NEW TESTS Please Note: Not all test codes assigned to each assay are listed in the table of contents. Please refer to the complete listing on the page numbers indicated.			
Test Code	**Test Name**	**Effective Date**	**Page #**
39462	**Ganglioside Asialo-GM-1 Antibody (IgG), EIA**	7/20/2012	2
38836	**Ganglioside Asialo-GM-1 Antibody (IgM), EIA**	7/20/2012	2
38916	**Ganglioside GD1a Antibody (IgG), EIA**	7/20/2012	3
38964	**Ganglioside GD1a Antibody (IgM), EIA**	7/20/2012	3
39461	**Ganglioside GD1b Antibody (IgG), EIA**	7/20/2012	4
37439	**Ganglioside GD1b Antibody (IgM), EIA**	7/20/2012	5
37093	**Ganglioside GM-1 Antibodies (IgG and IgM), EIA**	7/20/2012	5
37053	**Hu Antibody Screen with Reflex to Titer and Western Blot**	7/20/2012	6
37078	**Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM)**	7/20/2012	7
37438	**Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA**	7/20/2012	7
10269	**Protein Electrophoresis, Serum w/Total Protein & Rflx to IFE**	7/20/2012	8
90129	**Sensory-Motor Neuropathy Antibody Panel (Ganglioside)**	7/20/2012	9

TEST CHANGES Please Note: Not all test codes assigned to each assay are listed in the table of contents. Please refer to the complete listing on the page numbers indicated.				
Test Code	**Former Test Code**	**Test Name**	**Effective Date**	**Page #**
35080		Leukemia/Lymphoma Evaluation Panel	7/17/2012	10
4925		Topiramate	8/6/2012	10

REDIRECTS Please Note: Not all test codes assigned to each assay are listed in the table of contents. Please refer to the complete listing on the page numbers indicated.				
Test Code	**Former Test Code**	**Test Name**	**Effective Date**	**Page #**
37093	1441	**Ganglioside GM-1 Antibodies (IgG and IgM), EIA**	7/20/2012	11
34144	4043	**Ganglioside GQ1b Antibody (IgG), EIA**	7/20/2012	11
37053	1186	**Hu Antibody Screen with Reflex to Titer and Western Blot**	7/20/2012	12
37710	1186C	**Hu Antibody Screen with Rflx to Titer and Western Blot, CSF**	7/20/2012	13
90138	1171	**Hu, Yo, and Ri Antibodies with Reflex to Titers and WB**	7/20/2012	14
90122	1171C	**Hu, Yo, Ri Abs with Reflex to Titers and Western Blot, CSF**	7/20/2012	15
37078	4046	**Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM)**	7/20/2012	17
37438	1926	**Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA**	7/20/2012	17
10140	1196	**Ri Antibody Screen w/ Reflex to Titer and Western Blot**	7/20/2012	18
90121	1196C	**Ri Antibody Screen with Rflx to Titer and Western Blot, CSF**	7/20/2012	19
90119	1187	**Yo Antibody Screen with Reflex to Titer and Western Blot**	7/20/2012	20

90117	1187C	**Yo Antibody Screen with Reflex to Titer and Western Blot, CSF**	7/20/2012	21

DISCONTINUED TESTS **Please Note: Not all test codes assigned to each assay are listed in the table of contents.** **Please refer to the complete listing on the page numbers indicated.**			
Test Code	**Test Name**	**Effective Date**	**Page #**
4011	Ganglioside Asialo-GM1 Autoabs	7/20/2012	22
4056	Ganglioside Autoabs Evaluation	7/20/2012	22
4006	Ganglioside GD1a Autoabs	7/20/2012	22
4041	Ganglioside GD1b Autoabs	7/20/2012	22
4058	Ganglioside GM1 Triple Evaluation	7/20/2012	22
4012	Ganglioside GM2 Autoabs	7/20/2012	22
4051	MAG & SGPG IgM Autoabs	7/20/2012	22
4021	Motor & Sensory Neuropathy Evaluation	7/20/2012	22
4026	Motor Neuropathy Evaluation	7/20/2012	23
4031	Sensory Neuropathy Evaluation	7/20/2012	23

New Test Offerings

The following tests will be available through Quest Diagnostics on the dates indicated below.

