

Technical Update • October 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	Days Performed/Reported	Reference Range	Stability	Applies to Regional Locations	
													CPT	
2	Autoimmune Dysautonomia Evaluation, Serum													
3-4	Autoimmune Encephalopathy Evaluation, CSF													
5-7	Autoimmune Encephalopathy Evaluation, Serum													
7	B-Hydroxybutyrate													
10	Baclofen													
7-8	Bordetella species (including pertussis) PCR, Nasopharyngeal Swab													
8	DHEA													
10	Flunitrazepam, Serum													
8	Folate, Serum													
10	Ketamine and Metabolite, Serum/Plasma													
8	Leukotriene E4, Urine 24 Hour													
10	Midazolam													
8-9	Myelopathy, Autoimmune/Paraneoplastic Evaluation, Serum													
10	Oxycodone and Metabolite, Serum													
9	Synthetic Cannabinoid Metabolites - Expanded, Urine (Qualitative)													

Test Changes

Test Name	Order Code	Change	Effective Date
Autoimmune Dysautonomia Evaluation, Serum	AIDYSA	Includes: Dysautonomia, Interpretation AChR Alpha3 Ganglionic Flow, S ANNA-1 AP3B2 IFA, S CRMP-5-IgG CASPR2-IgG CBA, DPPX Ab CBA, S LGI1-IgG CBA Purkinje Cell Cytoplasmic Ab Type 2 <i>Note: AChR Ganglionic Neuronal Ab has been removed.</i> Methodology: Cell Binding Assay (CBA) Flow Cytometry (FC) Immunoblot (IB) Immunofluorescence Radioimmunoassay (RIA) Reference Range: AChR Alpha3 Ganglionic Flow, S: <1:10 Antineuronal Nuclear Ab-Type 1 (ANNA-1): Negative AP3B2 IFA, S: Negative CRMP-5-IgG: Negative CASPR2-IgG CBA Serum: Negative DPPX Ab CBA, S: Negative LGI1-IgG CBA Serum: Negative Purkinje Cell Cytoplasmic Ab-Type 2 (PCA-2): Negative Dysautonomia IFA Notes: Refer to report Dysautonomia, Interpretation, S: Refer to report <i>Note: AChR Ganglionic Neuronal Ab has been removed.</i> CPT: 86255x8 Reflexed Test(s): CRMP-5 Western Blot (Reflex only) DPPX Ab IFA Titer, Serum (Reflex Only) ANNA-1 Immunoblot, Serum (Reflex Only) ANNA-2 Immunoblot, Serum (Reflex Only) Adaptor Protein 3 Beta2 (AP3B2) Antibody, Cell-Binding Assay, Serum (Reflex Only) Adaptor Protein 3 Beta2 (AP3B2) Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody-Type 1 (ANNA-1) Titer, Serum (Reflex Only) Collapsin Response-Mediator Protein-5 (CRMP-5) Neuronal IgG Titer, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 2 (PCA-2) Titer, Serum (Reflex Only) AChR Alpha3 Gang Flow Titer, S (Reflex only) MAP1B Immunoblot, S (Reflex only)	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Autoimmune Encephalopathy Evaluation, CSF	ENCCSF	Includes: Encephalopathy Interpretation, CSF AK5 Ab IFA, CSF AMPA-R Ab CBA, CSF Amphiphysin Ab, CSF Anti-Glial Nuclear Ab, Type 1 Anti-Neuronal Nuclear Ab, Type 1 Anti-Neuronal Nuclear Ab, Type 2 Anti-Neuronal Nuclear Ab, Type 3 CASPR2-IgG CBA, CSF CRMP-5-IgG, CSF DPPX Ab CBA, CSF GABA-A-R Ab CBA, CSF GABA-B-R Ab CBA, CSF GAD65 Ab Assay, CSF GFAP IFA, CSF IgLON5 CBA, CSF KLHL11-IgG CBA, CSF LGI1-IgG CBA, CSF Ma2 Ab ELISA, CSF mGluR1 Ab IFA, CSF mGluR5 Ab IFA, CSF Neurochondrin IFA, CSF NIF IFA, CSF NMDA-R Ab CBA, CSF Purkinje Cell Cytoplasmic Ab Type Tr Purkinje Cell Cytoplasmic Ab Type 1 Purkinje Cell Cytoplasmic Ab Type 2 PDE10A Ab IFA, CSF Septin-7 IFA, CSF TRIM46 Ab IFA, CSF Methodology: Cell Binding Assay (CBA) Enzyme-Linked Immunosorbent Assay (ELISA) Immunoblot (IB) Indirect Immunofluorescence Assay (IFA) Radioimmunoassay (RIA) Western Blot (WB) Reference