

- Infections

Infectious diseases are disorders caused by organisms; such as bacteria, viruses, fungi or parasites. Many organisms live in and on our bodies. They're normally harmless or even helpful, but some organisms ... [See more](#)

Bacterial Infections

Bacteria are living things that have only one cell. Most bacteria won't hurt you and less than one percent of the different types make people sick. Many bacteria are helpful. By example they help to ... [See more](#)

+ SEROTYPE 1 (1)	0.6	Range: See Comments
+ SEROTYPE 3 (3)	<0.3	Range: See Comments
+ SEROTYPE 4 (4)	<0.3	Range: See Comments
+ SEROTYPE 5 (5)	0.3	Range: See Comments
+ SEROTYPE 8 (8)	<0.3	Range: See Comments
+ SEROTYPE 9 (9N)	<0.3	Range: See Comments
+ SEROTYPE 12 (12F)	<0.3	Range: See Comments
+ SEROTYPE 14 (14)	2.0	Range: See Comments
+ SEROTYPE 19 (19F)	1.9	Range: See Comments
+ SEROTYPE 23 (23...)	<0.3	Range: See Comments
+ SEROTYPE 26 (6B)	0.9	Range: See Comments
+ SEROTYPE 51 (7F)	0.5	Range: See Comments
+ SEROTYPE 56 (18...)	0.3	Range: See Comments
- SEROTYPE 68 (9V)	<0.3	Range: See Comments

SEROTYPE 68 (9V)

Result Comments

Serologic correlates of protection against pneumococcal disease have not been rigorously established for all patient populations. Published data and expert consensus (including WHO) suggest protection from invasive disease usually occurs at levels $\geq 0.3-0.50$ mcg/mL for healthy children receiving pneumococcal conjugate vaccines. Higher titers may be necessary to protect from non-invasive infection (e.g., pneumonia, otitis, sinusitis). Expert opinion suggests that a cut-off of ≥ 1.3 mcg/mL may be a more relevant value to assess antibody responses after pneumococcal polysaccharide vaccines or for immunocompromised patients. In addition to antibody quantity, protection also depends on antibody avidity and opsonophagocytic activity. Some experts consider that post-vaccination (4-6 weeks) IgG seroconversion and/or 2- to 4-fold rise in IgG titers for $>50\%$ to 70% of vaccine serotypes demonstrates a normal post-vaccine serologic response. Persons with high initial serotype-specific titers may have less robust responses.

Quest Diagnostics uses a multi-analyte immunodetection (MAID) method. The method employs the Luminex flow cytometric system which measures multiple analytes simultaneously. The FDA standard reference serum 89-S is used as the calibration standard. Results are reported in mcg/mL.

This assay detects 11 of the 13 serotypes in the 13-valent conjugate vaccine, and 14 of the 23 serotypes in the 23-valent polysaccharide vaccine.

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

For additional information, please refer to <http://education.questdiagnostics.com/faq/FAQ181> (This link is being provided for informational/educational purposes only.)