

## Technical Update • January 2022

Cleveland Clinic Laboratories is dedicated to keeping you updated and informed about recent testing changes. This Technical Update is provided on a monthly basis to notify you of any changes to the tests in our catalog.

Recently changed tests are bolded, and they could include revisions to methodology, reference range, days performed, or CPT code. Deleted tests and new tests are listed separately. For your convenience, tests are listed alphabetically and order codes are provided.

To compare the new information with previous test information, refer to the online Test Directory at [clevelandcliniclabs.com](http://clevelandcliniclabs.com). Test information is updated in the online Test Directory on the Effective Date stated in the Technical Update. Please update your database as necessary.

For additional detail, contact Client Services at 216.444.5755 or 800.628.6816, or via email at [clientservices@ccf.org](mailto:clientservices@ccf.org).

Test Update Page #	Summary of Changes by Test Name	Order Code	Name Change	New Test	Test Discontinued	Special Information	Specimen Requirement	Component Change(s)	Methodology	Reference Range	Days Performed/Reported	Stability	CPT	Fee
14	Aldosterone Suppression													
4	Allergen, Rice IgG													
4	Bone marrow Cancer Chromosome Microarray + SNP													
14	C-Peptide Suppression													
14	Calpain 3 DNA Sequencing Test													
14	Carnitine Palmitoyl Transferase II Deficiency													
4	Chromosome Analysis, Amniotic Fluid													
4	Chromosome Analysis, Blood													
4	Chromosome Analysis, Bone Marrow													
4	Chromosome Analysis, Chorionic Villus													
4	Chromosome Analysis, Leukemic Blood													
4	Chromosome Analysis, Solid Tumor													
4	CMV, qualitative by PCR, non-blood (CSF, bone marrow, amniotic fluid, ocular fluid)													
4	Cocaine & Benzoylcegonine, Quant													
4	Coenzyme Q10, Leukocytes													
5	Complete Blood Count and Differential													
12	Creatinine-Cystatin C eGFR													
5	Cystatin C													
14	Cystatin C with Estimated GFR													

Test Update  
Page #

Summary of Changes  
by Test Name

Order Code	Name Change	New Test	Test Discontinued	Special Information	Specimen Requirement	Component Change(s)	Methodology	Days Performed/Reported	Reference Range	Stability	CPT	Fee
5	Date Rape Panel											
5	FISH for ALK (2p23) FFPET NSCLC											
5	FISH FOR ALK (2P23) THINPREP NSCLC											
5	FISH for Angiosarcoma MYC Amplification											
5	FISH FOR BIRC3/MALT1 TRANSLOCATION											
6	FISH for Bladder Cancer											
6	FISH for DDIT3 (12q13)											
6	FISH for Ewings Sarcoma											
6	FISH for FOXO1A gene (13q14)(FKHR)											
6	FISH for FUS gene (16p11)											
6	FISH for HER-2											
6	FISH for IGH/MYC/CEP8 Tissue											
6	FISH for MDM2											
6	FISH for MYC (8q24) Tissue											
6	FISH for RET (10q11)											
6	FISH for RET Cyto Block											
6	FISH for ROS1 (6q22)											
6	FISH for ROS1 Cyto Block											
6	FISH for SRY											
6	FISH for SYT gene (18q11)											
14	FISH for WWTR1/CAMTA1											
6	FISH for XIST											
6	FISH for XY											
6	FISH Insight Analysis, Amniotic Fluid											
14	Flow Cytometry Hold Sample											
6	Gamma-Hydroxybutyric Acid, Urine											
7	Gastric Occult Blood											
14	GFR, Estimated											
14	Glucose Transporter Deficiency SLC2A1											
7	Glutathione Total											
12	Group B Strep Culture Screen											
7	Heavy Metals Screen, Whole Blood											
7	Heavy Metals with Cadmium, Whole Blood											
13	Helicobacter pylori Ab, IgG											
13	Helicobacter pylori Antibodies, IgG and IgA											
14	HIV PhenoSense GT											
14	HIV Phenotype											
7	HIV Quant RNA by PCR											
14	Interleukin-6											
14	Lipid Associated Sialic Acid											

Test Update Page #	Summary of Changes by Test Name	Order Code	Name Change	New Test	Special Information	Specimen Requirement	Component Change(s)	Methodology	Days Performed/Reported	Reference Range	Stability	CPT	Fee
7	Maternal Cell Contamination												
7	Mephedrone, MDPV and Methylone Urine												
14	Mitochondrial DNA/nuclear DNA ratio												
7-8	Mitotane												
8	Mycobacterium tuberculosis by QuantiFERON TB Gold Plus												
8	Mycobacterium tuberculosis by QuantiFERON TB Gold Plus, Incubated												
14	Peripheral Blood Low Grade Leuk Markers												
9	Phenobarbital, Free												
9, 13	Platelet Function Screen												
9	PNH Panel by FCM												
14	POLG2 Sequencing												
9	Procalcitonin												
10, 13	Prothrombin Time and PTT Elevation Diagnostic Panel												
10, 13	Prothrombin Time Elevation Diagnostic Panel												
14	Rheumatoid Factor IgM Autoantibodies												
14	Routine Flu A/B by PCR												
14	Routine RSV by PCR												
10	Sequential Screen, First Trimester												
10	Sequential Screen, Second Trimester												
10	T cell V-Beta by Flow Cytometry												
11	Th/To Antibody												
11	Urinalysis Only												
11	Urinalysis with Microscopic												
13	Urinalysis with Reflex to Microscopic												
11	Urine Free Cortisol by LC-MS/MS												
13	Vitamin D, 1,25-Dihydroxy												