Range: Anti-Glial Nuclear Ab, Type 1: Negative AMPA-Receptor Ab CBA, CSF: Negative Amphiphysin Ab, CSF: Negative Anti-Neuronal Nuclear Ab, Type 1: Negative Anti-Neuronal Nuclear Ab, Type 2: Negative Anti-Neuronal Nuclear Ab, Type 3: Negative CRMP-5-IgG, CSF: Negative Contactin-Associated Protein-Like-2 (CASPR2)-IgG, CSF: Negative DPPX Ab CBA, CSF: Negative GABA-B-R Antibody CBA, CSF: Negative GAD65 Antibody, CSF: < or = 0.02 nmol/L GFAP IFA, CSF: Negative mGluR1 Ab IFA, CSF: Negative IgLON5 CBA, CSF: Negative Leucine-Rich Glioma Inactivated Protein-1 (LGI1) IgG, CSF: Negative Neurochondrin Antibody, Tissue Immunofluorescence, Spinal Fluid: Negative NIF IFA, CSF: Negative NMDA-Receptor Antibody CBA, CSF: Negative Purkinje Cell Cytoplasmic Ab 1: Negative Purkinje Cell Cytoplasmic Ab 2: Negative Purkinje Cell Cytoplasmic Ab Tr: Negative PDE10A Ab IFA, CSF: Negative Septin-7 Antibody, Tissue Immunofluorescence, Spinal Fluid: Negative TRIM46 Ab IFA, CSF: Negative Encephalopathy, Interpretation, CSF: Refer to report AK5 Ab IFA, CSF: Negative GABA-A-R Ab CBA, CSF: Negative <i>(continued on page 4)</i>	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Autoimmune Encephalopathy Evaluation, CSF <i>(Continued from page 3)</i>	ENCCSF	Reference Range (Continued): KLHL11-IgG CBA, CSF: Negative Ma2 Ab ELISA, CSF: Negative mGluR5 Ab IFA, CSF CPT: 86255x26; 86341x1; 0432Ux1; 83516x1 Reflexed Test(s): AGNA-1 Immunoblot, CSF (Reflex Only) Alpha Internexin CBA, CSF (Reflex only) AMPA-Receptor Antibody, IFA Titer, CSF (Reflex only) Amphiphysin Antibody Titer Assay, Spinal Fluid (Reflex Only) Amphiphysin Immunoblot, CSF (Reflex Only) ANNA-1 Immunoblot, CSF (Reflex Only) ANNA-2 Immunoblot, CSF (Reflex Only) Anti-Glial/Neuronal Nuclear Antibody-Type 1 (AGNA-1) Titer, Spinal Fluid (Reflex Only) Antineuronal Nuclear Antibody Type 2 (ANNA-2) Titer, Spinal Fluid (Reflex Only) Antineuronal Nuclear Antibody Type 3 (ANNA-3) Titer, Spinal Fluid (Reflex Only) Antineuronal Nuclear Antibody-Type 1 (ANNA-1) Titer, Spinal Fluid (Reflex Only) Collapsin Response-Mediator Protein-5 (CRMP-5) Neuronal IgG Titer, Spinal Fluid (Reflex Only) CRMP-5-IgG Western Blot, CSF (Reflex only) DPPX Ab IFA Titer, CSF (Reflex Only) GABA-B-R IF Titer, CSF (Reflex only) GFAP CBA, CSF (Reflex only) GFAP IFA Titer, CSF (Reflex only) IgLON5 IFA Titer, CSF (Reflex only) mGluR1 Ab CBA, CSF (Reflex Only) mGluR1 Ab IFA Titer, CSF (Reflex Only) Neurochondrin Antibody, Cell-Binding Assay, Spinal Fluid (Reflex Only) Neurochondrin Antibody, Tissue Immunofluorescence Titer, Spinal Fluid (Reflex Only) NIF Heavy Chain CBA, CSF (Reflex only) NIF IFA Titer, CSF (Reflex only) NIF Light Chain CBA, CSF (Reflex only) NMDA-R Antibody IF Titer, CSF (Reflex only) PCA-1 Immunoblot, CSF (Reflex Only) PCA-Tr Immunoblot, CSF (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 1 (PCA-1) Titer, Spinal Fluid (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 2 (PCA-2) Titer, Spinal Fluid (Reflex Only) Purkinje Cell Cytoplasmic Antibody, Type Tr (PCA-Tr) Titer, Spinal Fluid (Reflex Only) Septin-7 Antibody, Cell-Binding Assay, Spinal Fluid (Reflex Only) Septin-7 Antibody, Tissue Immunofluorescence Titer, Spinal Fluid (Reflex Only) TRIM46 Ab CBA, CSF (Reflex only) TRIM46 Ab IFA Titer, CSF (Reflex only) AK5 Ab CBA, CSF (Reflex only) AK5 Ab IFA Titer, CSF (Reflex only) KLHL11 Ab IFA Titer, CSF (Reflex only) MAP1B Immunoblot, CSF (Reflex