

TEST UPDATE

RAST Hypersensitivity Pneumonitis Panel, Immunoglobulin G, Serum UVMHC

Effective 4/23/26, RAST Hypersensitivity Pneumonitis Panel, Immunoglobulin G, S. (Mayo BHYP5) will replace Hypersensitivity Pneumonitis Panel (Mayo FHSP5), performed at Eurofins Viracor Clinical Diagnostics. This change is due to the availability of testing performed onsite at Mayo Clinic Laboratories.

Note: This testing is **not** approved for NY State. Its use will be restricted to Vermont.

Test Build Information:

New Orderable	Epic Code	Atlas Code	Mayo Test ID	Order LOINC	CPT Code(s)
RAST Hypersensitivity Pneumonitis Panel, Immunoglobulin G, S.	LAB17913	LAB17913	BHYP5	N/A	86001x8
Result Component(s):	Epic Code	Atlas Code	Mayo Test ID	Result LOINC	Notes
Alternaria alternata, IgG Ab	12301021477	MBH01	BH01	N/A	
Aspergillus fumigatus, IgG Ab	12301021478	MBH02	BH02	N/A	
Aureobasidium pullulans, IgG Ab	12301021479	MBH03	BH03	N/A	
Laceyella sacchari, IgG Ab	12301021480	MBH04	BH04	N/A	
Micropolyspora faeni, IgG Ab	12301021481	MBH05	BH05	N/A	
Penicillium chrysogenum, IgG Ab	12301021482	MBH06	BH06	N/A	
Phoma betae, IgG Ab	12301021483	MBH07	BH07	N/A	
Trichoderma viride, IgG Ab	12301021484	MBH08	BH08	N/A	
Hypersensitivity Interpretation	12301021485	MBH09	BH09	N/A	
Specimen Requirements:					
Container	Specimen	Temperature	Collect Vol	Submit Vol	Stability
SST	Serum	Refrigerated	1 mL	0.5 mL	28 days
Collection Information:					
Min Vol = 0.5 mL					
Red Top tube is acceptable.					
Frozen is acceptable. Frozen = 28 days					
CMS Policy for CPT Code 86001					
Local Coverage Determination (LCD) - L33591 RAST Type Tests					
NY State Approved?					
This test is not approved for NY State.					

Orderable to be Discontinued	Epic Code	Atlas Code	Mayo Test ID	Order LOINC	CPT Code(s)
Hypersensitivity Pneumonitis Panel	LAB17824	LAB17824	FHSP5	N/A	86001x8

For questions regarding this change, contact UVMHC Lab Outreach at laboutreach@uvmhealth.org.

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