

# **Cleveland Clinic Laboratories**

#### Technical Update • March 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. 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.

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rest Case #	Summary of Changes by Test Name	Orde.	Name Code	change	Test Dist. New Test	cial Introntinued	en Rey sormation	Component	Me	Day Reference	ormed Range	AReported	stability	CRI	fee
3	25-Hydroxyvitamin D2 and D3														
9	Achondroplasia (FGFR3) 2 Mutations														
9	AFP – Amniotic Fluid														
3	Allergen, Cayenne Pepper														
3	Allergen, Cranberry IgE														
3	Allergen, Food, Alpha-Gal IgE														
3	Allergen, Fungi and Molds, Chaetomium globosum IgE														
4	Amitriptyline/Nortriptyline														
9	Anti Enterocyte Antibodies														
9	Ashkenazi Jewish Diseases														
4	Bacterial Vaginosis Amplification														
9	Blau Syndrome (NOD2/CARD15 Complete Gene	:)													
9	Cadasil DNA test														
9	CNBP Repeat Analysis														
9	COL1A1/COL1A2 DNA Sequencing														
9	COL3A1 Deletion/Duplication Analysis														
9	COL3A1 Gene Sequencing (Blood)														
9	Complete HNPP Evaluation														
9	Connexin 26														
4	Cross-Linked N-telopeptide, Urine														

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***	Summary of Changes by Test Name	Code	ange	Test	nued	ation	ment	gels	ology	ange	orted	oility	CRI	
9	Cystic Fibrosis (CFTR) Sequencing													
4	Desipramine													
5	Doxepin/Nordoxepin													
9	Duchenne/Becker Muscular Dystrophy (DMD) Deletion/Duplication with Reflex to Sequencing													
9	Dystonia DNA test													
9	Familial Hypocalciuric Hypercalcemia Evaluation													
9	FBN1 Gene Sequencing Analysis													
9	FBN1 Gene Deletion/Duplication Analysis													
10	Friedreich's Ataxia DNA Test													
10	FSHD DNA Test													
10	GLA Gene Testing in Fabry Disease													
10	Hemiplegic Migraine Evaluation													
10	Huntington's Disease													
10	Hydroxylase Gene(CYP21A2), Full Gene Analysis, Blood													
5	Imipramine/Desipramine													
10	KCNJ11 (NDM) DNA Sequencing Test													
10	Kennedy's Disease DNA Test													
6	Leukotriene E4, Urine 24 Hour													
10	LHON mtDNA Mutation													
10	Medium Chain Acyl-CoA Dehydrogenase, Tier 1, Targeted													
10	MFN2 DNA Sequencing Test													
8	Miscellaneous Send Out Test													
10	Miscellaneous Send Out Test 13													
10	Miscellaneous Send Out Test 14													
10	Miscellaneous Send Out Test 15													
10	Miscellaneous Send Out Test 16													
8	Miscellaneous Send Out Test 2													
8	Miscellaneous Send Out Test 3													
10	Monogenic Diabetes (MODY) Evaluation													
10	Muckle-Wells Syndrome													
10	Multifocal Neuropathy Evaluation													
10	MVK Testing in Hyper-IgD Syndrome													
10	Neurofibromatosis Type 2 DNA													
6	Neuron Specific Enolase, CSF													
6	Nortriptyline													
10	OPMD Repeat Expansion Test													
10	Pancreatitis Panel													
10	PAX6 Gene Analysis													

	Summary of Changes by Test Name	Order Cor	Name Chame	Test Wew Test	special III.	coecimen Reu-	component	Mer. change(s)	Day References	performed ce Range	AReported	Stability	CPT	fe <sup>e</sup>
6, 9	Plasminogen Activator Inhibitor Antigen													
10	PMP22 DNA Sequencing Test													
10	PMP22 Duplication/Deletion DNA													
10	PTEN Gene Analysis													
11	SCA1 DNA test													
11	SCA2 Expansion Analysis													
11	SCA3 DNA Test													
11	SCA6 DNA Test													
11	SCA7 DNA Test													
7	Syphilis Total with reflex													
11	TRAPS/Familial Hibernian Fever													
11	TTR Gene, Full Gene Analysis													
7	Vitamin B5 (Pantothenic Acid) Bioassay													
11	von Willebrand Type 2N Sequence Analysis													
8	VWF GPIbM Activity													

