



Technical Bulletin

To: DLS Clients, QMC Physicians and Nursing Staff

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Medical Director

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Subject: RPR screen with reflex to titer and the discontinuation of VDRL on serum specimens

A standard nontreponemal (e.g. RPR or VDRL) positive test screen should have a titer performed reflexively by the laboratory to optimally guide patient management decisions. “Nontreponemal test antibody titers may correlate with disease activity, and results should be reported quantitatively. A fourfold change in titer, equivalent to a change of two dilutions (e.g., from 1:16 to 1:4 or from 1:8 to 1:32), is considered necessary to demonstrate a clinically significant difference between two nontreponemal test results that were obtained using the same serologic test.” However, a specific test for syphilis should be performed to confirm the screening test (e.g. FTA-ABS or equivalent*). Nontreponemal test titers usually decline after treatment and might become nonreactive with time (i.e. 2 to 3 years, but the time period is dependent upon the patient and the stage of disease).

*False positive results may occur with the nontreponemal tests as a result of other conditions, such as systemic lupus erythematosus, leprosy, brucellosis, atypical pneumonia, typhus, yaws, pinta, or pregnancy.

Effective January 20, 2014, Diagnostic Laboratory Services (DLS) will perform RPR test screens with a reflex to titer and discontinue VDRL testing on serum specimens. VDRL testing will only be performed on CSF specimens.

References

Workowski KA, Berman S, Centers for Disease C, Prevention. 2010. Sexually transmitted diseases treatment guidelines, 2010. MMWR Recomm Rep **59**:1-110.

Please refer any questions to the following individuals:

DLS Client Services at 589-5101, Dr. Matthew Bankowski at 589-5242 or Dr. Wesley Kim at 589-5131

| Test Description | Order Code | Specimen Requirement | Specimen Rejection | CPT |
|---------------------------------|-------------|----------------------|---|---|
| RPR Screen with Reflex to Titer | 695R | Serum | Hemolyzed, icteric, lipemic, contaminated, specimen older than stability limits | RPR Screen (86592) RPR Titer (86593) |