Cleveland Clinic

Cleveland Clinic Laboratories

Technical Update • July 2026

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 Laboratory Customer Service at 216.444.5755 or 800.628.6816, or via email at 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	Applies to Regional Locations
2	ADAMTS13 Activity Assay										■			
2	AFB Culture & Stain												■	■
2	Allergen, Food, Annatto Seed IgE					■	■							■
2	Allergen, Tree Aspen, IgE					■	■							■
8	Antidepressant Panel, Urine (Quantitative)				■									■
8	Aspergillus Ab, CF				■									■
2	Baclofen					■	■						■	■
2	Calcium, Urine 24 Hour					■								■
2	Calcium, Urine Random					■								■
3	Calcium, Urine, Timed					■								
3	Coxsackie A, 6 Antibodies						■						■	■
3	Dilute Thrombin Time Panel									■				
3	Elevated PT and PTT Mixing Panel									■				
8	Fungal Antibodies with Reflex to Blastomyces dermatitdis Antibodies by Immunodiffusion, CSF				■									■
4	Herpes Simplex Virus (HSV-1/2) PCR, Non-Lesion						■							
8	Herpes Simplex Virus (HSV-1 & HSV-2), Qualitative PCR, CSF				■									
8	Herpes Simplex Virus (HSV-1 & HSV-2), Qualitative PCR, Neonatal Surface Swab				■									
5	Hypercoagulation Diagnostic Interpretive Panel									■				

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	Applies to Regional Locations
5	Influenza A Subtyping by Sequencing						■							
5–6	Lupus Anticoagulant Diagnostic Interpretive Panel									■				
6	Orotic Acid, Urine						■	■						
6	Synthetic Cannabinoid Metabolites – Expanded, Urine (Qualitative)							■						
6–7	Total Lipid Fatty Acid Profile, RBC							■						

Test Changes

Test Name	Order Code	Change	Effective Date
ADAMTS13 Activity Assay	ADM13A	**Days Performed: Mon–Sun** **Reported: 1** day	effective immediately
AFB Culture & Stain	AFC	CPT: 87116x1; 87206x1; 87015x1; 87015x1;87118x1; 87153x1; 87186x1; 87176x1; 87015x1; 87150x1	effective immediately
Allergen, Food, Annatto Seed IgE	ANNATO	**Special Information: Hemolyzed, icteric, or lipemic specimens will be rejected.** This test is New York state approved. **Specimen Requirements:** 0.5 mL Serum from an SST (Gold) tube; Minimum: 0.34 mL; Transport Temperature: **Frozen**; Separate serum from cells ASAP or within 2 hours of collection. Transfer serum to standard aliquot tube. Separate specimens must be submitted when multiple tests are ordered. *OR* 0.5 mL Serum from a Red Plain tube; Minimum: 0.34 mL; Transport Temperature: **Frozen**	effective immediately
Allergen, Tree Aspen, IgE	ASPEN	**Special Information: Hemolyzed, icteric or lipemic specimens will not be accepted.** This test is New York DOH approved. **Specimen Requirements:** 0.5 mL Serum from a No additive (Red) tube; Minimum: 0.34 mL plus 0.04 mL for each allergen ordered; Transport Temperature: **Frozen**; Separate serum from cells ASAP or within 2 hours of collection. Transfer 0.5 mL serum plus 0.1 mL for each additional allergen ordered to a standard aliquot tube. *OR* 0.5 mL Serum from an SST (Gold) tube; Minimum: 0.34 mL plus 0.04 mL for each allergen ordered; Transport Temperature: **Frozen**; Separate serum from cells ASAP or within 2 hours of collection. Transfer 0.5 mL serum plus 0.1 mL for each additional allergen ordered to a standard aliquot tube.	effective immediately
Baclofen	BACLOF	**Special Information: Polymer gel separation tubes (SST or PST) are unacceptable.** This test is New York DOH approved. **Specimen Requirements:** 1 mL Serum from a No additive (Red) tube; Minimum: 0.4 mL; Transport Temperature: **Frozen**; Do not use serum separator tubes. Separate serum from cells within 2 hours of collection and transfer into standard aliquot tube. Separate specimens must be submitted when multiple tests are ordered. *OR* 1 ml Plasma from EDTA (Lavender); Minimum: 0.4 mL; Transport Temperature: **Frozen**; Do not use separator tubes. Separate plasma from cells within 2 hours of collection and transfer into standard aliquot tube. Separate specimens must be submitted when multiple tests are ordered. **CPT:** 80369x1	effective immediately
Calcium, Urine 24 Hour	UCALCD	**Clinical Information:** *Note: Evaluation of calcium metabolism was removed from Clinical Information*	effective immediately
Calcium, Urine Random	UCALR	**Clinical Information:** *Note: Evaluation of calcium metabolism was removed from Clinical Information*	effective immediately

