

# **Test Definition: CBL**

Blastomyces Antibody Immunodiffusion, Spinal

Fluid

# Overview

## **Useful For**

Detection of antibodies in spinal fluid specimens from patients with blastomycosis

## **Method Name**

Immunodiffusion (ID)

## **NY State Available**

Yes

# **Specimen**

# **Specimen Type**

**CSF** 

## **Specimen Required**

**Container/Tube:** Sterile vial **Specimen Volume:** 0.5 mL

Collection Instructions: Submit specimen from collection vial number 2 (preferred), 3, or 4.

## **Forms**

If not ordering electronically, complete, print, and send <u>Infectious Disease Serology Test Request</u> (T916) with the specimen.

# **Specimen Minimum Volume**

0.3 mL

# **Reject Due To**

Gross	OK
hemolysis	
Gross lipemia	OK

# **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	14 days	
	Frozen	14 days	



# **Test Definition: CBL**

Blastomyces Antibody Immunodiffusion, Spinal

Fluid

# Clinical & Interpretive

## **Clinical Information**

The dimorphic fungus, *Blastomyces dermatitidis*, causes blastomycosis. When the organism is inhaled, it causes pulmonary disease-cough, pain, and hemoptysis, along with fever and night sweats. It commonly spreads to the skin, bone, or internal genitalia where suppuration and granulomas are typical. Occasionally, primary cutaneous lesions after trauma are encountered; however, this type of infection is uncommon. Central nervous system disease is uncommon.

## **Reference Values**

Negative

## Interpretation

A positive result is suggestive of infection, but the results cannot distinguish between active disease and prior exposure. Furthermore, detection of antibodies in cerebrospinal fluid (CSF) may reflect intrathecal antibody production or may occur due to passive transfer or introduction of antibodies from the blood during lumbar puncture.

Routine fungal culture of clinical specimens (eg, CSF) is recommended in cases of suspected blastomycosis involving the central nervous system.

#### **Cautions**

A negative result does not rule-out blastomycosis.

Patients with histoplasmosis may have low-titered cross-reactions.

# **Clinical Reference**

- 1. Kaufman L, Kovacs JA, Reiss E. Clinical immunomycology. In: Rose NL, Conway-de Macario E, Folds JD, Lane HC, Nakamura RM, eds. Manual of Clinical Laboratory Immunology. ASM Press; 1997:588-589
- 2. Gauthier GM, Klein BS. Blastomycosis. In: Bennett JE, Dolin R, Blaser MJ, eds. Mandell, Douglas, and Bennett's Principles and Practice of Infectious Diseases. 9th ed. Elsevier; 2020:3177-3189

## **Performance**

# **Method Description**

The immunodiffusion (ID) test is a qualitative test employed for the detection of precipitating antibodies present in the specimen. Soluble antigens of the fungus are placed in wells of an agarose gel-filled Petri dish, and the patient's specimen and a control (positive) are placed in adjoining wells. If present, specific precipitate antibody will form precipitin lines between the wells. Their comparison to the control establishes the results. When performing the ID test, only precipitin bands of identity with the reference bands are significant. (Kaufman L, McLaughlin DW, Clark MJ, Blumer S. Specific immunodiffusion test for blastomycosis. Appl Microbiol. 1973;26:244-247; Williams JE, Murphy R, Standard PG, Phan JP. Serologic response in blastomycosis: diagnostic value of double immunodiffusion assay. Am Res Resp Dis. 1981;123:209-212; Bennett JE, Dolin R, Blaser MJ, eds. Mandell, Douglas, and Bennett's Principles and Practice of



# **Test Definition: CBL**

Blastomyces Antibody Immunodiffusion, Spinal

Fluid

Infectious Diseases. 9th ed. Elsevier; 2020)

# **PDF Report**

No

## Day(s) Performed

Monday through Friday

# **Report Available**

3 to 5 days

# **Specimen Retention Time**

14 days

# **Performing Laboratory Location**

Rochester

## **Fees & Codes**

#### **Fees**

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

# **Test Classification**

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

# **CPT Code Information**

86612

## **LOINC®** Information

Test ID	Test Order Name	Order LOINC® Value
CBL	Blastomyces Ab Immunodiffusion,	51741-7
	CSF	

Result ID	Test Result Name	Result LOINC® Value
15134	Blastomyces Immunodiffusion (CSF)	51741-7