### Test Changes

Test Name	Order Code	Change	Effective Date
25-Hydroxyvitamin D2 and D3	D2D3	Specimen Requirement: 1 mL plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Centrifuge and transfer plasma/serum to a CCL tube and refrigerate. *OR* 1 mL serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Centrifuge and transfer plasma/serum to a CCL tube and refrigerate. *OR* 1 mL plasma from EDTA (Navy Blue) tube; Minimum 0.5 mL; Centrifuge and transfer plasma/serum to a CCL tube and refrigerate. Stability: Ambient: 7 days Refrigerated: 21 days Frozen: 30 days	effective immediately
Allergen, Cayenne Pepper	CAYENN	Reported: 2-4 days	3/31/22
Allergen, Cranberry IgE	CRANBY	Reported: 2–4 days	3/31/22
Allergen, Food, Alpha- Gal IgE	GALIGE	Reported: 2–4 days	3/31/22
Allergen, Fungi and Molds, Chaetomium globosum IgE	CHAETG	Reported: 2–4 days	3/31/22

Test Name	Order Code	Change	Effective Date
Amitriptyline/ Nortriptyline	AMINOR	Special Information: Collect immediately prior to next dose. Do not collect in a gel separator tube. This test is New York DOH approved. Clinical Information: This test is useful for optimizing drug therapy and monitoring patient adherence. The therapeutic range is based on serum pre-dose (trough) draw at steady-state concentration. Toxic concentrations may cause anticholinergic effects, cardiac abnormalities and seizures.	4/19/22
		Specimen Requirement: 1 ml serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate serum from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube. *OR* 1 ml plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate plasma from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube.	
		Stability: Ambient: 5 days Refrigerated: 2 weeks Frozen: 6 months	
		Methodology: Quantitative Liquid Chromatography–Tandem Mass Spectrometry	
		Reference Range: Amitriptyline (AMI): Not Established Nortriptyline alone (NORTRI): Therapeutic Range: 50–150 ng/mL Amitriptyline and Nortriptyline (TOTAMI): Therapeutic Range: 95–250 ng/mL Travia Loude Constant thera 500 ng/mL	
		Toxic Level: Greater than 500 ng/mL Days Performed: Mon, Wed, Fri	
		Reported: 2–6 days	
Bacterial Vaginosis Amplification	BVAMP	СРТ: 81513	effective immediately
Cross-Linked N-telopeptide, Urine	UNTX2	Special Information: Second morning fasting urine is required. Specimen Requirement: 5 mL second-morning void urine in a clean container; Minimum 2 mL; Refrigerated; Fasting urine is required	3/29/22
Desipramine	DESIPR	Special Information: Collect immediately prior to next dose. Do not collect in a gel separator tube. This test is New York DOH approved.	4/19/22
		Clinical Information: This test is useful for optimizing drug therapy and monitoring patient adherence. The therapeutic range is based on serum pre-dose (trough) draw at steady-state concentration. Toxic concentrations may cause anticholinergic effects, drowsiness and cardiac abnormalities.	
		Specimen Requirement: 1 ml serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate serum from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube. *OR* 1 ml plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate plasma from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube.	
		Stability: Ambient: 5 days Refrigerated: 2 weeks Frozen: 6 months	
		Methodology: Quantitative Liquid Chromatography–Tandem Mass Spectrometry	
		Reference Range: Therapeutic Range: 100–300 ng/mL Toxic Level: Greater than 500 ng/mL	
		Reported: 2–6 days	

