Notification Date: April 14, 2023 Effective Date: Immediately

# Dog Dander, IgE, with Reflex to Dog Dander Components, IgE, Serum

Test ID: DOGPF

## **Useful for:**

Evaluating patients with suspected dog dander allergy.

## **Reflex Tests:**

Test ID	Reporting Name	Available Separately	Always Performed
DOGPR	Dog Dander Components, IgE, S	No	No

## Methods:

Fluorescent Enzyme Immunoassay (FEIA)

### **Reference Values:**

Testing begins with analysis of dog dander IgE. If dog dander IgE is negative (<0.10 kU/L), testing is complete.

If dog dander IgE is 0.10 kU/L or more, then DOGPR/6 dog dander components (Can f 1, Can f 2, Can f 3, Can f 4, Can f 5, Can f 6) are performed at an additional charge.

Class	IgE kU/L	Interpretation	
0	<0.10	Negative	
0/1	0.10-0.34	Borderline/equivocal	
1	0.35-0.69	Equivocal	
2	0.70-3.49	Positive	
3	3.50-17.4	Positive	
4	17.5-49.9	Strongly positive	
5	50.0-99.9	Strongly positive	
6	> or =100	Strongly positive	

Concentrations of 0.70 kU/L or more (class 2 and above) will flag as abnormally high.

Reference values apply to all ages.

# **Specimen Requirements:**

**Collection Container/Tube:** 

Preferred: Serum Gel

Acceptable: Red top

Specimen Volume: 1 mL

**Collection Instructions:** Centrifuge and aliquot serum into a plastic vial.

Minimum Volume: 0.6 mL

Submission Container/Tube: Plastic vial

# **Specimen Stability Information:**

Specimen Type	Temperature	Time
Serum	Refrigerated (preferred)	14 days
	Frozen	90 days

#### Cautions:

Clinical correlation of results from in vitro IgE testing with patient history of allergic or anaphylactic responses to dogs is recommended.

- -Negative results for IgE to total dog dander and any dog allergenic components do not completely exclude the possibility of clinically relevant allergic responses upon exposure to dog dander.
- -Positive results for IgE to total dog dander or any potential dog allergenic components are not diagnostic for dog allergy and only indicate patient may be sensitized to dog dander or a cross-reactive allergen.

Testing for IgE antibodies may not be useful in patients previously treated with immunotherapy to determine if residual clinical sensitivity exists or in patients whose medical management does not depend upon the identification of allergen specificity.

False-positive results for IgE antibodies may occur in patients with markedly elevated serum IgE (>2500 kU/L) due to nonspecific binding to allergen solid phases.

## **CPT Code:**

86003

Day(s) Performed: Monday through Friday Report Available: 1 to 3 days

## **Questions**

Contact Bethany Feind, Laboratory Resource Coordinator at 800-533-1710.