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Calcium, Urine, Timed	UCALTM	**Clinical Information:** *Note: Evaluation of calcium metabolism was removed from Clinical Information*	effective immediately
Coxsackie A, 6 Antibodies	COXSA6	**Specimen Requirements:** 2 mL Serum from a No additive (Red) tube; Minimum: 1 mL; Transport Temperature: **Frozen**; Centrifuge and transfer serum to standard aliquo tube. Separate specimens must be submitted when multiple tests are ordered. *OR* 2 mL Serum from an SST (Gold); Minimum: 1 mL; Transport Temperature: **Frozen**; Centrifuge and transfer serum to standard aliquot tube. Separate specimens must be submitted when multiple tests are ordered. **CPT: 86317x6**	effective immediately
Dilute Thrombin Time Panel	DTT	Reference Range: Dilute Thrombin Time: 1-999 Years: <18.6 sec APTT Screen: 0-1 Days: 28.2-47.4 sec 2-5 Days: 22.9-52.0 sec 6-30 Days: 23.1-48.0 sec 1-3 Months: 25.3-37.3 sec 4--11 Months: 25.3-37.3 sec 1-5 Years: **28.6-37.2** sec 6-10 Years: **27.0-37.1** sec 11-16 Years: **28.8-39.2** sec 17-99 Years: 24.0-35.1 sec	effective immediately
Elevated PT and PTT Mixing Panel	PTPTTE	**Reference Range:** Prothrombin Time and PTT Elevation Diagnostic Panel: Refer to individual components Anti Xa Inhib Assay: Refer to report APTT Screen: 0-1 Days: 28.2-47.4 sec 2-5 Days: 22.9-52.0 sec 6-30 Days: 23.1-48.0 sec 1-3 Months: 25.3-37.3 sec 4-11 Months: 25.3-37.3 sec 1-5 Years: **28.6-37.2** sec 6-10 Years: **27.0-37.1** sec 11-16 Years: **28.8-39.2** sec 17-99 Years: 24.0-35.1 sec Immediate PTT 1:1 Mix: 0-99 Years: > 33.2 sec PT 1:1 Mix: 0-14 Days: 12.6-16.4 sec 15-30 Days: 12.0-16.0 sec 1-5 Months: 11.7-15.7 sec 6-11 Months: 11.8-14.9 sec 12 Months–5 Years: 12.1-14.5 sec 6-10 Years: 11.7-15.1 sec 11-16 Years: 12.1-15.7 sec 17-99 Years: 11.6-14.4 sec PT Screen: 0-14 Days: 12.6-16.4 sec 15-30 Days: 12.0-16.0 sec 1-5 Months: 11.7-15.7 sec 6-11 Months: 11.8-14.9 sec 12 Months–5 Years: 12.1-14.5 sec 6-10 Years: 11.7-15.1 sec 11-16 Years: 12.1-15.7 sec 17-99 Years: 11.6-14.4 sec Thrombin Time: 0-1 Days: < 17.3 sec 2-5 Days: < 17.9 sec 6-30 Days: < 17.9 sec 1-3 Months: < 18.2 sec 4-11 Months: < 19.1 sec 1-999 Years: < 18.6 sec	effective immediately

