TEST: **RUBELLA IgG ANTIBODY**

**PRINCIPLE:**
Rubella (German or “3 day” measles) is a mild, contagious rash primarily of children and young adults. Acute rubella virus infection in a child or adult is usually a self-limited, benign disease, characterized by low-grade fever, mild upper respiratory symptoms, an erythematous maculopapular rash and suboccipital lymphadenopathy. However, rubella can by a very serious disease early in pregnancy, leading to miscarriages, stillbirths or birth defects.

This test is to aid in the assessment of the patient’s immunological response to rubella and in the determination of the immune status of the individual, including females. The presence of IgM antibody or a significant rise in IgG for acute and convalescent specimens is evidence of acute rubella infection. The acute phase specimen should be drawn as soon after rash onset as possible; the convalescent-phase serum should be drawn 10 or more days after acute-phase specimen.

**SPECIMEN REQUIREMENTS:**
2ml serum collected in a red top tube with no additive or in a serum separator tube (gel barrier). Serum should be separated from the clot as soon as possible to avoid hemolysis. Store/transport sample at room temperature (15-30°C) for no longer than 8 hours or at 2-8°C for up 48 hours. If testing is further delayed, sera should be frozen at -20°C or lower. Avoid repeat freeze-thaw cycles.

**METHOD:** Enhanced Chemiluminescence

**REFERENCES:**

**NORMAL RANGE:**
Clinical Interpretation of immune status:
Negative for Rubella IgG: < 10 IU/mL
Equivocal for Rubella IgG: 10.0 to <15 IU/mL
Positive for Rubella IgG: >= 15.0 IU/mL

**Turnaround time:** One Week