The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.*