Test Name	Order Code	Change	Effective Date	
Doxepin/Nordoxepin	DOXEPN	Special Information: Collect immediately prior to next dose. Do not collect in a gel separator tube. This test is New York DOH approved.	4/19/22	
		Clinical Information: This test is useful for optimizing drug therapy and monitoring patient adherence. The therapeutic range is based on serum pre-dose (trough) draw at steady-state concentration. Toxic concentrations may cause anticholinergic effects and cardiac abnormalities.		
		Specimen Requirement: 1 ml serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate serum from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube. *OR* 1 ml plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate plasma from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube.		
		Stability: Ambient: 5 days Refrigerated: 2 weeks Frozen: 6 months		
		Methodology: Quantitative Liquid Chromatography–Tandem Mass Spectrometry		
		Reference Range: Doxepin (DOX): Not Established Nordoxepin (NORDOX): Not Established Doxepin/Nordoxepin (TOTDOX): Therapeutic Range: 100–300 ng/mL Toxic Level: Greater than 500 ng/mL		
		Reported: 2–6 days		
Imipramine/ Desipramine	IMIDES	IMIDES Special Information: Collect immediately prior to next dose. Do not collect in a gel separator tube. This test is New York DOH approved.		4/19/22
		Clinical Information: This test is useful for optimizing drug therapy and monitoring patient adherence. The therapeutic range is based on serum pre-dose (trough) draw at steady-state concentration. Toxic concentrations may cause anticholinergic effects, drowsiness and cardiac abnormalities.		
		Specimen Requirement: 1 ml serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate serum from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube. *OR* 1 ml plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate plasma from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube.		
		Stability: Ambient: 5 days Refrigerated: 2 weeks Frozen: <b>6</b> months		
		Methodology: Quantitative Liquid Chromatography–Tandem Mass Spectrometry		
		Reference Range: Imipramine (IMIPRA): Not Established Desipramine (DESIP): Not Established Total Imipramine and Desipramine (TOTIMI): Therapeutic Range: 150–300 ng/mL		
		Toxic Level: Greater than 500 ng/mL		

Test Name	Order Code	Change	Effective Date
Leukotriene E4, Urine	ULTE4	For interface clients only: Test build may need to be modified	3/8/22
24 Hour		Test Name: Previously Leukotriene E4, Urine	
		Special Information: 24 hour volume is required. No preservatives preferred. This test is New York DOH approved.	
		<b>Specimen Requirement: 5</b> mL urine from 24-hour (well-mixed) clean container; <b>Minimum 2 mL</b> ; Refrigerate during collection; 24 hour volume is required. No preservatives preferred	
		Note: Random urine is no longer acceptable	
		Reference Range:	
		Leukotriene E4, Ur (ULE): Less than or equal to 104 pg/mg creatinine Creatinine, 24 Hr, Ur (CRT24): Male: 18–999 Years: 930–2955 mg/24 hours Female: 18–999 Years: 603–1783 mg/24 hours	
Neuron Specific Enolase, CSF	CNSE	Reference Range: Less than or equal to 21.5 ng/mL	effective immediately
Nortriptyline	NORTRP	Special Information: Collect immediately prior to next dose. Do not collect in a gel separator tube. This test is New York DOH approved.	4/19/22
		Clinical Information: This test is useful for optimizing drug therapy and monitoring patient adherence. The therapeutic range is based on serum pre-dose (trough) draw at steady-state concentration. Toxic concentrations may cause anticholinergic effects, cardiac abnormalities and seizures.	
		Specimen Requirement: 1 ml serum from No additive (Red) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate serum from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube. *OR* 1 ml plasma from EDTA (Lavender) tube; Minimum 0.5 mL; Refrigerated; Collect immediately prior to next dose. Do not use gel separator tubes. Separate plasma from cells ASAP or within 2 hours of collection and transfer into a standard aliquot tube.	
		Stability: Ambient: 5 days Refrigerated: 2 weeks Frozen: 6 months	
		Methodology: Quantitative Liquid Chromatography–Tandem Mass Spectrometry	
		Reference Range: Nortriptyline (NORTRP): Therapeutic Range: 50–150 ng/mL Toxic Level: Greater than 500 ng/mL	
		Reported: 2–6 days	
Plasminogen Activator Inhibitor Antigen	PAI1M	Stability: Frozen: 1 year Reference Range: 4–43 ng/mL Days Performed: Fri Reported: 5–9 days CPT: 85415 Price: \$220	effective immediately