Ganglioside Asialo-GM-1 Antibody (IgG), EIA	
Effective Date	**7/20/2012**
Test Code	**39462**
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 14 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	Asialo-GM-1 Ab (IgG): <1:100 titer
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85996325 / Asialo-GM-1 Ab (IgG)

Ganglioside Asialo-GM-1 Antibody (IgM), EIA	
Effective Date	**7/20/2012**

Test Code	**38836**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 14 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	Asialo-GM-1 Ab (IgM): < OR = 1:1600 titer
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85995733 / Asialo-GM-1 Ab (IgM)

Ganglioside GD1a Antibody (IgG), EIA	
Clinical Significance	Ganglioside GD1a Antibody IgG is associated with acute motor axonal neuropathy, sometimes followed by Campylobacter jejuni infections. Ganglioside GD1a Antibody IgG can aid in the diagnosis of acute motor axonal neuropathy variant of Guillain-Barre syndrome.
Effective Date	**7/20/2012**
Test Code	**38916**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 24 Hours Refrigerated: 7 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Reports available: 2 days
Reference Range	GD1a Ab (IgG): <1:100 titer
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85996005 / GD1a Ab (IgG)

Ganglioside GD1a Antibody (IgM), EIA	
Clinical Significance	Ganglioside GD1a Antibody IgM is associated with the presence of multifocal motor neuropathy, sometimes in association with IgM monoclonal gammopathy. Antibody testing can aid in the diagnosis of multifocal motor neuropathy or predominantly motor neuropathy.
Effective Date	**7/20/2012**
Test Code	**38964**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 24 Hours Refrigerated: 7 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	GD1a Ab (IgM) <1:800 titer
Always Message	This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85996006 / GD1a Ab (IgM)

Ganglioside GD1b Antibody (IgG), EIA	
Clinical Significance	Ganglioside GD1b Antibody IgG is associated with acute sensory ataxia neuropathy variant of the Guillain-Barre syndrome.
Effective Date	**7/20/2012**
Test Code	**39461**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 7 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	GD1b Ab (IgG): <1:100 titer
Methodology	Enzyme Immunoassay

Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name**: 85996324 / GD1b Ab (IgG)

Ganglioside GD1b Antibody (IgM), EIA	
Clinical Significance	Ganglioside GD1b Antibody IgM is associated with chronic sensory ataxia neuropathy, sometimes in association with fixed or transient extracellular or bulbar involvement.
Effective Date	**7/20/2012**
Test Code	**37439**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 14 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	GD1b Ab (IgM): < OR = 1:800 titer
Always Message	This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name**: 85992165 / GD1b Ab (IgM)

Ganglioside GM-1 Antibodies (IgG and IgM), EIA	
Clinical Significance	Ganglioside GM-1 Antibody IgG is associated with the Guillain-Barre syndrome, particularly the acute motor axonal neuropathy variant. Antibody IgM is associated with chronic multifocal motor neuropathy.
Effective Date	**7/20/2012**
Test Code	**37093**
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 14 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days

Reference Range	<table><tr><td>GM-1 Ab (IgG):</td><td><1:800 titer</td></tr><tr><td>GM-1 Ab (IgM):</td><td><1:800 titer</td></tr></table> Reference Ranges for IgG, IgM Antibodies to Ganglioside GM1: Normal: Less than 1:800 Moderately Elevated: 1:800-1:3200 Highly Elevated: 1:6400 or greater
Methodology	Enzyme Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	<table><tr><th>Result Code</th><th>Result Name</th></tr><tr><td>85991299</td><td>GM-1 Ab (IgG)</td></tr><tr><td>85991300</td><td>GM-1 Ab (IgM)</td></tr></table>

Hu Antibody Screen with Reflex to Titer and Western Blot	
Clinical Significance	Paraneoplastic Syndrome involves non-metastatic systemic effects that accompany malignant disease. Antineuronal Nuclear Antibody (Anti-Hu) is found in 5-10% of patients with small cell carcinoma of the lung. Anti-Hu is associated with subacute syndrome of encephalomyeloradiculopathy, sensory neuropathy, and autoimmune neuropathy, predominantly affecting the gastrointestinal tract.
Effective Date	**7/20/2012**
Test Code	**37053**
CPT Codes	86255
Specimen Requirements	0.5 (0.2) mL Serum.
Instructions	Overnight fasting is preferred.
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 Days Refrigerated: 14 Days Frozen: 21 Days
Set-up/Analytic Time	Set up: Mon, Wed, Fri; Report available: 4 days
Reference Range	See individual assays.
Always Message	Neuronal nuclear (Hu) antibody is present in patients with various neurological symptoms including two paraneoplastic syndromes: sensory neuropathy (PSN) and encephalomyelitis (PEM). The presence of Hu antibody strongly suggests underlying small cell lung carcinoma (SCLC). Hu antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of a SCLC or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	Immunofluorescence Assay • Western Blot
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	<table><tr><th>Result Code</th><th>Result Name</th><th></th></tr><tr><td>85991142</td><td>Hu Ab, IFA, Serum</td><td></td></tr><tr><td>37053-2</td><td>Reflex Neuronal Nuclear Antibody, WB, Serum</td><td>Reflex</td></tr></table>