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Allergen, Rice IgG	RICIGG	<b>Specimen Requirement:</b> 1 mL serum from Serum Separator (Gold) tube; <b>Minimum 0.3 mL</b> ; Refrigerated; Transfer serum to a standard plastic aliquot tube. <b>*OR* 1 mL serum from No additive (Red) tube; Minimum 0.3 mL</b> ; Refrigerated; Transfer serum to a standard plastic aliquot tube.	effective immediately
Bone marrow Cancer Chromosome Microarray + SNP	BMHNSP	<b>Reported:</b> 8–16 days	effective immediately
Chromosome Analysis, Amniotic Fluid	FAMCYT	<b>Reported:</b> 10–14 days	2/26/22
Chromosome Analysis, Blood	CHRBLD	<b>Specimen Requirement:</b> 4 mL whole blood in Sodium heparin (Green) tube; Ambient; Transport may also be refrigerated. Deliver specimen to lab immediately after collection. If aliquoting is necessary, sterile aliquot tubes must be used. <b>*OR* 4 mL whole blood in EDTA (Lavender) tube; Ambient; EDTA is acceptable but Sodium Heparin is the preferred tube type. Transport may also be refrigerated. Deliver specimen to lab immediately after collection. If aliquoting is necessary, sterile aliquot tubes must be used.</b> <b>Reported:</b> 8–12 days	effective immediately
Chromosome Analysis, Bone Marrow	CHRBMH	<b>Specimen Requirement:</b> 2–3 mL bone marrow in Sodium heparin (Green) tube; Ambient; May also be transported refrigerated. If aliquoting is necessary, sterile aliquot tubes must be used. <b>*OR* 2–3 mL bone marrow in EDTA (Lavender) tube; Ambient; May also be transported refrigerated. If aliquoting is necessary, sterile aliquot tubes must be used.</b>	effective immediately
Chromosome Analysis, Chorionic Villus	CVCYTO	<b>Specimen Requirement:</b> 25 mg Chorionic Villus in RPMI media; <b>Minimum 5 mg</b> ; Ambient; Do NOT freeze or place in fixative. Deliver specimen to Cleveland Clinic Laboratories on the day of collection. <b>Reported:</b> 7–11 days	2/26/22
Chromosome Analysis, Leukemic Blood	CHRBLL	<b>Specimen Requirement:</b> 4 mL whole blood in Sodium heparin (Green) tube; Ambient; May also be transported refrigerated. Deliver to labs within 24 hours of collection. If aliquoting is necessary, sterile aliquot tubes must be used. <b>*OR* 4 mL whole blood in EDTA (Lavender) tube; Ambient; May also be transported refrigerated. Deliver to labs within 24 hours of collection. If aliquoting is necessary, sterile aliquot tubes must be used.</b>	effective immediately
Chromosome Analysis, Solid Tumor	CHRSOL	<b>Reported:</b> 10–12 days	effective immediately
CMV, qualitative by PCR, non-blood (CSF, bone marrow, amniotic fluid, ocular fluid)	CMVCSF	<b>Test Name:</b> Previously CMV by PCR, non-blood specimens	2/26/22
Cocaine & Benzoylcegonine, Quant	COCAIN	<b>Clinical Information:</b> Lower reporting limit = 10 ng/mL. Upper reporting limit = 1500 ng/mL. <b>Specimen Requirement:</b> 5 mL plasma in Potassium oxalate/sodium fluoride (Gray) tube; Refrigerated; Draw two tubes to ensure adequate plasma volume. Separate plasma from cells ASAP or within 2 hours of collection and transfer into standard aliquot tube. <b>Stability:</b> Ambient: <b>Unacceptable after separation from cells</b> Refrigerated: 2 weeks <b>after separation from cells</b> Frozen: 1 month <b>after separation from cells</b> <b>Days Performed:</b> Varies <b>Reported:</b> 8–11 days	2/26/22
Coenzyme Q10, Leukocytes	LEUK10	<b>Stability:</b> Ambient: 5 days Refrigerated: <b>5 days</b> Frozen: Unacceptable <b>Reported:</b> 11–15 days	2/26/22