Test Name	Order Code	Change	Effective Date
Syphilis Total with reflex	SYPHTX	Special Information: Results in samples from immunosuppressed patients or from patients with disorders leading to immunosuppression should be interpreted with caution.	effective immediately
		Clinical Limitation: Not intended for use in the screening of blood, plasma or tissue donors. Performance has not been established for the use of cadaveric specimens or the use of body fluids (other than serum). Avoid specimens with the following conditions: heat-inactivated, grossly hemolyzed (> 500 mg/dL hemoglobin), grossly lipemic, or obvious microbial contamination.	
		Clinical Information: A nonreactive result does not totally exclude a recent, within the past 2–3 weeks, Treponema pallidum infection. Detection of treponemal antibodie may indicate recent, past, or successfully treated syphilis infections and therefore cannot be used to differentiate between active and cured cases.	
		Stability: Ambient: 3 days Refrigerated: 7 days Frozen: 30 days	
		Methodology: Chemiluminescent Microparticle Immunoassay (CMIA)	
		Days Performed: Mon-Sat 7:00 am-11:00 pm	
Vitamin B5 (Pantothenic Acid) Bioassay	VITB5	<b>Special Information:</b> Critical: MUST protect from light. Specimens not protected from light will be rejected. Grossly hemolyzed or lipemic specimens are unacceptable. <b>Note</b> : <i>New York testing comment removed</i>	effective immediately

#### New Tests

Test Name	Order Code	Change	Effective Date
Miscellaneous Send Out Test	MISC1	Replacement order code for current WILD13, WILD14, WILD15 and WILD16 tests. This order code will be used only for tests not specifically defined at Cleveland Clinic.	effective immediately
Miscellaneous Send Out Test 2	MISC2	Replacement order code for current WILD13, WILD14, WILD15 and WILD16 tests. This order code will be used only for tests not specifically defined at Cleveland Clinic.	effective immediately
Miscellaneous Send Out Test 3	MISC3	Replacement order code for current WILD13, WILD14, WILD15 and WILD16 tests. This order code will be used only for tests not specifically defined at Cleveland Clinic.	effective immediately
VWF GPIbM Activity	VGPIBM	Includes:   VWF GP1bM Activity Interpretation and Comments   Special Information: This test is New York DOH approved.   Clinical Limitation: VWF is an acute phase reactant. Levels will be elevated postoperatively, with inflammation, stress, physical activity, pregnancy, estrogen therapy and hyperthyroidism. VWF levels may be artifactually reduced as a consequence of improper sample handling. VWF activity assays should be correlated with other VWF assays and with patient clinical history to support an appropriate diagnosis. For some cases of type 2B VWD, VWF GPIbM Activity will report a higher activity level than VWF Ristocetin Cofactor Activity. Therefore, VWF GPIbM Activity results should be interpreted cautiously when monitoring perioperative therapy in patients with type 2B WDD.   Clinical Information: von Willebrand disease (VWD) is a bleeding disorder characterized by either quantitative or qualitative defects of von Willebrand factor (WWF). Accurate measurement of VWF activity by assessment of its interaction with platelets is an essential component of the evaluation of a patient where there is concern for von Willebrand disease. While the VWF Ristocetin Cofactor Activity (WWF: RCO assay has been used for decades to measure VWF platelet binding activity, the assay's imprecision and poor sensitivity are significant drawbacks. The VWF GPIbM Activity assay measures binding of VWF to mutant GPIb] without the need for ristocetin and is well correlated with the VWF:RCo assay. The VWF GPIbM Activity assay demonstrates superior precision and sensitivity compared with the VWF ristocetin cofactor assay. Furthermore, it is not subject to falsely low values seen in individuals who possess the common p.D1472H polymorphism or the rare p.P1467S variant, both of which confound the accurate diagnosis of von Willebrand disease. Since discrepancies between VWF activit	4/12/22