85991144	Hu Ab, Western Blot, Serum	
37053-3	Reflex Neuronal Nuclear Antibody Titer, Serum	Reflex
85991143	Hu Ab Titer, Serum	

Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM)	
Clinical Significance	MAG, Antibody IgM is useful in detecting antibodies associated with autoimmune peripheral neuropathy.
Effective Date	**7/20/2012**
Test Code	**37078**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Instructions	Avoid hemolysis. Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 14 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Thu; Report available: 2 days
Reference Range	MAG-SGPG Ab (IgM), EIA : < OR = 1:1600 titer
Always Message	This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.
Methodology	Enzyme Immunoassay • Endpoint Titered
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85991239 / MAG-SGPG Ab (IgM), EIA

Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA	
Effective Date	**7/20/2012**
Test Code	**37438**
CPT Codes	83520
Specimen Requirements	1 (0.2) mL Serum
Reject Criteria	Received room temperature
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 7 Days Frozen: 30 Days
Set-up/Analytic Time	Set up: Tue, Fri; Report available: 2 days
Reference Range	MAG Ab (IgM), EIA: <1:1600 titer

	Normal: <1:1600 Moderately Elevated: 1:1600-1:3200 Highly Elevated: >1:6400
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85992164 / MAG Ab (IgM), EIA

Protein Electrophoresis, Serum w/Total Protein & Rflx to IFE	
Clinical Significance	Protein electrophoresis evaluates the major protein fractions (I.e., albumin, alpha1, alpha2, beta, and gamma proteins) to determine if there are deficiencies or excesses as seen with macroglobulinemia and multiple myeloma. Immunofixation is useful in characterizing M-components observed in the protein electrophoresis.
Effective Date	**7/20/2012**
Test Code	**10269**
CPT Codes	84155, 84165
Specimen Requirements	3 (1.5) mL serum
Reject Criteria	Hemolysis; Plasma
Instructions	Overnight fasting is preferred
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 4 days Refrigerated: 7 days Frozen: 28 days
Set-up/Analytic Time	Set up: Mon-Sat; Report available: 4-5 days
Reference Range	See Laboratory Report
Methodology	Electrophoresis • Spectrophotometry • Immunofixation
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

CPU Mappings

Result Code	Result Name	
25001300	Protein, Total	
50055700	Albumin	
50055800	Alpha-1-Globulin	
50055900	Alpha-2-Globulin	
50056000	Beta Globulin	
50056100	Gamma Globulin	
50059700	Abnormal Protein Band 1	
50059701	Abnormal Protein Band 2	
50059702	Abnormal Protein Band 3	
50058500	INTERPRETATION	
3647-2	Reflex Immunofixation, Serum	Reflex
3952	Immunofixation, Serum	

Additional Information	If monoclonal band is detected, Immunofixation will be performed at an additional charge (add CPT 86334).

Sensory-Motor Neuropathy Antibody Panel (Ganglioside)	
Effective Date	**7/20/2012**
Test Code	**90129**
CPT Codes	83520 (x9)
Specimen Requirements	3 (1.6) mL Serum
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 24 Hours Refrigerated: 7 Days Frozen: 21 Days
Set-up/Analytic Time	Set up: Mon, Wed; Report available: 2 days
Reference Range	See individual assays.
Always Message	**Applies under item GM-1 Ab (IgM)** Reference Ranges for IgG, IgM Antibodies to Ganglioside GM1: Normal: Less than 1:800 Moderately Elevated: 1:800-1:3200 Highly Elevated: 1:6400 or greater **Applies under item GD1a Ab (IgM)** This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test. **Applies under item GD1b Ab (IgM)** This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.
Methodology	Immunoassay
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	Result Name
85991299	GM-1 Ab (IgG)
85991300	GM-1 Ab (IgM)
85996005	GD1a Ab (IgG)
85996006	GD1a Ab (IgM)
85996324	GD1b Ab (IgG)
85992165	GD1b Ab (IgM)
85993209	GQ1b Ab (IgG)
85996325	Asialo-GM-1 Ab (IgG)
85995733	Asialo-GM-1 Ab (IgM)

Test Changes

Leukemia/Lymphoma Evaluation Panel	
Effective Date	**7/17/2012**
Test Code	35080
Instructions	Test will no longer reflex and items will be integrated into the panel.
CPU Mappings	

Result Code	Result Name	
29130	**CLINICAL INFORMATION:**	**AOE**
29131	**SPECIMEN TYPE:**	**AOE**
29132	**VIABILITY:**	
29133	**INTERPRETATION:**	
29134	**SAMPLE DESCRIPTION:**	
29135	**GATING STRATEGY:**	
29136	**MARKERS:**	
29186	**NUMBER OF MARKERS:**	
29137	**1 Additional Marker**	
29138	**2 Additional Markers**	
29139	**3 Additional Markers**	