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Complete Blood Count and Differential	CBCDIF	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Reference Range:</b></p> <p><b>Immature Gran Abs (IGAB):</b>            0–1 Days: &lt;0.29 K/uL            2–13 Days: &lt;0.28 K/uL            14–30 Days: &lt;0.23 K/uL            31–90 Days: &lt;0.10 K/uL            91–179 Days: &lt;0.07 K/uL            0.5–1 Years: &lt;0.15 K/uL            2–5 Years: &lt;0.07 K/uL            6–11 Years: &lt;0.05 K/uL            12–17 Years: &lt;0.04 K/uL            18–999 Years: &lt;0.10 K/uL</p> <p><b>Immature Gran % (IG):</b>  <b>Refer to Absolute Value</b>            Note: Only new reference ranges are listed</p>	2/26/22
Cystatin C	CYSTC	<p><b>Clinical Limitation:</b> Cystatin C levels are sensitive to changes in thyroid function and should not be used without knowledge of the patient's thyroid status.</p> <p><b>Clinical Information:</b> Evaluation of renal function. <b>eGFR Calculation: Adults: 2012 CKD-EPI cystatin C equation Pediatric (2-17 yrs): 2012 Schwartz cystatin C equation</b> Cystatin C is produced by all nucleated cells at a constant rate and the production rate in humans is remarkably constant over the entire lifetime. Elimination from the circulation is almost entirely via glomerular filtration. Cystatin C based eGFR calculation may be clinically useful in certain scenarios where creatinine-based eGFR may be misleading (e.g. muscle wasting).</p> <p><b>Specimen Requirement: 1 mL plasma from Lithium Heparin Plasma Separator (Light Green) tube; Minimum 0.4 mL; Centrifuge and refrigerate.</b></p> <p><b>*OR* 1 mL serum from Serum Separator (Gold) tube; Minimum 0.4 mL; Centrifuge and refrigerate.</b></p> <p><b>Stability:</b>            Ambient: 7 days            Refrigerated: <b>7 days</b>            Frozen: 6 months</p> <p><b>Reference Range:</b>            0–17 Years: Reference interval not established. Refer to eGFR.            18–99 Years: 0.61–0.95 mg/L</p> <p><b>Days Performed: Mon–Sun 24 hours</b></p> <p><b>Reported: 24 hours</b></p>	2/26/22
Date Rape Panel	UDRPAN	<p><b>Special Information: Positive screening results will automatically reflex quantitative confirmation with an additional charge.</b></p> <p><b>Clinical Information:</b> Screening Thresholds: Ethyl alcohol: 0.020 gm/dL; Barbiturate: 300 ng/mL; Benzodiazepines: 100 ng/mL; Flunitrazepam: 100 ng/mL; <b>Ketamine: 100 ng/mL; GHB: 10.0 ug/mL.</b></p> <p><b>Stability:</b>            Ambient: 2 days            Refrigerated: 2 weeks            Frozen: 6 months</p> <p><b>Methodology: Enzymatic</b></p> <p><b>Days Performed: Varies</b></p>	2/26/22
FISH for ALK (2p23) FFPET NSCLC	FSHLNG	<b>Reported: 5 days</b>	effective immediately
FISH FOR ALK (2P23) THINPREP NSCLC	FSHTPA	<b>Reported: 5 days</b>	effective immediately
FISH for Angiosarcoma MYC Amplification	MYCAMP	<b>Reported: 5 days</b>	effective immediately
FISH FOR BIRC3/MALT1 TRANSLOCATION	T1118	<b>Reported: 5 days</b>	effective immediately

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
FISH for Bladder Cancer	UROFSH	<b>Reported: 10 days</b>	effective immediately
FISH for DDIT3 (12q13)	CHOP	<b>Reported: 5 days</b>	effective immediately
FISH for Ewings Sarcoma	EWSR	<b>Reported: 5 days</b>	effective immediately
FISH for FOXO1A gene (13q14)(FKHR)	FKHR	<b>Reported: 5 days</b>	effective immediately
FISH for FUS gene (16p11)	FUS	<b>Reported: 5 days</b>	effective immediately
FISH for HER-2	HER2F	<b>Reported: 5 days</b>	effective immediately
FISH for IGH/MYC/CEP8 Tissue	T814	<b>Reported: 5 days</b>	effective immediately
FISH for MDM2	MDM2	<b>Reported: 5 days</b>	effective immediately
FISH for MYC (8q24) Tissue	MYC	<b>Reported: 5 days</b>	effective immediately
FISH for RET (10q11)	RET	<b>Reported: 5 days</b>	effective immediately
FISH for RET Cyto Block	RETCB	<b>Reported: 5 days</b>	effective immediately
FISH for ROS1 (6q22)	ROS1	<b>Reported: 5 days</b>	effective immediately
FISH for ROS1 Cyto Block	ROS1CB	<b>Reported: 5 days</b>	effective immediately
FISH for SRY	SRYFSH	<b>Reported: 5 days</b>	effective immediately
FISH for SYT gene (18q11)	SYT	<b>Reported: 5 days</b>	effective immediately
FISH for XIST	XSTFSH	<b>Reported: 5 days</b>	effective immediately
FISH for XY	XYFSH	<b>Reported: 5 days</b>	effective immediately
FISH Insight Analysis, Amniotic Fluid	ISIGHT	<b>Test Name:</b> Previously FISH Insight Analysis <b>Specimen Requirement:</b> 5 mL amniotic fluid in Sterile container; <b>Minimum 3 mL; Ambient;</b> Do not centrifuge. <b>Note: Whole blood is no longer acceptable.</b> <b>Reported: 3–4 days</b>	2/26/22
Gamma-Hydroxybutyric Acid, Urine	GHBURN	<b>Special Information:</b> Positive screening results will automatically reflex quantitative confirmation with an additional charge. <b>Clinical Information:</b> Screening threshold: 10.0 ug/mL. This test is used to detect the presence of gamma hydroxybutyric acid (GHB), a central nervous system depressant. <b>Specimen Requirement:</b> 10 mL urine, random in Clean container; Minimum 1.2 mL; Refrigerated <b>Methodology:</b> Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS) <b>Days Performed:</b> Varies <b>Reported: 8–11 days</b>	2/26/22

