

Lambert-Eaton Myasthenic Syndrome (LEMS) Panel

Order Name: **LAMB EATON**
Test Number: **5503127**
Revision Date: **03/10/2026**

TEST NAME	METHODOLOGY	LOINC CODE
Lambert-Eaton Myasthenic Syndrome (LEMS) Panel		

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	4 mL (2 mL)	Serum	Clot Activator (Red Top, No-Gel)	Refrigerated
Instructions	Separate serum from cells ASAP or within 2 hours of collection.			

GENERAL INFORMATION	
Testing Schedule	Assay Dependant
Expected TAT	Assay Dependant
Notes	See individual panel components for more information for those tests. 3805400 - Striated Muscle Antibody Screen with Titer 5502375 - Voltage-Gated Calcium Channel (VGCC) Antibody Assay 5500010 - Acetylcholine Receptor Binding Antibody 5516500 - Acetylcholine Receptor Modulating Antibody
CPT Code(s)	83519x3, 86255
Lab Section	Reference Lab