#### Fee Increases

Test Name	Order Code	List Fee	CPT Code	Effective Date
Anti Enterocyte Antibodies	ENTERO	\$750.00		effective immediately

#### Fee Reductions

Test Name	Order Code	List Fee	CPT Code	Effective Date
Plasminogen Activator Inhibitor Antigen	PAI1M	\$220.00	85415	effective immediately

#### **Discontinued Tests**

Test Name	Order Code	Test Information	Effective Date
Achondroplasia (FGFR3) 2 Mutations	ADPLAS	Test will no longer be orderable. For lab use only.	4/21/22
AFP – Amniotic Fluid	FAFPAM	Test will no longer be orderable.	3/31/22
Ashkenazi Jewish Diseases	AJPWO	Test will no longer be orderable. For lab use only.	4/21/22
Blau Syndrome (NOD2/CARD15 Complete Gene)	BLAU	Test will no longer be orderable. For lab use only.	4/21/22
Cadasil DNA test	CADASL	Test will no longer be orderable. For lab use only.	4/21/22
CNBP Repeat Analysis	DM2DNA	Test will no longer be orderable. For lab use only.	4/21/22
COL1A1/COL1A2 DNA Sequencing	COLA12	Test will no longer be orderable. For lab use only.	4/21/22
COL3A1 Deletion/ Duplication Analysis	COL3DD	Test will no longer be orderable. For lab use only.	4/21/22
COL3A1 Gene Sequencing (Blood)	COL3	Test will no longer be orderable. For lab use only.	4/21/22
Complete HNPP Evaluation	HNPP	Test will no longer be orderable. For lab use only.	4/21/22
Connexin 26	CON26	Test will no longer be orderable. For lab use only.	4/21/22
Cystic Fibrosis (CFTR) Sequencing	CFSEQ	Test will no longer be orderable. For lab use only.	4/21/22
Duchenne/Becker Muscular Dystrophy (DMD) Deletion/ Duplication with Reflex to Sequencing	DBMDYS	Test will no longer be orderable. For lab use only.	4/21/22
Dystonia DNA test	DYSTON	Test will no longer be orderable. For lab use only.	4/21/22
Familial Hypocalciuric Hypercalcemia Evaluation	FHHE	Test will no longer be orderable. For lab use only.	4/21/22
FBN1 Gene Sequencing Analysis	FBN1	Test will no longer be orderable. For lab use only.	4/21/22
FBN1 Gene Deletion/ Duplication Analysis	FBN1DD	Test will no longer be orderable. For lab use only.	4/21/22