Topiramate	
Clinical Significance	Topiramate is an anticonvulsant used as an adjunctive treatment of partial-onset epilepsy. Therapeutic drug monitoring is useful to optimize dose and avoid toxicity.
Effective Date	**8/6/2012**
Test Code	4925
Specimen Requirements	**1 ml serum collected in a red-top (no gel) or No additive (royal blue-top) tube - or - 1 mL plasma collected in a lithium heparin (green-top) tube**
Instructions	**Draw at peak (2-4 hours after dose) or trough (0.5-1 hour before dose) at steady state. Do not use gel barrier/Serum Separator tubes.**
Transport Temperature	**Room temperature**
Set-up/Analytic Time	**Set Up: Tues-Sat; Report available: 4 days**
Reference Range	

Daily Dose (mg)	Peak	Trough
100 200 400	**6.5 - 9.2 mcg/mL 12.0 – 16.0 mcg/L 20.0 - 30.0 mcg/L**	**4.5 - 6.6 mcg/mL 8.0 – 12.0 mcg/mL 14.0-20.0 mcg/mL**

Methodology	**Liquid Chromatography Tandem Mass Spectrometry**
CPU Mappings	

Result Code	Result Name
37097	**Topiramate**

Redirects

Ganglioside GM-1 Antibodies (IgG and IgM), EIA	
Clinical Significance	**Ganglioside GM-1 Antibody IgG is associated with the Guillain-Barre syndrome, particularly the acute motor axonal neuropathy variant. Antibody IgM is associated with chronic multifocal motor neuropathy.**
Effective Date	**7/20/2012**
Former Test Name	*Ganglioside Monosialic Acid (GM1) Autoabs*
Former Test Code	*1441*
Test Code	**37093**
Specimen Requirements	1 **(0.2)** mL Serum
Reject Criteria	**Received room temperature**
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: **14** Days Frozen: **30 Days**
Set-up/Analytic Time	Set up: Tue,Thu; Report available: **2 days**
Reference Range	**GM-1 Ab (IgG): <1:800 titer** **GM-1 Ab (IgM): <1:800 titer** **Reference Ranges for IgG, IgM Antibodies to Ganglioside GM1:** **Normal: Less than 1:800** **Moderately Elevated: 1:800-1:3200** **Highly Elevated: 1:6400 or greater**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85991299 / GM-1 Ab (IgG) 85991300 / GM-1 Ab (IgM)

Ganglioside GQ1b Antibody (IgG), EIA	
Clinical Significance	**Ganglioside GQ1b Antibody IgG can serve as an aid in the diagnosis of acute ataxia neuropathy with ophthalomoplegia or with the Miller-Fisher syndrome.**
Effective Date	**7/20/2012**
Former Test Name	*Neuropathy panel 4043*
Former Test Code	*4043*
Test Code	**34144**
Specimen Requirements	1 **(0.2)** mL serum
Instructions	Overnight fasting is preferred

Transport Temperature	Room temperature
Specimen Stability	Room temperature: **7 days** Refrigerated: **14 days** Frozen: **21 days**
Set-up/Analytic Time	Set up: Tue,Thu; Report available: **2 days**
Reference Range	**LESS THAN 1:100**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85993209 / GQ1b Ab (IgG)

Hu Antibody Screen with Reflex to Titer and Western Blot	
Clinical Significance	**Paraneoplastic Syndrome involves non-metastatic systemic effects that accompany malignant disease. Antineuronal Nuclear Antibody (Anti-Hu) is found in 5-10% of patients with small cell carcinoma of the lung. Anti-Hu is associated with subacute syndrome of encephalomyeloradiculopathy, sensory neuropathy, and autoimmune neuropathy, predominantly affecting the gastrointestinal tract.**
Effective Date	**7/20/2012**
Former Test Name	*Neuronal Nuclear (Hu) Autoabs*
Former Test Code	*1186*
Test Code	**37053**
CPT Codes	**86255**
Specimen Requirements	**0.5 (0.2)** mL Serum.
Instructions	Overnight fasting is preferred.
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 Days Refrigerated: 14 Days Frozen: **21 Days**
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Reference Range	See individual assays.
Always Message	Neuronal nuclear (Hu) antibody is present in patients with various neurological symptoms including two paraneoplastic syndromes: sensory neuropathy (PSN) and encephalomyelitis (PEM). The presence of Hu antibody strongly suggests underlying small cell lung carcinoma (SCLC). Hu antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of a SCLC or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay** • Western Blot
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** / 85991142 / Hu Ab, IFA, Serum / 37053-2 / Reflex Neuronal Nuclear Antibody, WB, Serum / Reflex

