

## Client Notification

**Date:** June 28, 2022

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**Effective Date of Change:** September 9, 2022

**Subject:** Method changes for Hepatitis and HIV testing.

The Abbott Architect instrument (CMIA method) will no longer be used. We will begin using the DiaSorin Liaison instrument (CLIA method) to analyze the following tests:

- Hepatitis C Antibody
- Hepatitis B Surface Antigen
- Hepatitis B Surface Antigen Confirmation
- Hepatitis B Surface Antibody
- HIV Ag/Ab Combo

Result reporting will change only for the Hepatitis B Surface Antibody test with the following details:

<b>Previous result interpretation for Hepatitis B Surface Antibody (Abbott Architect)</b>	<b>New result interpretation for Hepatitis B Surface Antibody (DiaSorin Liaison)</b>
A Reactive Test Result ( $\geq 12.00$ mIU/mL) indicates immunity to HBV infection.	A positive test result ( $\geq 10.00$ mIU/mL) indicates recovery from acute or chronic hepatitis B virus infection or acquired immunity from HBV vaccination. This assay does not differentiate between a vaccine-induced immune response and an immune response induced by infection with HBV.
An Equivocal Test Result ( $\geq 8.00$ mIU/mL to $< 12.00$ mIU/mL) indicates that immune status should be further assessed with follow-up testing.	An equivocal test result ( $\geq 9.00$ mIU/mL to $< 11.00$ mIU/mL) indicates that immune status should be further assessed with follow-up testing.
A Non-Reactive Test Result ( $< 8.00$ mIU/mL) indicates that the individual is not immune to HBV infection. See CDC guidelines for further references.	A negative test result ( $< 10.00$ mIU/mL) indicates a lack of recovery from acute or chronic hepatitis B or inadequate immune response to HBV vaccination.

Thank you and please contact The State Hygienic Laboratory Serology Section if needed,

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