only) mGluR5 Ab CBA, CSF (Reflex only) mGluR5 Ab IFA Titer, CSF (Reflex only)	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Autoimmune Encephalopathy Evaluation, Serum	ENCSE	Includes: - Encephalopathy Interpretation, S - AMPA-R Ab CBA, S - Amphiphysin Ab, S - AGNA-1, S AK5 Ab IFA, S - ANNA-1, S - ANNA-2, S - ANNA-3, S - CASPR2-IgG, CBA, S - CRMP-5-IgG, S - DPPX Ab CBA, S - GABA-B-R Ab CBA, S GABA-A-R Ab CBA, S - GAD65 Ab Assay, S - IgLON5 CBA, S KLHL11-IgG CBA, S - LG11-IgG CBA, S Ma2 Ab ELISA, S - mGluR1 Ab IFA, S mGluR5 Ab IFA, S - Neurochondrin IFA, S - NMDA-R Ab CBA, S - PCA-1, S - PCA-2, S - PCA-Tr, S - PDE10A Ab IFA, S - Septin-7 IFA, S - TRIM46 Ab IFA, S - Purkinje Cell Cytoplasmic Antibody Type 1 (PCA-1) Titer, Serum (Reflex Only) <i>Note: GFAP IFA, S and NIF IFA, S have been removed.</i> Special Information: Reflex Algorithm: Each reflex test performed incurs additional charge. If client requests or if the immunofluorescence (IFA) patterns suggest collapsin response-mediator protein-5-IgG (CRMP-5-IgG), then CRMP-5-IgG IFA titer and CRMP-5-IgG Western blot will be performed. If the IFA patterns suggest amphiphysin antibody, then amphiphysin IFA titer and amphiphysin immunoblot will be performed. If the IFA pattern suggests antiligial nuclear antibody (AGNA)-1, then AGNA-1 IFA titer and AGNA-1 immunoblot will be performed. If the IFA pattern suggests antineuronal nuclear antibody type 1 (ANNA-1), then ANNA-1 IFA titer, ANNA-1 immunoblot, and ANNA-2 immunoblot will be performed. If the IFA pattern suggests ANNA-2 antibody, then ANNA-2 IFA titer, ANNA-2 immunoblot, and ANNA-1 immunoblot will be performed. If the IFA pattern suggests Purkinje cytoplasmic antibody type 1 (PCA-1), then PCA-1 IFA titer and PCA-1 immunoblot will be performed. If IFA pattern suggests PCA-Tr antibody, then PCA-Tr IFA titer and PCA-Tr immunoblot will be performed. If IgLON5 cell-binding assay (CBA) is positive, then IgLON5 IFA titer will be performed. If AMPA (alpha-amino-3-hydroxy-5-methyl-4-isoxazole propionic acid) receptor antibody CBA is positive, then AMPA-receptor antibody IFA titer assay will be performed. If gamma-aminobutyric acid B (GABA-B) receptor antibody is positive, then GABA-B-receptor antibody IFA titer assay will be performed. If N-methyl-D-aspartate (NMDA) receptor antibody CBA is positive, then NMDA-receptor antibody IFA titer assay will be performed. If DPPX antibody CBA is positive, then DPPX IFA titer will be performed. If the IFA pattern suggests metabotropic glutamate receptor 1 (mGluR1) antibody, then mGluR1 antibody CBA and mGluR1 IFA titer will be performed. If the indirect immunofluorescence (IFA) pattern suggests phosphodiesterase 10A (PDE10A) IgG, then the PDE10A antibody IFA titer will be performed. If the indirect immunofluorescence (IFA) pattern suggests tripartite motif-containing protein 46 (TRIM46) IgG, then the TRIM46 antibody cell-binding assay (CBA) and TRIM46 antibody IFA titer will be performed. Neuron-restricted patterns of IgG staining that do not fulfill criteria for ANNA-1, ANNA-2, CRMP-5-IgG, PCA-1, PCA-2, or PCA-Tr may be reported as "unclassified anti-neuronal IgG." <i>(continued on page 6)</i>	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Autoimmune Encephalopathy Evaluation, Serum <i>(Continued from page 5)</i>	ENCSE	Special Information (Continued): Complex patterns that include nonneuronal elements may be reported as "uninterpretable." For optimal antibody detection, specimen collection is recommended prior to initiation of immunosuppressant medication. This test should not be requested in patients who have recently received radioisotopes because of potential assay interference. Specimens will be screened for radioactivity prior to analysis. Radioactive specimens received in the laboratory will be held 1 week and assayed if sufficiently decayed, or canceled if radioactivity remains. Patient should have no general anesthetic or muscle-relaxant drugs in the previous 24 hours. Grossly hemolyzed, lipemic or icteric specimens will be rejected. <i>Note: Information pertaining to glial fibrillary acidic protein (GFAP) antibody and neuronal intermediate filament (NIF) antibody has been removed.</i> Reference Range: AMPA-Receptor Ab CBA: Negative Amphiphysin Ab: Negative Anti-Glial Nuclear Ab, Type 1: Negative Antineuronal Nuclear Ab-Type 1 (ANNA-1): Negative Antineuronal Nuclear Ab-Type 2 (ANNA-2): Negative Antineuronal Nuclear Ab-Type 3 (ANNA-3): Negative CASPR2-IgG CBA Serum: Negative CRMP-5-IgG: Negative DPPX Ab CBA, Serum: Negative GABA-B-Receptor Ab CBA: Negative GAD65 Antibody: < or = 0.02 nmol/L IgLON5 CBA: Negative LGI1-IgG CBA Serum: Negative mGluR1 Ab IFA, S: Negative Neurochondrin IFA, S: Negative NMDA-Receptor Ab: Negative Purkinje Cell Cytoplasmic Ab-Type 1 (PCA-1): Negative Purkinje Cell Cytoplasmic Ab-Type 2 (PCA-2): Negative Purkinje Cell Cytoplasmic Ab-Type Tr (PCA-Tr): Negative PDE10A Ab IFA, S: Negative Septin-7 IFA, S: Negative TRIM46 Ab IFA, S: Negative Encephalopathy, Interpretation, S: Refer to report AK5 Ab IFA, S: Negative GABA-A-R Ab CBA, S: Negative mGluR5 Ab IFA, S: Negative KLHL11-IgG CBA, S: Negative Ma2 Ab ELISA, S: Negative <i>Note: GFAP IFA S and NIF IFA S components have been removed.</i> CPT: 86341x1; 86255x24; 0432Ux1; 83516x1 Reflexed Test(s): AGNA-1 Immunoblot, Serum (Reflex Only) Amphiphysin Immunoblot, Serum (Reflex Only) ANNA-1 Immunoblot, Serum (Reflex Only) ANNA-2 Immunoblot, Serum (Reflex Only) CRMP-5 Western Blot (Reflex only) DPPX Ab IFA Titer, Serum (Reflex Only) GABA-B-Receptor Antibody, IFA Titer mGluR1 Ab CBA, Serum (Reflex Only) mGluR1 Ab IFA Titer, Serum (Reflex Only) NMDA-Receptor Antibody IFA Titer (Reflex only) PCA-1 Immunoblot, Serum (Reflex Only) PCA-Tr Immunoblot, Serum (Reflex Only) AMPA-Receptor Antibody, IFA Titer (Reflex only) IgLON5 IFA Titer, S (Reflex only) Amphiphysin Antibody Titer Assay, Serum (Reflex Only) Anti-Glial/Neuronal Nuclear Antibody-Type 1 (AGNA-1) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody Type 2 (ANNA-2) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody Type 3 (ANNA-3) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody-Type 1 (ANNA-1) Titer, Serum (Reflex Only) Collapsin Response-Mediator Protein-5 (CRMP-5) Neuronal IgG Titer, Serum (Reflex Only) <i>(continued on page 7)</i>	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Autoimmune Encephalopathy Evaluation, Serum <i>(Continued from page 6)</i>	ENC SER	Reflexed Test(s): (Continued) Neurochondrin Antibody, Cell-Binding Assay, Serum (Reflex Only) Neurochondrin Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 1 (PCA-1) Titer, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 2 (PCA-2) Titer, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type Tr (PCA-Tr) Titer, Serum (Reflex Only) Septin-7 Antibody, Cell-Binding Assay, Serum (Reflex Only) Septin-7 Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) AK5 Ab CBA, S (Reflex only) AK5 Ab IFA Titer, S (Reflex only) mGluR5 Ab CBA, S (Reflex only) mGluR5 Ab IFA Titer, S (Reflex only) KLHL11 Ab IFA Titer, S (Reflex only) MAP1B Immunoblot, S (Reflex only)	10/13/26
