



IDAHO DEPARTMENT OF HEALTH & WELFARE
DIVISION OF PUBLIC HEALTH

Test Title	Varicella Zoster Virus IgG Antibody Detection Methodology: Enzyme Immunoassay
Sample Requirements	<ol style="list-style-type: none">1. Sample type(s): acute phase serum or paired sera (0.5 mL)2. Separated serum should remain at room temperature (20-25°C) for no longer than 8 hours. Serum should be refrigerated at 2-8°C. If testing is not completed within 48 hours of collection, serum should be frozen at or below -20°C. Multiple freeze-thaw cycles should be avoided.3. Rejection criteria: Icteric, hemolyzed, grossly contaminated or heat inactivated serum
Sampling Materials	<ol style="list-style-type: none">1. Sample container: serum collected in a serum separator tube or transferred to transport vial2. Serum is the only acceptable specimen for use with this assay.
Procedural Notes	<ol style="list-style-type: none">1. Clinical Test Request Form and Client Billing Form (if applicable)2. CPT code: 86787
Shipping Instructions	<ol style="list-style-type: none">1. Temperature/preservative instructions: room temperature (20-25°C) or refrigerated (2-8°C)2. Package according to Biological Substance, Category B, shipping guidelines.3. Ship to: Idaho Bureau of Laboratories ATTENTION: Serology Laboratory 2220 Old Penitentiary Rd Boise, ID 83712
Reporting and Turnaround Time (TAT)	<ol style="list-style-type: none">1. TAT: within 7 business days2. Reference range: N/A