

Overview**Method Name**

Only orderable as part of a profile. For more information see:
-MSP3 / Multiple Sclerosis (MS) Profile, Serum and Spinal Fluid
-OLIG / Oligoclonal Banding, Serum and Spinal Fluid

Collection Only

NY State Available

No

Specimen**Specimen Type**

Serum

Specimen Required

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-OLIG / Oligoclonal Banding, Serum and Spinal Fluid

Specimen Type: Serum

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL

Collection Instructions:

1. Centrifuge and aliquot serum in plastic vial within 2 hours of collection.
2. Label specimen as serum.

Specimen Minimum Volume

0.5 mL

Reject Due To

| | |
|-----------------|----|
| Gross hemolysis | OK |
| Gross lipemia | OK |

| | |
|---------------|----|
| Gross icterus | OK |
|---------------|----|

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------|---------|-------------------|
| Serum | Ambient | 14 days | |
| | Refrigerated | 14 days | |
| | Frozen (preferred) | 14 days | |

Clinical & Interpretive

Performance

PDF Report

No

Specimen Retention Time

14 days

Performing Laboratory Location

Rochester

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

Not Applicable

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|------------------------------------|--------------------|
| XSRM | Additional sample for reflex OLIGS | No LOINC Needed |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|------------------------------------|---------------------|
| XSRM | Additional sample for Reflex OLIGS | No LOINC Needed |