### Discontinued Tests (Cont.)

Test Name	Order Code	Test Information	Effective Date
Friedreich's Ataxia DNA Test	FRIED	Test will no longer be orderable. For lab use only.	4/21/22
FSHD DNA Test	FSHDNA	Test will no longer be orderable. For lab use only.	4/21/22
GLA Gene Testing in Fabry Disease	FABRY	Test will no longer be orderable. For lab use only.	4/21/22
Hemiplegic Migraine Evaluation	HEMMIG	Test will no longer be orderable. For lab use only.	4/21/22
Huntington's Disease	HUNTDI	Test will no longer be orderable. For lab use only.	4/21/22
Hydroxylase Gene(CYP21A2), Full Gene Analysis, Blood	21GENA	Test will no longer be orderable. For lab use only.	4/21/22
KCNJ11 (NDM) DNA Sequencing Test	KCNJ	Test will no longer be orderable. For lab use only.	4/21/22
Kennedy's Disease DNA Test	KENEDY	Test will no longer be orderable. For lab use only.	4/21/22
LHON mtDNA Mutation	LHON	Test will no longer be orderable. For lab use only.	4/21/22
Medium Chain Acyl- CoA Dehydrogenase, Tier 1, Targeted	MCADD	Test will no longer be orderable. For lab use only.	4/21/22
MFN2 DNA Sequencing Test	MFN2	Test will no longer be orderable. For lab use only.	4/21/22
Miscellaneous Send Out Test 13	WILD13	Test will no longer be orderable. Recommendeded replacement tests are Miscellaneous Send Out Test (MISC1), Miscellaneous Send Out Test 2 (MISC2) or Miscellaneous Send Out Test 3 (MISC3)	effective immediately
Miscellaneous Send Out Test 14	WILD14	Test will no longer be orderable. Recommendeded replacement tests are Miscellaneous Send Out Test (MISC1), Miscellaneous Send Out Test 2 (MISC2) or Miscellaneous Send Out Test 3 (MISC3)	effective immediately
Miscellaneous Send Out Test 15	WILD15	Test will no longer be orderable. Recommendeded replacement tests are Miscellaneous Send Out Test (MISC1), Miscellaneous Send Out Test 2 (MISC2) or Miscellaneous Send Out Test 3 (MISC3)	effective immediately
Miscellaneous Send Out Test 16	WILD16	Test will no longer be orderable. Recommendeded replacement tests are Miscellaneous Send Out Test (MISC1), Miscellaneous Send Out Test 2 (MISC2) or Miscellaneous Send Out Test 3 (MISC3)	effective immediately
Monogenic Diabetes (MODY) Evaluation	MODY	Test will no longer be orderable. For lab use only.	4/21/22
Muckle-Wells Syndrome	MUCKLE	Test will no longer be orderable. For lab use only.	4/21/22
Multifocal Neuropathy Evaluation	MULNEU	Test will no longer be orderable. For lab use only.	4/21/22
MVK Testing in Hyper-IgD Syndrome	MVK	Test will no longer be orderable. For lab use only.	4/21/22
Neurofibromatosis Type 2 DNA	NEUFIB	Test will no longer be orderable. For lab use only.	4/21/22
OPMD Repeat Expansion Test	OPMD	Test will no longer be orderable. For lab use only.	4/21/22
Pancreatitis Panel	PANCPL	Test will no longer be orderable. For lab use only.	4/21/22
PAX6 Gene Analysis	PAX6	Test will no longer be orderable. For lab use only.	4/21/22
PMP22 DNA Sequencing Test	PMP22	Test will no longer be orderable. For lab use only.	4/21/22
PMP22 Duplication/ Deletion DNA	PMPDEL	Test will no longer be orderable. For lab use only.	4/21/22
PTEN Gene Analysis	PTEN	Test will no longer be orderable. For lab use only.	4/21/22

### Discontinued Tests (Cont.)

Test Name	Order Code	Test Information	Effective Date
lest Name	Order Code	Test information	Effective Date
SCA1 DNA test	SCA1	Test will no longer be orderable. For lab use only.	4/21/22
SCA2 Expansion Analysis	SCA2	Test will no longer be orderable. For lab use only.	4/21/22
SCA3 DNA Test	SCA3	Test will no longer be orderable. For lab use only.	4/21/22
SCA6 DNA Test	SCA6	Test will no longer be orderable. For lab use only.	4/21/22
SCA7 DNA Test	SCA7	Test will no longer be orderable. For lab use only.	4/21/22
TRAPS/Familial Hibernian Fever	TRAPS	Test will no longer be orderable. For lab use only.	4/21/22
TTR Gene, Full Gene Analysis	TTRGEN	Test will no longer be orderable. For lab use only.	4/21/22
von Willebrand Type 2N Sequence Analysis	TYPE2N	Test will no longer be orderable. For lab use only.	4/21/22