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Gastric Occult Blood	FGSTRO	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b> Gastric Occult Blood (FGSOCC)</p> <p><b>Note: Gastric pH (FGSTPH) has been removed</b></p> <p><b>CPT: 82271 Note: 83986 has been removed</b></p>	effective immediately
Glutathione Total	GLUTAT	<p><b>Specimen Requirement:</b> 0.5 mL blood in ACD A or B (Yellow) tube; Ambient; <b>Allow ACD tubes to fill completely; gently invert 8-10 times (do not shake).</b></p>	effective immediately
Heavy Metals Screen, Whole Blood	HEVMET	<p><b>Reference Range:</b> Arsenic, Blood (ASB): 0.0–12.0 ug/L Lead (LEAD3): <b>0–5 Years: 0.0–3.4 ug/dL</b> 6–99 Years: 0.0–4.9 ug/dL Mercury, Blood (MERC2): 0.0–10.0 ug/L</p>	effective immediately
Heavy Metals with Cadmium, Whole Blood	HEVMT4	<p><b>Reference Range:</b> Arsenic, Blood (ASB): 0.0–12.0 ug/L Cadmium, Blood (CADMB): 0.0–5.0 ug/L Lead (LEAD3): <b>0–5 Years: 0.0–3.4 ug/dL</b> 6–99 Years: 0.0–4.9 ug/dL Mercury, Blood (MERC2): 0.0–10.0 ug/L</p>	effective immediately
HIV Quant RNA by PCR	HIVRNA	<p><b>Specimen Requirement:</b> 3 mL plasma from EDTA Plasma Preparation (White) tube; Minimum 3 mL; Refrigerated; Centrifuge within 24 hours of collection. Sample must be aliquoted first if sample is to be frozen. <b>Sample can only be shared with CMVQNT, HCQPCR, HIVRNA, HBVDNU, EBVQNT, or BKQUAN.</b></p> <p>*OR* 3 mL plasma from EDTA (Lavender) tube; Minimum 3 mL; Refrigerated; Centrifuge within 24 hours of collection. Sample must be aliquoted first if sample is to be frozen. <b>Sample can only be shared with CMVQNT, HCQPCR, HIVRNA, HBVDNU, EBVQNT, or BKQUAN.</b></p>	1/6/22
Maternal Cell Contamination	MATRNL	<p><b>Test Name:</b> Previously Maternal Cell Contamination, Integrated Genetics</p> <p><b>Special Information:</b> This test is only available in combination with <b>LabCorp</b> Integrated Genetics prenatal genetic testing. A maternal sample is required for maternal cell contamination testing in conjunction with all Integrated Genetics prenatal molecular testing. Causes for rejection: Frozen specimen, hemolysis, quantity not sufficient for analysis, improper container, unlabeled or mislabeled specimen</p> <p><b>Specimen Requirement:</b> 7 mL whole blood in ACD A (Yellow) tube; <b>Minimum 3 mL</b>; Ambient;</p> <p>*OR* 7 mL whole blood in EDTA (Lavender) tube; <b>Minimum 3 mL</b>; Ambient</p> <p><b>Reported: 13–22 days</b></p>	2/26/22
Mephedrone, MDPV and Methylone Urine	MX3U	<p><b>Stability:</b> Ambient: 2 days Refrigerated: 2 weeks Frozen: 6 months</p> <p><b>Days Performed: Varies</b></p> <p><b>Reported: 6–11 days</b></p>	2/26/22
Mitotane	MTANE	<p><b>Special Information: Gel-barrier tubes will be rejected.</b></p> <p><b>Clinical Information: This test is useful for therapeutic drug management. Usual therapeutic doses produce mitotane serum concentrations 100ug/mL. Therapeutic and toxic ranges have not been established. Trough levels are the most reproducible.</b></p> <p><i>(continued on page 8)</i></p>	2/26/22

