



# Anti-Streptolysin O Titre

<b>Synonyms</b>	ASO, ASOT
<b>Clinical Indication</b>	<p>Possible streptococcal infection. Acute rheumatic fever, acute glomerulonephritis.</p> <p>Please give detailed clinical information, including date of onset/contact with the suspected infection and details of any current, or intended, antibiotic therapy.</p>
<b>Part of Profile / See Also</b>	
<b>Request Form</b>	<a href="#">ICE order comms form (Handwritten request – only if order comms not available).</a>
<b>Availability / Frequency of Analysis</b>	On request during normal working hours
<b>Turnaround Time</b>	Analysis performed weekly, usually on Thursday.
<b>Patient Preparation</b>	
<b>Sample Requirements</b>	
<b>Specimen Type</b>	Serum (Plasma <b>cannot</b> be used)
<b>Volume</b>	5 ml
<b>Container</b>	 Yellow Top (SST) tube  Paediatric Yellow Top (SST) tube
	<b>Samples should be transported to laboratory on the day of collection</b>
<b>Reference Range &amp; Units</b>	Antibody levels of less than or equal to 200 IU/ml are regarded as normal
<b>Interferences</b>	Grossly haemolysed, contaminated or highly lipaemic samples
<b>Interpretation &amp; Clinical Decision Value (if applicable)</b>	Following acute streptococcal infection, the ASO titre will usually rise after one week, increasing to a maximum level within 3 to 5 weeks and usually returning to preinfection levels in approximately 6 to 12 months.
<b>References</b>	
<b>Test code</b>	ASO
<b>Lab Handling</b>	Samples stored for 3 months