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Herpes Simplex Virus (HSV-1/2) PCR, Non-Lesion	HSVPCR	**Specimen Requirements:** 0.5 mL Fluid, ocular in a Sterile container; Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; Transport Temperature: Refrigerated; Collect ocular fluid using standard protocol. An absolute minimum of 250 uL is required for testing (for HSVPCR and VZVPCR combined). For specimen volumes below 5 mL leave the fluid inside the sterile syringe to allow maximal recovery. The needle MUST be removed and syrine capped before transport to the lab. *OR* 0.5 mL Bronch (BAL) in a Sterile container; Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; Transport Temperature: Refrigerated; Collect 2-3 mL into a sterile, leak-proof, screw-cap collection cup or sterile dry container (ie. Oracle 1619591). If aliquoting is necessary, sterile aliquot tubes must be used. Do not dilute with transport media. *OR* 0.5 mL Plasma from an EDTA PPT (White) tube; Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; Transport Temperature: Refrigerated; Collect EDTA plasma according to standard protocol. Separate plasma by centrifugation (at 1,100 RCF for a minimum of 10 minuets) within 24 hours of cllection. Plasma must be aliquoted first if sample is to be frozen. Sample cannot be shared with a test performed outside of Molecular Microbiology. sample can only be shared with CMVQNT, HCQPCR, HIVRNA, HBVDNU, EBVQNT, BKQUAN, HSVPCR, or VZVPCR. *OR* **0.5 mL Cerebrospinal fluid (CSF) in a Sterile containe**r; Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; **Transport Temperature: Refrigerated; Collect CSF using standard protocol. CSF from any tube of collection (Tubes 1-4) may be used for this assay. make a dedicated aliquot inot a sterile tube using sterile technique in a biosafety cabinet. Residual specimen from non-Microbiology laboratories is NOT acceptable**. *OR* 0.5 mL Washings, bronch in a Sterile container; Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; Collect 2-3 mL into a sterile, leak-proof, screw-cap collection cup or sterile dry container (ie. Oracle 1619591). If aliquotting is necessary, sterile aliquot tubes must be used. Do not dilute with transport media. *OR* 0.5 mL Plasma from an EDTA (Lavender); Minimum: 0.25 mL; Absolute minimum volume accepted is 0.25 mL (250 uL) for HSVPCR and VZVPCR combined. This minimum should be enforeced for all specimen types except ocular fluid. For ocular fluid received below this minimum amount, do not cancel testing. instead, forward specimen onto testing lab for determination of sufficiency and possible conversion to alternative testing if needed.; Collect EDTA plasma according to standard protocol. Centrifuge (at 1,300 RCF for a minimum of 10 minuets) and aliquot into a sterile secondary tube within 24 hours of collection. Plasma must be aliquoted first if sample is to be frozen. Sample cannot be shared with a test performed outside of Molecular Microbiology. Sample can only be shared with CMVQNT, HCQPCR, HIVRNA, HBVDNU, EBVQNT, BKQUAN, HSVPCR, or VZVPCR.	effective immediately