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Mitotane <i>(continued from page 7)</i>		<p><b>Specimen Requirement:</b> 2 mL serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; <b>Separate serum from cells within 2 hours of collection and transfer into a standard aliquot tube. Do not use gel barrier tubes.</b></p> <p>*OR* 2 mL plasma from Sodium or Lithium heparin (Green) tube; Minimum 0.5 mL; Refrigerated; <b>Separate plasma from cells within 2 hours of collection and transfer into a standard aliquot tube. Do not use gel barrier tubes.</b></p> <p><b>Stability:</b>            Ambient: <b>2 days after separation from cells</b>            Refrigerated: <b>2 weeks after separation from cells</b>            Frozen: <b>Acceptable after separation from cells</b></p> <p><b>Days Performed: Varies</b>  <b>Reported: 8–11 days</b>  <b>CPT: 80299</b></p>	
Mycobacterium tuberculosis by QuantiFERON TB Gold Plus	INFTBP	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            TB Result (TBGRES)            Nil Result (TBMITN)            TB1 Antigen minus Nil Result (TBG1AG)            TB2 Antigen minus Nil Result (TBG2AG)            Mitogen minus Nil Result (TBMITN)            TB Interpretation (TBGINT)  <b>TB1 Antigen (TBG1)</b>  <b>TB2 Antigen (TBG2)</b>  <b>Mitogen (TBMIT)</b></p> <p><b>Clinical Limitation:</b> Inaccurate or indeterminate results may occur if adherence to collection instructions are not followed. Grossly hemolyzed samples, lipemic samples, and samples containing particulate matter or exhibiting obvious microbial contamination will be rejected. Bacterial contamination or heat inactivation of samples may affect the test results. Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with in vitro immunoassays. Patients routinely exposed to animals or to animal serum products can be prone to this interference and anomalous values may be observed. The performance characteristics has not been evaluated for: individuals younger than 18 years, pregnant women, individuals with impaired or altered immune function or other clinical conditions (HIV infection, transplant recipients, hematological disorders, malignancies, diabetes, chronic renal failure)</p> <p><b>Methodology:</b> Chemiluminescence Immunoassay (CLIA)  <b>Days Performed:</b> Mon–Sun</p>	2/26/22
Mycobacterium tuberculosis by QuantiFERON TB Gold Plus, Incubated	INTPGP	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            TB Result (TBGRES)            Nil Result (TBMITN)            TB1 Antigen minus Nil Result (TBG1AG)            TB2 Antigen minus Nil Result (TBG2AG)            Mitogen minus Nil Result (TBMITN)            TB Interpretation (TBGINT)  <b>TB1 Antigen (TBG1)</b>  <b>TB2 Antigen (TBG2)</b>  <b>Mitogen (TBMIT)</b></p> <p><b>Clinical Limitation:</b> Inaccurate or indeterminate results may occur if adherence to collection instructions are not followed. Grossly hemolyzed samples, lipemic samples, and samples containing particulate matter or exhibiting obvious microbial contamination will be rejected. Bacterial contamination or heat inactivation of samples may affect the test results. Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with in vitro immunoassays. Patients routinely exposed to animals or to animal serum products can be prone to this interference and anomalous values may be observed. The performance characteristics has not been evaluated for: individuals younger than 18 years, pregnant women, individuals with impaired or altered immune function or other clinical conditions (HIV infection, transplant recipients, hematological disorders, malignancies, diabetes, chronic renal failure)</p> <p><b>Methodology:</b> Chemiluminescence Immunoassay (CLIA)  <b>Days Performed:</b> Mon–Sun</p>	2/26/22



## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Phenobarbital, Free	PHENFR	<p><b>Special Information:</b> Gel-barrier tubes will be rejected.</p> <p><b>Clinical Information:</b> This test is used for therapeutic drug management. Trough levels are the most reproducible.</p> <p><b>Specimen Requirement:</b> 3 mL plasma from Sodium or Lithium heparin (Green) tube; Minimum 1 mL; Refrigerated; <b>Separate plasma from cells within 2 hours of collection and transfer to standard aliquot tube. Do not use gel barrier tubes.</b></p> <p>*OR* 3 mL serum from No additive (Red) tube; Minimum 1 mL; <b>Refrigerated;</b> <b>Separate plasma from cells within 2 hours of collection and transfer to standard aliquot tube. Do not use gel barrier tubes.</b></p> <p><b>Stability:</b>            Ambient: <b>2 days after separation from cells</b>            Refrigerated: <b>2 weeks after separation from cells</b>            Frozen: <b>6 months after separation from cells</b></p> <p><b>Days Performed:</b> Varies  <b>Reported:</b> 4–8 days</p>	2/26/22
Platelet Function Screen	PLTSCP	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            COL/EPI closure time (COLEPI)            COL/ADP closure time (COLADP)  <b>Hematocrit (HCT)</b>  <b>Platelet Count (PLTCT)</b></p> <p><b>Specimen Requirement:</b> 7 mL whole blood in Sodium citrate (Light Blue) tube; Minimum 4.5 mL; Ambient; Test must be completed within 4 hours of collection.  <b>*AND* 2.5mL whole blood in EDTA (Lavender) tube; Minimum 0.5 mL; Fill tube to at least half of fill volume.</b></p> <p><b>CPT:</b> 85576(x2), 85049, 85014</p>	2/26/22
PNH Panel by FCM	PNHPNL	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            PNH Granulocyte clone (PNHWBC)  <b>PNH RBC Clone-Partial Ag Loss (Type II) (PNHRBC2)</b>  <b>PNH RBC Clone-Complete Ag Loss (Type III) (PNHRBC3)</b>  <b>Sum of PNH RBC Clones (Type II + Type III) Ag loss (PNHRBCS)</b>            Interpretation (PNHINT): NEG            Reviewed by (PNHREV)</p> <p><b>Special Information:</b> Do not draw on Fridays, weekends or holidays. Specimens greater than 48 hours old will be rejected.</p> <p><b>Clinical Information:</b> The presence of paroxysmal nocturnal hemoglobinuria (PNH) clones in the erythrocyte and granulocyte populations is assessed in this procedure. For erythrocytes antibodies to Glycophorin A are used to specifically gate red cells and PNH clones are identified by lack of CD59 expression <b>for Type III, Type II and Sum of Type II and Type III cells..</b> For granulocytes, CD15 and CD33 are used to specifically gate granulocytes. The PNH-type granulocytes are then identified by lack of expression of CD24 and lack of reactivity to Fluorescent Aerolysin (FLAER). The lower limit of detection for this assay is 0.01% PNH-type cells. The presence of a PNH clone occurs in classical hemolytic PNH, generally at levels above 1%. PNH clones may be seen in other disorders such as aplastic anemia and myelodysplastic syndrome. Thus, these results must be put in context of the clinical findings.</p> <p><b>Specimen Requirement:</b> 4 mL whole blood in EDTA (Lavender) tube; <b>Minimum 4 mL; Ambient</b></p> <p><b>Reference Range:</b>  <b>Interpretation (PNHINT): NEG</b>  <b>PNH RBC Clone-Complete Ag Loss (Type III) (PNHRBC3): &lt;0.01%</b>  <b>PNH RBC Clone-Partial Ag Loss (Type II) (PNHRBC2): &lt;0.01%</b>  <b>PNH Granulocyte clone (PNHWBC): &lt;0.01%</b></p>	2/26/22
Procalcitonin	PROCAL	<p><b>Special Information:</b>  <b>Biotin disclaimers removed. Test is no longer affected by biotin.</b></p> <p><b>Stability:</b>            Ambient: 24 hours            Refrigerated: 48 hours            Frozen: <b>12 months</b></p>	effective immediately

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Prothrombin Time and PTT Elevation Diagnostic Panel	PTPTTE	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            PT Screen (PTSC)            PT 1:1 Mix (PTMIX1)            APTT Screen (APTTSC)            Immediate PTT 1:1 Mix (IMPTT)            Incubated PTT 1:1 Mix (1HRPTT)            Thrombin Time (TT)            Heparin Assay (ANTIXA)  <b>CBC, Differential and Staff Review removed</b></p> <p><b>Specimen Requirement:</b> 4.5 mL plasma from Sodium citrate (Lt Blue) tube; Frozen  <b>CPT:</b> 85390, 85520, 85610, 85611, 85670, 85730, 85732(x2), 85390(PC)</p>	2/26/22
Prothrombin Time Elevation Diagnostic Panel	PTEPNL	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Includes:</b>            PT Screen (PTSC)            PT 1:1 Mix (PTMIX1)            APTT Screen (APTTSC)            Fibrinogen (FIBCT)            Thrombin Time (TT)  <b>CBC, Differential and Staff Review removed</b></p> <p><b>Specimen Requirement:</b> 4.5 mL plasma from Sodium citrate (Lt Blue) tube; Frozen; Please submit "Coagulation Consultation Patient History Form" with specimens.  <b>CPT:</b> 85384, 85390, 85610, 85611, 85670, 85730, 85390(PC)</p>	2/26/22
Sequential Screen, First Trimester	SEQ1	<p><b>Specimen Requirement: 3 mL serum from Serum Separator (Gold) tube; Minimum 1 mL; Ambient; Specimen MUST be drawn between 10.4–13.9 weeks gestation. A nuchal translucency (NT) measurement by a FMF or SMFM certified sonographer MUST be included with specimen.</b></p> <p><b>*OR* 3 mL serum from No additive (Red) tube; Minimum 1 mL; Ambient; Specimen MUST be drawn between 10.4–13.9 weeks gestation. A nuchal translucency (NT) measurement by a FMF or SMFM certified sonographer MUST be included with specimen.</b></p> <p><b>Stability:</b>            Ambient: 7 days            Refrigerated: <b>14</b> days            Frozen: <b>14 days, 3 freeze/thaw cycles</b></p> <p><b>Reported: 3–6 days</b></p>	2/26/22
Sequential Screen, Second Trimester	SEQ2	<p><b>Specimen Requirement: 5 mL serum from Serum Separator (Gold) tube; Minimum 3 mL; Ambient; Specimen MUST be drawn between 15.0–21.9 weeks gestation. *OR* 5 mL serum from No additive (Red) tube; Minimum 3 mL; Ambient; Specimen MUST be drawn between 15.0–21.9 weeks gestation</b></p> <p><b>Stability:</b>            Ambient: 7 days            Refrigerated: <b>14</b> days            Frozen: <b>14 days, 3 freeze/thaw cycles</b></p> <p><b>Methodology: Not specified</b></p> <p><b>Reported: 3–6 days</b></p>	2/26/22
T cell V-Beta by Flow Cytometry	TVBETA	Flow Slide (FLOSLD) added	2/26/22

## Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Th/To Antibody	THTO	<p><b>Includes: Anti-Th/To Ab (RDL)</b></p> <p><b>Special Information: Grossly hemolyzed, contaminated, lipemic or icteric specimens will be rejected.</b></p> <p><b>Clinical Information:</b> The Th/To antibodies are present in 10-19% of patients with limited SSc, in 11% of patients with diffuse cutaneous SSc, and in 3% of patients with primary Raynaud's disease. Anti-Th/To antibody has been shown to be highly specific for patients with SSc.</p> <p><b>Specimen Requirement:</b> 1 mL serum from Serum Separator (Gold) tube; <b>Minimum 0.3 mL; Minimum volume does not allow for repeat testing.;</b> Refrigerated; <b>Remove serum from cells ASAP or within 1 hour of collection and transfer into a standard aliquot tube.</b></p> <p><b>*OR*</b> 1 mL serum from No additive (Red) tube; <b>Minimum 0.3 mL; Minimum volume does not allow for repeat testing.;</b> Refrigerated; <b>Remove serum from cells ASAP or within 1 hour of collection and transfer into a standard aliquot tube.</b></p> <p><b>Stability:</b>            Ambient: 7 days            Refrigerated: 14 days            Frozen: 60 days (<b>stable for only one freeze/thaw cycle</b>)</p> <p><b>Methodology: Radioimmunoprecipitation Assay (RIPA)</b></p> <p><b>Days Performed: Varies</b></p> <p><b>Reported: 15–22 days</b></p> <p><b>Price: \$150.00</b></p>	effective immediately
Urinalysis Only	UA	<p><b>Special Information:</b> Protein measurements from UA on visibly bloody samples will be reported as: "Visible blood causes falsely elevated results for analyte Protein. Due to this limitation, Protein will not be reported for patients whose urine contains visible blood".</p> <p><b>Note: Reflex to microscopic removed</b></p>	2/26/22
Urinalysis with Microscopic	UAWMIC	<p><b>For interface clients only: Test build may need to be modified</b></p> <p><b>Reference Range:</b>  <b>BACTERIA (UBACT): None Seen/HPF</b>            Note: Only new reference range is listed</p>	2/26/22
Urine Free Cortisol by LC-MS/MS	UFCRMT	<b>Test Name:</b> Previously Free Cortisol, Urine by LC-MS/MS	2/26/22

# New Tests

Test Name	Order Code	Change	Effective Date
Creatinine-Cystatin C eGFR	CRECYS	<p><b>Includes:</b> Creatinine, Serum (CRET) Cystatin C (CYSC)</p> <p><b>Clinical Limitation:</b> Cystatin C levels are sensitive to changes in thyroid function and should not be used without knowledge of the patient's thyroid status.</p> <p><b>Clinical Information:</b> Evaluation of renal function. eGFR Calculation: Adults: 2021 CKD-EPI creatinine-cystatin C equation Pediatric (2–17 yrs): Not available. Cystatin C is produced by all nucleated cells at a constant rate and the production rate in humans is remarkably constant over the entire lifetime. Elimination from the circulation is almost entirely via glomerular filtration.</p> <p><b>Specimen Requirement:</b> 1 mL plasma from Lithium heparin Plasma Separator (Light Green) tube; Minimum 0.4 mL; Centrifuge and refrigerate. Submit in original tube or aliquot specimen into CCL aliquot tube *OR* 1 mL serum from Serum Separator (Gold) tube; Minimum 0.4 mL; Centrifuge and refrigerate.</p> <p><b>Stability:</b> Ambient: 7 days Refrigerated: 7 days Frozen: 3 months</p> <p><b>Days Performed:</b> Mon–Sun 24 hours <b>Reported:</b> 1 day</p>	2/26/22
Group B Strep Culture Screen	GRPBSC	<p><b>Note: This test was previously only orderable by laboratory.</b></p> <p><b>Special Information:</b> Specimens must be collected by swabbing the distal vagina, followed by the rectum (insert swab through the anal sphincter using the same swab). After receipt in the lab, a preincubation step in selective broth is performed to optimize sensitivity. Group B Streptococcus (GBS) detection for vaginal-rectal specimens is also available by PCR (GBSPCR).</p> <p><b>Clinical Information:</b> Many women harbor Group B streptococci (Streptococcus agalactiae) that can cause infections during pregnancy or in neonates after birth. This test is intended for screening of pregnant women for vaginal and rectal Group B streptococcal colonization between 35 and 37 weeks gestation. If the patient is β-lactam allergic, susceptibility testing should also be ordered. For the diagnosis of GBS disease, routine culture of the symptomatic body site (e.g., blood, CSF, amniotic fluid, joint fluid) should be ordered rather than a screening test.</p> <p><b>Specimen Requirement:</b> Vaginal swab, culturette; Ambient *OR* Rectal swab, culturette; Ambient</p> <p><b>Stability:</b> Ambient: 24 hours Refrigerated: 24 hours Frozen: Unacceptable</p> <p><b>Methodology:</b> Culture, Identification</p> <p><b>Reference Range:</b> No Beta Streptococcus Group B Isolated</p> <p><b>Days Performed:</b> Sun–Sat 8 hours <b>Reported:</b> 7 days <b>CPT:</b> 87081 <b>Price:</b> \$65.00</p>	effective immediately