B-Hydroxybutyrate	BHB	Includes: B-Hydroxybutyrate <i>Note: Removed Ketones</i> Stability: Ambient: 4 days Refrigerated: 7 days Frozen: 1 month	10/13/26
Bordetella species (including pertussis) PCR, Nasopharyngeal Swab	BORAMP	Name: Previously Bordetella pertussis and parapertussis DNA, NAAT, Nasopharyngeal Swab Included tests: Bordetella pertussis DNA Bordetella parapertussis DNA Bordetella holmesii DNA Bordetella bronchiseptica DNA Clinical Limitation: This assay is unable to differentiate between Bordetella holmesii mono-infections versus B. holmesii/pertussis co-infections, which have been rarely reported. Environmental contamination of an exam room from a prior patient or a recent pertussis vaccination administration may result in false-positive test results. As with any nucleic acid amplification test, positive results do not rule out coinfection with other organisms, detected organisms may not be the definite cause of disease, and negative results do not rule out infection. When clinical factors suggest that B. pertussis may not be the cause of respiratory infection, other clinically appropriate investigation(s) should be carried out in accordance with published guidelines. Clinical Information: Bordetella pertussis (BP), a gram-negative bacterium, is the predominant causative agent of whooping cough or pertussis, a vaccine-preventable, highly infectious disease that is reportable to public health organizations. Pertussis occurs most commonly in children but also occurs in adolescents and adults and outbreaks have been documented in fully vaccinated populations due to waning immunity (immunity has been shown to decrease 5-10 years after vaccination). Early (catarrhal) pertussis disease is non-specific, and classic signs of pertussis (paroxysmal coughing, inspiratory 'whoop', post-tussive emesis, as well as apnea or cyanosis in infants) do not arise until approximately two weeks after the initial onset of symptoms. For diagnosis of pertussis, NAAT performed on a nasopharyngeal swab collected within 2-3 weeks of symptom onset is the most sensitive method. Bordetella parapertussis and Bordetella holmesii are known to cause a milder pertussis-like disease. Bordetella bronchiseptica causes disease primarily in dogs and other animals, known colloquially as "kennel cough", though it can rarely infect humans. These other non-pertussis Bordetella species can sometimes be misidentified as B. pertussis, or misidentified as each other, due to cross reactivity between genetic targets commonly used in NAATs. With the exception of B. bronchiseptica, the other species do not grow in routine cultures. This lab-developed multiplex real-time PCR assay uses the UC-TIB-Bordetella kit on the Roche cobas 8800 platform to qualitatively detect and differentiate Bordetella pertussis, parapertussis, holmesii, and bronchiseptica DNA in nasopharyngeal swabs from patients with signs and symptoms of respiratory tract infection. After nucleic acid extraction, the assay uses real-time PCR to amplify genes hIS1001 from B. holmesii, IS481 from B. pertussis/holmesii, pIS1001 from B. parapertussis (also present in some B. bronchiseptica), and bfrA from B. bronchiseptica. The additional hIS1001 and bfrA targets allow the assay to accurately distinguish B. holmesii from B. pertussis, and B. bronchiseptica from B. parapertussis. The targets IS481, hIS1001 and pIS1001 are multi-copy genes supporting a higher sensitivity compared to the bfrA gene. <i>(continued on page 8)</i>	11/17/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Bordetella species (including pertussis) PCR, Nasopharyngeal Swab <i>(Continued from page 7)</i>	BORAMP	Stability: Refrigerated: 7 days Frozen: 30 days Methodology: Reference Range: Bordetella pertussis DNA: Not detected Bordetella parapertussis DNA: Not detected Bordetella holmesii DNA: Not detected Bordetella bronchiseptica DNA: Not detected CPT: 87801x1	11/17/26
DHEA	DHEA	Specimen Requirement: 1 mL Serum from an SST (Gold) tube; Minimum: 0.3 mL; Container Sharing: No; Transport Temperature: Refrigerated; Collect between 6–10a.m. Separate serum from cells ASAP or within 2 hours of collection. Transfer serum to standard aliquot tube. *OR* 1 mL Plasma from a Lithium heparin PST (LT. Green); Minimum: 0.3 mL; Container Sharing: No; Transport Temperature: Refrigerated; Collect between 6–10 a.m. Separate plasma from cells ASAP or within 2 hours of collection. Transfer plasma to standard aliquot tube. *OR* 1 mL Plasma from a Sodium heparin PST (LT. Green); Minimum: 0.3 mL; Container Sharing: No; Transport Temperature: Refrigerated; Collect between 6–10 a.m. Separate plasma from cells ASAP or within 2 hours of collection. Transfer plasma to standard aliquot tube. *OR* 1 mL Plasma from an EDTA (Lavender); Minimum: 0.3 mL; Container Sharing: No; Transport Temperature: Refrigerated; Collect between 6–10a.m. Separate serum from cells ASAP or within 2 hours of collection. Transfer serum to standard aliquot tube.	10/15/26
Folate, Serum	SERFOL	Special Information: Specimen collection should occur preferably from patients fasting for at least 8 hours and at minimum 8 hours after administration of multivitamins or dietary supplements, especially containing biotin (Vitamin B7). Note: Hemolysis may significantly increase folate values due to high concentrations of folate in red blood cells. Therefore, hemolyzed samples are not suitable for use in this assay. Hemolyzed specimens will be rejected. Patients taking a biotin dose of up to 5 mg/day should refrain from taking biotin for 4 hours prior to sample collection. Patients taking a biotin dose of 5 to 10 mg/day should refrain from taking biotin for 8 hours prior to sample collection. Patients taking a biotin dose > 10 mg/day should consult with their physician or the laboratory prior to having a sample taken. Clinicians should consider biotin interference as a source of error, when clinically suspicious of the laboratory result.	effective immediately
Leukotriene E4, Urine 24 Hour	ULTE4	Stability: Ambient: 8 hours Refrigerated: 72 hours Frozen: 28 days Days Performed: Mon, Tue, Thu Reported: 3–10 days	9/22/26
Myelopathy, Autoimmune/ Paraneoplastic Evaluation, Serum	MLPTHY	Includes: Amphiphysin Ab, S AGNA-1, S ANNA-1, S ANNA-2, S ANNA-3, S AP3B2 IFA, S CRMP -5-IgG, S DPPX Ab CBA, S GABA-B-R Ab CBA, S GAD65 Ab Assay, S mGluR1 Ab IFA, S MOG FACS, S Neurochondrin IFA, S NMO/AQP4 FACS, S PCA-1, S PCA-2, S Septin-7 IFA, S TRIM46 Ab IFA, S <i>(continued on page 9)</i>	10/13/26

Test Changes (Cont.)

