

## Schistosoma IgG in Human Serum

<b>Specimen Type</b>	Human Serum
<b>Specimen Volume</b>	1 mL
<b>Collection</b>	Collect in SST/Red Top tube. Separate serum from cells within 2 hours. Aliquot 0.5 mL of serum into an appropriate tube. Freeze the samples at -20°C.
<b>Minimum Volume</b>	0.5 mL
<b>Handling</b>	Ship frozen on dry ice.
<b>Rejection Criteria</b>	Highly lipemic or contaminated sera. Highly turbid and icteric sera. Heat inactivated sera. Samples submitted outside of validated stability. Samples submitted without two unique identifiers and date of collection.
<b>Stability</b>	4°C up to 2 weeks -20°C up to 4 weeks
<b>Methodology</b>	Qualitative ELISA
<b>Reference Range</b>	<0.2 OD
<b>Turnaround Time</b>	Up to 7 business days.
<b>CPT Code</b>	86682
<b>Clinical Significance</b>	Schistosomiasis (bilharziasis) is an endemic tropical parasitic disease prevalent in sub-Saharan Africa, south America and the Far East. In developed countries Schistosomiasis is seen in travelers returning from endemic areas. The disease causes substantial morbidity and mortality.
<b>Principle</b>	“Schistosoma IgG in Human Serum” is an ELISA method. Patient samples are incubated in dedicated microwells coated with the antigen. After incubation the wells are washed to remove unbound material. The next incubation allows for binding of the enzyme complex to the antibody-antigen complex. After additional washing step the substrate is added. Blue color develops when the peroxide in the substrate comes in contact with the enzyme complex (if the sample is positive). Stop solution is used to stop the reaction and turn the blue color to yellow.