

PrecivityAD, Plasma

Test ID: C2NAD

Useful for:

Assisting in the evaluation of adult patients, aged 55 years and older, with signs or symptoms of mild cognitive impairment or dementia who are being assessed for Alzheimer disease and other causes of cognitive decline

This is **not intended for** patients younger than 55 years, or for use as a screening test in patients without signs or symptoms of cognitive impairment, or for serial testing for assessment of longitudinal changes.

Methods:

Immunoprecipitation/Liquid Chromatography Tandem Mass Spectrometry (LC-MS/MS)

Reference Values:

Amyloid Probability Score (APS): 0-100

Low (0-35): Consistent with absence of amyloid plaques

Intermediate (36-57)

High (58- 100): Consistent with presence of amyloid plaques

Abeta42/40 Ratio

> or =0.095: Consistent with absence of amyloid plaques

ApoE Proteotype

E2/E2, E2/E3, E2/E4, E3/E3, E3/E4, E4/E4

-E3 is the most common allele.

-E4 allele is associated with increased risk of amyloid plaques.

-E2 allele is associated with lower risk of amyloid plaques.

Specimen Requirements:

Supplies:	Screw cap micro tube, 2 mL, PCR Performance Tested, Low protein-binding (T983)
Collection Container/Tube:	10 mL Purple top (K EDTA)
Submission Container/Tube:	2-mL screw cap micro tubes

Specimen Volume: 1.5 mL

Collection Instructions:

1. Centrifuge within two hours of collection
2. Aliquot plasma into a 2 mL micro tube.
3. Freeze plasma (no longer than 2 hours after collection) at -20 degrees C or below.

Minimum Volume: 1 mL

Specimen Stability Information:

Specimen Type	Temperature	Time
Plasma	Frozen	

Cautions:

This test is not a standalone test; high, intermediate, or low Amyloid Probability Score (APS) values alone neither establish nor rule out a diagnosis of Alzheimer disease (AD).

Test results should be used in conjunction with other diagnostic tools, such as neurological examination, neurobehavioral tests, imaging, and routine laboratory tests.

False-positive and false-negative test results may occur.

This test uses interpretive data that were derived from clinical studies in a predominantly White US population of patients with mild cognitive impairment or early dementia. The extent of the differences in results (if any) based on individuals of other racial and ethnic groups has not yet been firmly established.

Currently, there is insufficient evidence to support serial testing for the assessment of longitudinal changes in biomarkers; therefore, serial testing is not recommended.

CPT Code:

0412U

Day(s) Performed: Monday through Friday **Report Available:** 10 days post sample receipt from MCL

Questions

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