Test Name	Order Code	Change	Effective Date
Myelopathy, Autoimmune/Paraneoplastic Evaluation, Serum (Continued from page 8)	MLPTHY	Reference Range: Amphiphysin Ab: Negative Anti-Glial Nuclear Ab, Type 1: Negative Antineuronal Nuclear Ab-Type 1 (ANNA-1): Negative Antineuronal Nuclear Ab-Type 2 (ANNA-2): Negative Antineuronal Nuclear Ab-Type 3 (ANNA-3): Negative AP3B2 IFA, S: Negative DPPX Ab CBA, Serum: Negative GABA-B-Receptor Ab CBA: Negative GAD65 Antibody: Negative mGluR1 Ab IFA, S: Negative MOG FACS, S: Negative Neurochondrin IFA, S: Negative NMO Aquaporin 4 IgG: Negative Purkinje Cell Cytoplasmic Ab-Type 1 (PCA-1): Negative Purkinje Cell Cytoplasmic Ab-Type 2 (PCA-2): Negative Septin-7 IFA, S: Negative TRIM46 Ab IFA, S: Negative Autoimmune Myelopathy Interp, S: Refer to report CRMP-5-IgG, S: Negative CPT: 86341x1; 86255x15; 86053x1; 86363x1 Reflexed Test(s): Adaptor Protein 3 Beta2 (AP3B2) Antibody, Cell-Binding Assay, Serum (Reflex Only) Adaptor Protein 3 Beta2 (AP3B2) Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) AGNA-1 Immunoblot, Serum (Reflex Only) Alpha Internexin CBA, S (Reflex Only) Amphiphysin Antibody Titer Assay, Serum (Reflex Only) Amphiphysin Immunoblot, Serum (Reflex Only) ANNA-1 Immunoblot, Serum (Reflex Only) ANNA-2 Immunoblot, Serum (Reflex Only) Anti-Glial/Neuronal Nuclear Antibody-Type 1 (AGNA-1) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody Type 2 (ANNA-2) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody Type 3 (ANNA-3) Titer, Serum (Reflex Only) Antineuronal Nuclear Antibody-Type 1 (ANNA-1) Titer, Serum (Reflex Only) Collapsin Response-Mediator Protein-5 (CRMP-5) Neuronal IgG Titer, Serum (Reflex Only) CRMP-5 Western Blot (Reflex Only) DPPX Ab IFA Titer, Serum (Reflex Only) GABA-B-Receptor Antibody, IFA Titer GFAP CBA, S (Reflex only) GFAP IFA Titer, S (Reflex only) mGluR1 Ab CBA, Serum (Reflex Only) mGluR1 Ab IFA Titer, Serum (Reflex Only) MOG FACS Titer, S (Reflex Only) Neurochondrin Antibody, Cell-Binding Assay, Serum (Reflex Only) Neurochondrin Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) NMO/AQP4 FACS Titer, S (Reflex Only) PCA-1 Immunoblot, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 1 (PCA-1) Titer, Serum (Reflex Only) Purkinje Cell Cytoplasmic Antibody Type 2 (PCA-2) Titer, Serum (Reflex Only) Septin-7 Antibody, Cell-Binding Assay, Serum (Reflex Only) Septin-7 Antibody, Tissue Immunofluorescence Titer, Serum (Reflex Only) TRIM46 Ab CBA, S (Reflex only) TRIM46 Ab IFA Titer, S (Reflex only) MAP1B Immunoblot, S (Reflex only)	10/13/26
Synthetic Cannabinoid Metabolites - Expanded, Urine (Qualitative)	K2	Specimen Requirements: 2 mL Urine, random in a Clean Container (No preservatives); Minimum: 0.7 mL; Container Sharing: No; Transport Temperature: Refrigerated; Collect in a plastic container. Stability: Ambient: 30 days Refrigerated: 30 days Frozen: 30 days	11/3/26

Discontinued Tests

Test Name	Order Code	Test Information	Effective Date
Baclofen	BACLOF	Test will no longer be orderable. Recommended replacement is Serum/Plasma Qualitative Drug Detection Panel by LC-MS/MS (SPDRG)	effective immediately
Flunitrazepam, Serum	FLUNS	Test will no longer be orderable. Recommended replacement is Serum/Plasma Qualitative Drug Detection Panel by LC-MS/MS (SPDRG)	effective immediately
Ketamine and Metabolite, Serum/Plasma	KETMIN	Test will no longer be orderable. Recommended replacement is Serum/Plasma Qualitative Drug Detection Panel by LC-MS/MS (SPDRG)	effective immediately
Midazolam	MIDA	Test will no longer be orderable. Recommended replacement is Serum/Plasma Qualitative Drug Detection Panel by LC-MS/MS (SPDRG)	effective immediately
Oxycodone and Metabolite, Serum	OXYC	Test will no longer be orderable. Recommended replacement is Serum/Plasma Qualitative Drug Detection Panel by LC-MS/MS (SPDRG)	effective immediately