85991144	Hu Ab, Western Blot, Serum	
37053-3	Reflex Neuronal Nuclear Antibody Titer, Serum	Reflex
85991143	Hu Ab Titer, Serum	

Hu Antibody Screen with Rflx to Titer and Western Blot, CSF	
Clinical Significance	**Paraneoplastic Syndrome involves non-metastatic systemic effects that accompany malignant disease. Antineuronal Nuclear Antibody (Anti-Hu) is found in 5-10% of patients with small cell carcinoma of the lung. Anti-Hu is associated with subacute syndrome of encephalomyeloradiculopathy, sensory neuropathy, and autoimmune neuropathy, predominantly affecting the gastrointestinal tract.**
Effective Date	**7/20/2012**
Former Test Name	*Neuronal Nuclear (Hu) Autoabs CSF*
Former Test Code	*1186C*
Test Code	**37710**
CPT Codes	**86255**
Specimen Requirements	**0.8 (0.5)mL CSF**
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: **8 Hours** Refrigerated: **7** Days Frozen: **6** Months
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Always Message	Neuronal nuclear (Hu) antibody is present in patients with various neurological symptoms including two paraneoplastic syndromes: sensory neuropathy (PSN) and encephalomyelitis (PEM). The presence of Hu antibody strongly suggests underlying small cell lung carcinoma (SCLC). Hu antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of a SCLC or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay** • Western Blot
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	**Result Name**	
85991307	Hu Ab, IFA, CSF	
37710-2	Reflex Neuronal Nuclear Antibody, WB, CSF	Reflex
85991309	Hu Ab, Western Blot, CSF	
37710-3	Reflex Neuronal Nuclear Antibody Titer, CSF	Reflex
85991308	Hu Ab Titer, CSF	

Hu, Yo, and Ri Antibodies with Reflex to Titers and WB

Effective Date	**7/20/2012**
Former Test Name	*Paraneoplastic Syndrome Evaluation*
Former Test Code	*1171*
Test Code	**90138**
CPT Codes	**86255 (x3)**
Specimen Requirements	**1.5 (0.6)** mL Serum.
Instructions	Overnight fasting is preferred.
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 Days Refrigerated: 14 Days Frozen: **21 Days**
Set-up/Analytic Time	Set up: Mon, Wed, Fri; Report available: 2-3 days
Always Message	**Applies under Hu Ab, IFA, Serum** Neuronal nuclear (Hu) antibody is present in patients with various neurological symptoms including two paraneoplastic syndromes: sensory neuropathy (PSN) and encephalomyelitis (PEM). The presence of Hu antibody strongly suggests underlying small cell lung carcinoma (SCLC). Hu antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of a SCLC or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test. **Applies under Yo Ab, IFA, Serum** Purkinje cells cytoplasmic antibody (Yo) can be found in approximately 50% of patients with paraneoplastic cerebellar degeneration (PCD). The presence of Yo antibody strongly suggests underlying gynecological cancer primarily of ovarian or breast origin. A negative assay for Yo antibody does not exclude the possibility of a malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test. **Applies under Neuronal Nuc Ab (Ri), IFA:** Neuronal nuclear (anti Ri) antibody is detected in patients with paraneoplastic syndrome clinically presenting with myoclonus/opsoclonus. The presence of Ri antibody strongly suggests underlying breast carcinoma, or gynecological cancer. Ri antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of breast cancer or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	Result Name	
85991142	Hu Ab, IFA, Serum	

85991852	Yo Ab, IFA, Serum	
85994520	Neuronal Nuc Ab (Ri), IFA	
90138-2	Reflex Neuronal Nuclear Antibody, (Hu), Western Blot, Serum	Reflex
85991144	Hu Ab, Western Blot, Serum	
90138-3	Reflex Neuronal Nuclear Antibody, (Hu), Titer, Serum	Reflex
85991143	Hu Ab Titer, Serum	
90138-5	Reflex Neuronal Nuclear Antibody, (Yo), Western Blot, Serum	Reflex
86007479	Yo Ab, Western Blot, Serum	
90138-6	Reflex Neuronal Nuclear Antibody, (Yo), Titer, Serum	Reflex
85991853	Yo Ab Titer, Serum	
90138-8	Reflex Neuronal Nuclear Antibody, Ri, Western Blot	Reflex
85994522	Ri Ab, Western Blot	
90138-9	Reflex Neuronal Nuclear Antibody, Ri, Titer	Reflex
85994521	Ri Ab Titer	

