

# **Test Update 705**

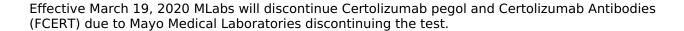
Posted Date 02/27/2020 Effective Date 03/19/2020 Update Type <u>Test Discontinued</u> CPT Code 80299, 83520

### **TEST OBSOLETE**

**Certolizumab pegol and Certolizumab Antibodies** 

**Order Code:** FCERT **CPT Code:** 80299, 83520

**Referral Laboratory:** Mayo Medical Laboratories



#### **Recommended Test**

Certolizumab pegol and Anti-Certolizumab Antibodies, DoseASSURE CTZ

Order Code: FCZAC

**Referral Laboratory:** Mayo Medical Laboratories

Collection Instructions: Collect approximately 5mL of whole blood in a red top or serum separator tube (SST). Spin and aliquot approximately 3 mL of serum into a plastic vial and freeze.

Methodology: Electrochemiluminescence immunoassay (ECLIA); Surface Plasmon Resonance

### Reference Ranges:

Certolizumab: Quantitation Limit: <1.0 ug/mL Results of 1ug/mL or higher indicate detection of Certolizumab.

Anti-Certolizumab Antibody: Quantitation Limit: <40 ng/mL Results of 40 ng/mL or higher indicate detection of Anti-Certolizumab pegol antibodies.

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