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Hypercoagulation Diagnostic Interpretive Panel	HYPER	**Reference Range:** Hypercoagulation Diagnostice Interpretive Panel: Refer to indivdual components Thrombin Time: 0-1 Days: < 17.3 sec 2-5 Days: < 17.9 sec 6-30 Days: < 17.9 sec 1-3 Months: < 18.2 sec 4-11 Months: < 19.1 sec 1-999 Years: < 18.6 sec Anti Xa Inhib Assay: Refer to report APTT Screen: 0-1 Days: 28.2-47.4 sec 2-5 Days: 22.9-52.0 sec 6-30 Days: 23.1-48.0 sec 1-3 Months: **25.3-37.**3 sec 4--11 Months: **25.3-37.3** sec 1-5 Years: **28.6-37.2** sec 6-10 Years: 27.0-37.1 sec 11-16 Years: 28.8-39.2 sec 17-99 Years: 24.0-35.1 sec	effective immediately
Influenza A Subtyping by Sequencing	FLUSEQ	**Clinical Information:** Influenza A viruses have segmented single-stranded RNA genomes and are divided into subtypes based on their hemagglutinin (H) and neuraminidase (N) subtypes. Current subtypes of influenza A viruses that routinely circulate in humans and cause seasonal influenza are A(H1N1)pdm09 and A(H3N2). Over 130 influenza A subtype combinations have been identified in other animals, predominantly in wild birds. Genetic reassortment or mutations in these novel influenza A viruses can lead to better adaptation for human infection, and are the basis of flu pandemics. In 2020-2021, a new strain of highly pathogenic avian influenza A(H5N1) virus began affecting wild birds. In the United States, there have been outbreaks with these viruses among poultry and dairy cows, as well as sporadic human infections mostly tied to poultry and dairy cow exposure. In light of the ongoing avian influenza A(H5) virus animal outbreak in the United States, CDC now recommends that all influenza A positive respiratory specimens from hospitalized patients, especially from those in an ICU, be subtyped for seasonal influenza A viruses as soon as possible following admission, to support optimal patient care and proper infection prevention and control measures and to facilitate rapid public health investigation and action. This Influenza A Subtyping by Sequencing assay is a lab-developed test that uses next-generation sequencing technology to sequence the entire influenza A genome, with subsequent analysis using a custom bioinformatic pipeline. This test reports influenza A(H1N1), influenza A(H3N2), or influenza A(H5N1) subtypes only if both hemagglutinin (H) and neuraminidase (N) gene segments are successfully sequenced. **The test will report influenza A(H1), influenza A(H3), or influenza A(H5) if only hemagglutinin is successfully sequenced.** Infections with mixed subtypes or reassorted viruses with contributions of non-H/N segments from novel influenza A may not be reliably identified. This test should only be ordered on samples already-positive for influenza A by a nucleic acid amplification test. Sequencing may not be successful in specimens with low viral load.	07/14/2026
Lupus Anticoagulant Diagnostic Interpretive Panel	LUPUSP	**Reference Range:** Prothrombin Time and PTT Elevation Diagnostic Panel: Refer to individual components Anti Xa Inhib Assay: Refer to report APTT Screen: 0-1 Days: 28.2-47.4 sec 2-5 Days: 22.9-52.0 sec 6-30 Days: 23.1-48.0 sec 1-3 Months: 25.3-37.3 sec 4--11 Months: 25.3-37.3 sec 1-5 Years: **28.6-37.2** sec 6-10 Years: **27.0-37.1** sec 11-16 Years: **28.8-39.2** sec 17-99 Years: 24.0-35.1 sec Immediate PTT 1:1 Mix: 0-99 Years: > 33.2 sec *(continued on page 6)*	effective immediately