Hu, Yo, Ri Abs with Reflex to Titers and Western Blot, CSF	
Clinical Significance	**Hu anti-neuronal nuclear antibody (anti-Hu) is found in 5-10% of patients with small cell carcinoma of the lung. Purkinje cell (Yo) antibody is found in patients with paraneoplastic cerebellar degeneration and is associated with breast, ovarian, and other gynecologic cancers. Some patients with ovarian cancer have low titers of Yo antibodies in the absence of cerebellar degeneration. Anti-Hu antibodies are associated with paraneoplastic encephalomyelitis and sensory neuropathy. Anti-Ri antibody can be detected in patients with paraneoplastic opsoclonus/myoclonus syndrome. Neoplasms most often associated with anti-Ri include breast cancer, small cell lung cancer, and gynecological cancers.**
Effective Date	**7/20/2012**
Former Test Name	*Paraneoplastic Syndrome Evaluation CSF*
Former Test Code	*1171C*
Test Code	**90122**
CPT Codes	**86255 (x3)**
Specimen Requirements	**2.4 (1.5)** mL CSF.
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: **8 Hours** Refrigerated: **7** Days Frozen: **6** Months
Set-up/Analytic Time	Set up: Mon, Wed, Fri; Report available: 3-4 days
Always Message	**Applies under Hu Ab, IFA, CSF** Neuronal nuclear (Hu) antibody is present in patients with various neurological symptoms including two paraneoplastic

syndromes: sensory neuropathy (PSN) and encephalomyelitis (PEM). The presence of Hu antibody strongly suggests underlying small cell lung carcinoma (SCLC). Hu antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of a SCLC or other malignant tumor.

This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary.

Applies under Yo Ab, IFA, CSF
Purkinje cells cytoplasmic antibody (Yo) can be found in approximately 50% of patients with paraneoplastic cerebellar degeneration (PCD). The presence of Yo antibody strongly suggests underlying gynecological cancer primarily of ovarian or breast origin. A negative assay for Yo antibody does not exclude the possibility of a malignant tumor.

This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.

Applies under Ri Ab Screen, IFA, CSF
Neuronal nuclear (anti Ri) antibody is detected in patients with paraneoplastic syndrome clinically presenting with myoclonus/opsoclonus. The presence of Ri antibody strongly suggests underlying breast carcinoma, or gynecological cancer. Ri antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of breast cancer or other malignant tumor.

This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test**.**

Methodology	**Immunofluorescence Assay**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

CPU Mappings

Result Code	Result Name	
85991307	Hu Ab, IFA, CSF	
85992965	Yo Ab, IFA, CSF	
86007085	Ri Ab Screen, IFA, CSF	
90122-2	Reflex Neuronal Nuclear Antibody, Western Blot, CSF	Reflex
85991309	Hu Ab, Western Blot, CSF	
90122-3	Reflex Neuronal Nuclear Antibody Titer, CSF	Reflex
85991308	Hu Ab Titer, CSF	
90122-5	Reflex Yo Antibody Western Blot, CSF	Reflex
86007478	Yo Ab, Western Blot, CSF	
90122-6	Reflex Yo Antibody Titer, CSF	Reflex
85992966	Yo Ab Titer, CSF	
90122-8	Reflex Ri Ab, Western Blot, CSF	Reflex
86007086	Ri Ab Western Blot, CSF	
90122-9	Reflex Ri Antibody Titer, CSF	Reflex
86007204	Ri Ab Titer, CSF	

Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM)	
Clinical Significance	**MAG, Antibody IgM is useful in detecting antibodies associated with autoimmune peripheral neuropathy.**
Effective Date	**7/20/2012**
Former Test Name	*Sulfate-3-Glucuronyl Paragloboside (SGPG) IgM Autoabs*
Former Test Code	*4046*
Test Code	**37078**
Specimen Requirements	1 **(0.2)** mL Serum
Instructions	Avoid hemolysis. Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: **14 Days** Frozen: **30 Days**
Set-up/Analytic Time	Set up: Tue, Thu; Report available: **2 days**
Reference Range	**MAG-SGPG Ab (IgM), EIA : < OR = 1:1600 titer**
Always Message	This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.
Methodology	Enzyme Immunoassay • **Endpoint Titered**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** 85991239 / MAG-SGPG Ab (IgM), EIA

Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA	
Effective Date	**7/20/2012**
Former Test Name	*Myelin-Associated Glycoprotein (MAG) IgM Autoabs*
Former Test Code	*1926*
Test Code	**37438**
Specimen Requirements	1 **(0.2)** mL Serum
Reject Criteria	Received room temperature
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 48 Hours Refrigerated: 7 Days Frozen: **30 Day**s
Set-up/Analytic Time	Set up: Tue, Fri; Report available: **2 days**
Reference Range	**MAG Ab (IgM), EIA: <1:1600 titer** **Normal: <1:1600** **Moderately Elevated: 1:1600-1:3200** **Highly Elevated: >1:6400**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