## New Tests (Cont.)

Test Name	Order Code	Change	Effective Date
Urinalysis with Reflex to Microscopic	LAB1237	<p><b>Special Information:</b> If Hemoglobin/Blood, Leukocyte Esterase and/or Protein is/are positive, then Microscopic Analysis will be performed and billed. Protein measurements from UA on visibly bloody samples will be reported as: "Visible blood causes falsely elevated results for analyte Protein. Due to this limitation, Protein will not be reported for patients whose urine contains visible blood".</p> <p><b>Clinical Information:</b> Detection of abnormal urinary chemical or cellular elements</p> <p><b>Specimen Requirement:</b> 10 mL urine, random in Clean container; Minimum 5 mL; Refrigerated *OR* 7 mL urine, random in BD Urine Preservative tube (Yellow); Minimum 7 mL; Ambient</p> <p><b>Stability:</b> Ambient: 2 hours Clean container; 72 hours BD Urine Preservative tube Refrigerated: 24 hours Clean container; 72 hours BD Urine Preservative tube</p> <p><b>Methodology:</b> Chemical</p> <p><b>Days Performed:</b> Sunday through Saturday</p> <p><b>Reported:</b> 8 hours</p> <p><b>CPT:</b> 81003</p> <p><b>Price:</b> \$25.00</p>	2/26/22

## Fee Increases

Test Name	Order Code	List Fee	CPT Code	Effective Date
Helicobacter pylori Ab, IgG	HPYLRI	\$85.00	86677	effective immediately
Platelet Function Screen	PLTSCP	\$125.00	85576 (x2), 85049, 85014	2/26/22

## Fee Reductions

Test Name	Order Code	List Fee	CPT Code	Effective Date
Helicobacter pylori Antibodies, IgG and IgA	HPYGA	\$118.00	86677 (x2)	effective immediately
Prothrombin Time and PTT Elevation Diagnostic Panel	PTPTE	\$450.00	85390, 85520, 85610, 85611, 85670, 85730, 85732(x2), 85390(PC)	2/26/22
Prothrombin Time Elevation Diagnostic Panel	PTEPNL	\$312.00	85384, 85390, 85610, 85611, 85670, 85730, 85390(PC)	2/26/22
Vitamin D, 1,25-Dihydroxy	125VTD	\$155.00	82652	effective immediately

## Discontinued Tests

Test Name	Order Code	Test Information	Effective Date
Aldosterone Suppression	ALDOSU	Test will no longer be available.	2/26/22
C-Peptide Suppression	CPEPSP	Test will no longer be available.	2/26/22
Calpain 3 DNA Sequencing Test	CALP3	Test will no longer be orderable. For lab use only.	2/26/22
Carnitine Palmitoyl Transferase II Deficiency	CPT2	Test will no longer be orderable. For lab use only.	2/26/22
Cystatin C with Estimated GFR	CYCGFR	Test will no longer be available. Recommended replacement test: Cystatin C (CYSTC)	2/26/22
FISH for WWTR1/CAMTA1	CAMTA1	Test will no longer be available.	1/4/22
Flow Cytometry Hold Sample	FLOHLD	Test will no longer be available	2/26/22
GFR, Estimated	GFR1	Test will no longer be available. Recommended replacement test: Creatinine, Serum (CRET1)	2/26/22
Glucose Transporter Deficiency SLC2A1	SLC2A1	Test will no longer be orderable. For lab use only.	2/26/22
HIV PhenoSense GT	HIVPHS	Test will no longer be orderable. For lab use only.	2/26/22
HIV Phenotype	HIVPHE	Test will no longer be orderable. For lab use only.	2/26/22
Interleukin-6	INT6	Test will no longer be available. Recommended replacement test: Interleukin-6 (IL-6) (INLKN6)	2/26/22
Lipid Associated Sialic Acid	LIPSIA	Test will no longer be available.	effective immediately
Mitochondrial DNA/nuclear DNA ratio	MTRAT	Test will no longer be orderable. For lab use only.	2/26/22
Peripheral Blood Low Grade Leuk Markers	PBLGLY	Test will no longer be available.	2/26/22
POLG2 Sequencing	POLG2	Test will no longer be orderable. For lab use only.	2/26/22
Routine Flu A/B by PCR	RTFLU	Test will no longer be available. Recommended replacement test: Routine Flu A/B & RSV (RTFRSV)	1/6/22
Routine RSV by PCR	RTRSV	Test will no longer be available. Recommended replacement test: Routine Flu A/B & RSV (RTFRSV)	1/6/22
Rheumatoid Factor IgM Autoantibodies	RFMAB	Test will no longer be available. Recommended replacement test: Rheumatoid Factor (RF)	effective immediately