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Lupus Anticoagulant Diagnostic Interpretive Panel *(continued from page 5)*		**Reference Range (continued):** PT 1:1 Mix: 0-14 Days: 12.6-16.4 sec 15-30 Days: 12.0-16.0 sec 1-5 Months: 11.7-15.7 sec 6-11 Months: 11.8-14.9 sec 12 Months–5 Years: 12.1-14.5 sec 6-10 Years: 11.7-15.1 sec 11-16 Years: 12.1-15.7 sec 17-99 Years: 11.6-14.4 sec PT Screen: 0-14 Days: 12.6-16.4 sec 15-30 Days: 12.0-16.0 sec 1-5 Months: 11.7-15.7 sec 6-11 Months: 11.8-14.9 sec 12 Months–5 Years: 12.1-14.5 sec 6-10 Years: 11.7-15.1 sec 11-16 Years: 12.1-15.7 sec 17-99 Years: 11.6-14.4 sec Thrombin Time: 0-1 Days: < 17.3 sec 2-5 Days: < 17.9 sec 6-30 Days: < 17.9 sec 1-3 Months: < 18.2 sec 4-11 Months: < 19.1 sec 1-999 Years: < 18.6 sec	
Orotic Acid, Urine	UOROTC	**Special Information:** Testing requires two containers of urine, **both** frozen. Urine specimens containing preservatives are unacceptable. Separate specimens must be submitted when multiple tests are ordered. **Specimen Requirements:** 3 mL Urine, first-catch from a Clean container; Minimum: 0.5 mL; Transport Temperature: **Frozen**; Specimen must be stored refrigerated until frozen. Separate urine into **TWO** standard aliquot tubes **and freeze**. Separate specimens must be submitted when multiple tests are ordered. *OR* 3 mL Urine, random from a Clean container; Minimum: 0.5 mL; Transport Temperature: **Frozen**; Specimen must be stored refrigerated until frozen. Separate urine into **TWO** standard aliquot tubes **and freeze**. Separate specimens must be submitted when multiple tests are ordered.	7/14/26
Synthetic Cannabinoid Metabolites – Expanded, Urine (Qualitative)	K2	**Included Tests:** **MDMB-4en-PINACA 3,3-Dimethylbutanoic Acid** **MDMB-BUTINACA 3,3-Dimethylbutanoic Acid** **5-fluoro-MDMB-PINACA 3,3-dimethylbutanoic acid**	8/4/26
Total Lipid Fatty Acid Profile, RBC	LFARBC	**Included Tests:** C10:0 Capric C12:0 Lauric C14:0 Myristic C15:0 Pentadecanoic C16:0 Palmitic C17:0 Heptadecanoic C18:0 Stearic C20:0 Arachidic C22:0 Behenic C23:0 Tricosanoic C24:0 Lignoceric C25:0 Pentacosanoic C26:0 Hexacosanoic C28:0 Octacosanoic C30:0 C10:1 (n-9) Caproleic C12:1 (n-9) Dodecaenoic C16:1 (n-9) C17:1 Heptadecaenoic C18:1 (n-9) Oleic C20:1 (n-9) Eicosenoic C20:3 (n-9) Mead C22:1 (n-9) Erucic *(continued on page 7)*	7/23/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Total Lipid Fatty Acid Profile, RBC *(continued from page 6)*		**Included Test (continued):** C24:1 (n-9) Nervonic C26:1 Hexacosaenoic C14:1 (n-5) Myristoleic C16:1 (n-7) Palmitoleic C18:1 (n-7) Vaccenic C18:1 (n-5) C20:3 (n-7) C14:2 Myristolenic C16:2 (n-6) Palmitolenic C18:2 (n-6) Linoleic C18:2 (n-6) Conj–Rumenic C18:3 (n-6) Gamma Linolenic C20:2 (n-6) Eicosadienoic C20:3 (n-6) Dihomo-g-linolenic C20:4 (n-6) Arachidonic C22:2 (n-6) Docosadienoic C22:4 (n-6) Adrenic C22:5 (n-6) Docosapentaenoic C24:2 (n-6) C26:2 Hexacosadienoic C18:3 (n-3) Alpha Linolenic C20:5 (n-3) Eicosapentaenoic C22:5 (n-3) C22:6 (n-3) Docosahexaenoic Pristanic Phytanic C16:1 Trans SUM C18:1 Trans SUM C18:2 Trans SUM Total Saturates Total W9 Total W7&5 Total W6 Total W3 Total Branched Total Trans Total DMA dimethylacetal Total Fatty Acids Arachidonic/DHA Ratio C16:0 DMA/C16:0 Ratio C18:0 DMA/C18:0 Ratio Interpretation *Note: The following components have been removed:* C16:0 DMA plasmalogen C18:0 DMA plasmalogen Total C18:1 DMA plasmalogen	

Discontinued Tests

Test Name	Order Code	Test Information	Effective Date
Antidepressant Panel, Urine (Quantitative)	UTCAQT	Test will no longer be orderable. Recommended replacement for UTCAQT: If concerned for overdose by unknown substance, URDRG, would be suggested. Targeted therapeutic drug monitoring is suggested to be done from serum/plasma: FLUOX, TAID, DESYRL.	7/2/26
Aspergillus Ab, CF	ASPRCF	Test will no longer be orderable. Recommended replacement Aspergillus Antibodies by Immunodiffusion [ASPER]	effective immediately
Fungal Antibodies with Reflex to Blastomyces dermatitdis Antibodies by Immunodiffusion, CSF	FANCSF	Test will no longer be orderable. Recommended replacements are individual testing for Coccidioides, Histoplasma, and Blastomyces by CSF	effective immediately
Herpes Simplex Virus (HSV-1 & HSV-2), Qualitative PCR, CSF	HSPCRC	Test will no longer be orderable. Recommended replacement is Herpes Simplex Virus (HSV-1/2) PCR, Non-Lesion (HSVPCR)	effective immediately
Herpes Simplex Virus (HSV-1 & HSV-2), Qualitative PCR, Neonatal Surface Swab	HSVNEO	Test will no longer be orderable. Recommended replacement is Herpes Simplex Virus (HSV-1/2) PCR, Non-Lesion (HSVPCR)	effective immediately