CPU Mappings	

Result Code	Result Name
85992164	MAG Ab (IgM), EIA

Ri Antibody Screen w/ Reflex to Titer and Western Blot	
Clinical Significance	**Anti-Ri can be detected in patients with the paraneoplastic opsoclonus/myoclonus syndrome. Neoplasms most often associated with Anti-Ri include breast cancer, gynecological cancers, and small cell lung cancer.**
Effective Date	**7/20/2012**
Former Test Name	*Neuronal Nuclear (Ri)*
Former Test Code	*1196*
Test Code	**10140**
CPT Codes	**86255**
Specimen Requirements	**0.5 (0.2)** mL Serum.
Instructions	Overnight fasting is preferred.
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 Days Refrigerated: 14 Days Frozen: **21 Days**
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Reference Range	See individual assays.
Always Message	Neuronal nuclear (anti Ri) antibody is detected in patients with paraneoplastic syndrome clinically presenting with myoclonus/opsoclonus. The presence of Ri antibody strongly suggests underlying breast carcinoma, or gynecological cancer. Ri antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of breast cancer or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	Result Name	
85994520	Neuronal Nuc Ab (Ri), IFA	
10140-2	Reflex Neuronal Nuclear Antibody, Ri, Western Blot	Reflex
85994522	Ri Ab, Western Blot	
10140-3	Reflex Neuronal Nuclear Antibody, Ri, Titer	Reflex
85994521	Ri Ab Titer	

Ri Antibody Screen with Rflx to Titer and Western Blot, CSF	
Clinical Significance	**Anti-Ri can be detected in patients with the paraneoplastic opsoclonus/myoclonus syndrome. Neoplasms most often associated with Anti-Ri include breast cancer, gynecological cancers, and small cell lung**

	cancer.
Effective Date	**7/20/2012**
Former Test Name	*Neuronal Nuclear (Ri) Autoabs CSF*
Former Test Code	*1196C*
Test Code	**90121**
CPT Codes	**86255**
Specimen Requirements	**0.8 (0.5)** mL CSF.
Reject Criteria	Received room temperature
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated (cold packs)
Specimen Stability	Room temperature: **8 hours** Refrigerated: **7 days** Frozen: **6 months**
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Reference Range	See individual assays.
Always Message	Neuronal nuclear (anti Ri) antibody is detected in patients with paraneoplastic syndrome clinically presenting with myoclonus/opsoclonus. The presence of Ri antibody strongly suggest underlying breast carcinoma, or gynecological cancer. Ri antibody is identified by IFA and confirmed by Western Blot. A negative result does not exclude the possibility of breast cancer or other malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay (IFA)**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	**Result Code** / **Result Name** /
	86007085 / Ri Ab Screen, IFA, CSF /
	90121-2 / Reflex Ri Ab, Western Blot, CSF / Reflex
	86007086 / Ri Ab Western Blot, CSF /
	90121-3 / Reflex Ri Antibody Titer, CSF / Reflex
	86007204 / Ri Ab Titer, CSF /
Additional Information	If Ri Antibody Screen, IFA, CSF is positive, Ri Antibody, WB, CSF will be performed at an additional charge (CPT code: 84181). If Ri Antibody, WB, CSF is positive, Ri Antibody, Titer, CSF will be performed at an additional charge (CPT code: 86256).

Yo Antibody Screen with Reflex to Titer and Western Blot	
Clinical Significance	**Purkinje Cell (Yo) antibody is found in approximately half of the patients with paraneoplastic cerebellar degeneration and is associated with ovarian, uterine, and small cell lung carcinomas and Hodgkin's lymphoma.**
Effective Date	**7/20/2012**
Former Test Name	*Purkinje Cell Cytoplasmic (Yo) Autoabs*

Former Test Code	*1187*
Test Code	**90119**
CPT Codes	**86255**
Specimen Requirements	**0.5 (0.2)** mL Serum
Instructions	Overnight fasting is preferred.
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 Days Refrigerated: 14 Days Frozen: **21 Days**
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Always Message	Purkinje cells cytoplasmic antiboy (Yo) can be found in approximately 50% of patients with paraneoplastic cerebellar degeneration (PCD). The presence of Yo antibody strongly suggests underlying gynecological cancer primarily of ovarian or breast origin. A negative assay for Yo antibody does not exclude the possibility of a malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	Result Name	
85991852	Yo Ab, IFA, Serum	
90119-2	Reflex Yo Antibody Western Blot, Serum	Reflex
86007479	Yo Ab, Western Blot, Serum	
90119-3	Reflex Yo Antibody Titer, Serum	Reflex
85991853	Yo Ab Titer, Serum	

