

Overview

Method Name

Enzyme Immunoassay (FEIA)

NY State Available

No

Specimen

Specimen Type

Serum

Specimen Required

Collection Container/Tube:

Preferred: Red top

Acceptable: Serum gel

Submission Container/Tube: Plastic vial

Specimen Volume: 0.5 mL

Collection Instructions:

1. Draw blood in a plain red-top tube(s), serum gel tube(s) is acceptable.
2. Centrifuge and aliquot 0.5 mL of serum in a plastic vial.
3. Send refrigerate.

Specimen Minimum Volume

See Specimen Required

Reject Due To

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------------|----------|-------------------|
| Serum | Refrigerated (preferred) | 28 days | |
| | Frozen | 365 days | |
| | Ambient | 7 days | |

Clinical & Interpretive

Reference Values

Reference ranges have not been established for food-specific IgG tests.

Interpretation

The clinical utility of food-specific IgG tests has not been established. These tests can be used in special clinical situations to select foods for evaluation by diet elimination and challenge in patients who have food-related complaints. It should be recognized that the presence of food-specific IgG alone cannot be taken as evidence of food allergy and only indicates immunologic sensitization by the food allergen in question. This test should only be ordered by physicians who recognize the limitations of the test.

Performance**PDF Report**

No

Day(s) Performed

Monday through Friday

Report Available

5 to 7 days

Performing Laboratory Location

Eurofins Viracor

Fees & Codes**Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by Eurofins Viracor. It has not been cleared or approved by the U.S. Food and Drug Administration.

CPT Code Information

86001

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|-----------------|--------------------|
| FCELG | Celery IgG | 60363-9 |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|------------------|---------------------|
| FCELG | Celery IgG | 60363-9 |