Yo Antibody Screen with Reflex to Titer and Western Blot, CSF	
Clinical Significance	**Purkinje Cell (Yo) antibody is found in approximately half of the patients with paraneoplastic cerebellar degeneration and is associated with ovarian, uterine, and small cell lung carcinomas and Hodgkin's lymphoma.**
Effective Date	**7/20/2012**
Former Test Name	*Purkinje Cell Cytoplasmic (Yo) Autoabs CSF*
Former Test Code	*1187C*
Test Code	**90117**
CPT Codes	**86255**
Specimen Requirements	**0.8 (0.5) mL CSF**
Instructions	Overnight fasting is preferred.
Transport Temperature	Refrigerated
Specimen Stability	**Room temperature: 8 Hours** **Refrigerated: 7 Days**

	Frozen: 6 Months
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 4 days**
Always Message	Purkinje cells cytoplasmic antibody (Yo) can be found in approximately 50% of patients with paraneoplastic cerebellar degeneration (PCD). The presence of Yo antibody strongly suggests underlying gynecological cancer primarily of ovarian or breast origin. A negative assay for Yo antibody does not exclude the possibility of a malignant tumor. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.
Methodology	**Immunofluorescence Assay**
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
CPU Mappings	

Result Code	Result Name	
85992965	Yo Ab, IFA, CSF	
90117-3	Reflex Yo Antibody Western Blot, CSF	Reflex
86007478	Yo Ab, Western Blot, CSF	
90117-2	Reflex Yo Antibody Titer, CSF	Reflex
85992966	Yo Ab Titer, CSF	

Discontinued Tests

Ganglioside Asialo-GM1 Autoabs	
Message	Suggested replacement test code 38836 Ganglioside Asialo-GM-1 Antibody (IgM), EIA and 39462 Ganglioside Asialo-GM-1 Antibody (IgG), EIA
Effective Date	**7/20/2012**
Test Code	**4011**

Ganglioside Autoabs Evaluation	
Message	Suggested replacement test code 90129 Sensory-Motor Neuropathy Antibody Panel (Ganglioside)
Effective Date	**7/20/2012**
Test Code	**4056**

Ganglioside GD1a Autoabs	
Message	Suggested replacement test code 38916 Ganglioside GD1a Antibody (IgG), EIA and 38964 Ganglioside GD1a Antibody (IgM), EIA
Effective Date	**7/20/2012**
Test Code	**4006**

Ganglioside GD1b Autoabs	
Message	Suggested replacement test codes 39461 Ganglioside GD1b Antibody (IgG), EIA and 37439 Ganglioside GD1b Antibody (IgM), EIA

Effective Date	**7/20/2012**
Test Code	**4041**

Ganglioside GM1 Triple Evaluation	
Message	Suggested replacement test code 37093 Ganglioside GM-1 Antibodies (IgG and IgM), EIA; 37439 Ganglioside GD1b Antibody (IgM), EIA; 39462 Ganglioside Asialo-GM-1 Antibody (IgG), EIA; 39461 Ganglioside GD1b Antibody (IgG), EIA; and 38836 Ganglioside Asialo-GM-1 Antibody (IgM), EIA
Effective Date	**7/20/2012**
Test Code	**4058**

Ganglioside GM2 Autoabs	
Message	Test discontinued due to low volume. There is no replacement available.
Effective Date	**7/20/2012**
Test Code	**4012**

MAG & SGPG IgM Autoabs	
Message	Suggested replacement test codes 37438 Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA and 37078 Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM)
Effective Date	**7/20/2012**
Test Code	**4051**

Motor & Sensory Neuropathy Evaluation	
Message	Suggested replacement test codes 10269 Protein Electrophoresis, Serum with Total Protein and Reflex to IFE, Serum; 37053 Hu Antibody Screen with Reflex to Titer and Western Blot; 37438 Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA; and 90129 Sensory-Motor Neuropathy Antibody Panel (Ganglioside)
Effective Date	**7/20/2012**
Test Code	**4021**

Motor Neuropathy Evaluation	
Message	Suggested replacement test codes 10269 Protein Electrophoresis, Serum with Total Protein and Reflex to IFE, Serum; 90129 Sensory-Motor Neuropathy Antibody Panel (Ganglioside); 37078 Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM); and 37438 Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA
Effective Date	**7/20/2012**
Test Code	**4026**

Sensory Neuropathy Evaluation	
Message	Suggested replacement test codes 10269 Protein Electrophoresis, Serum with Total Protein and Reflex to IFE, Serum; 37438 Myelin-Associated Glycoprotein (MAG) Antibody (IgM), EIA; 37078 Myelin Associated Glycoprotein (MAG)-SGPG Antibody (IgM); and 37053 Hu Antibody Screen with Reflex to Titer and Western Blot;
Effective Date	**7/20/2012**
Test Code	**4031**