Laboratory Update

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Business Unit: Quest Diagnostics Nichols Institute, Valencia

September 2011 Update

Dear Colleague,

This letter represents the first under my signature as the Medical Director of the Quest Diagnostics Nichols Institute of Valencia. In the role of Medical Director, I am responsible for overall quality at the Valencia facility. In addition, I serve as technical expert for the development, implementation and monitoring of testing procedures, as well as for all results interpretation.

I join the organization from the Weill Cornell Medical College in Qatar and The Hamad Medical Corporation Hospital in Doha, Qatar, where I served as an Associate Professor of Pathology and Laboratory Medicine and as Consultant for pathology and laboratory medicine, respectively. Prior to that, I held Attending and Consulting Pathologist positions with the Sentara network of hospitals in Virginia over a 10-year period. In addition, I have held academic positions at Eastern Virginia Medical School, MCP-Hahnemann School of Medicine and Weill Cornell Medical College in New York.

I received my medical degree from the Medical College of Georgia. My residency in internal medicine was at the University of Louisville Medical Center. My residency in anatomic and clinical pathology was at The New York Hospital – Cornell Medical Center, where I was also Chief Resident in Pathology. I earned my bachelor's degree in biology-chemistry at the University of Georgia and my bachelor's degree in history from Northwestern University.

I look forward to talking with many of you in the future and welcome your calls, whether they be technical, consultative or quality oriented.

The following pages provide information on upcoming changes to our laboratory testing menu. Several immediate changes recently introduced were sent by a separate communication, but they are included here for your convenience.

Thank you for choosing Quest Diagnostics Nichols Institute, Valencia and for your continued support. For additional information, you are invited to visit our Web site at *www.NicholsInstitute.com/Valencia* or to contact Client Relations at 800-421-4449.

Respectfully Yours,

Powers Peterson, M.D , FASCP, FCAP
Medical Director

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Page Number	Test Name	Test Code(s)	Performing Site	Test Code	Test Name	Specimen Requirements	Minimum Volume	Shipping Temperature	Stability	Units of Measure	Reference Range	Methodology	CPT Codes	Reject Criteria	Other (see listing)
6	Alcohol, Ethyl Serum	4102						X							X
6	Allergen-Seminal Fluid IgE	O70						X	X			X			X
7	Allergen-Sole IgE	RF337						X	X			X			X
7	Allergen-Virginia Live Oak IgE	RT218						X	X			X			X
8	Amiodarone	4147			X	X		X	X		X			X	X
8	Cardio CRP	1536			X	X			X					X	
9 - 10	Cardiolipin Antibodies (IgA, IgG, IgM)	3371				X	X	X	X	X	X	X			
11	Cortisol, Total	3128			X	X	X		X			X			X
11	C-Reactive Protein	1535			X				X			X			X
11	Creatine Kinase, Total	3976			X										X
6	DNase-B Antibody	2351				X			X		X				
12	Folate, Serum	3522			X		X					X		X	
12	FSH, Serum	3174			X		X	X			X	X			X
12	Gastrin	3176							X			X			X
13	Glutamic Acid Decarboxylase (GAD) Autoantibodies	1033					X	X	X					X	
13	Herpes Simplex Virus Type 1 & 2 IgG Abs (HerpeSelect®)	9446							X						X
13	HIV-1 RNA Quantitation [Real Time PCR]	7485A													X
15	HIV-1 RNA Quantitation [Real Time PCR] w/reflex HIV-1 GenotypR™ PLUS	7482A				X								X	X
14	HIV-1 RNA Quantitation [Real Time PCR] w/Serial Reporting	7485ASR				X			X						X
15	HPV DNA, High and Low Risk	1822													X
16	HPV DNA, High and Low Risk, Anal-Rectal	1822R													X
16	IgA	1506			X							X			
16	LD	3452			X				X						
16	Legionella pneumophila Total Antibodies, Pooled Serotypes 1-6	8246													X
16	LH, Serum	3198			X		X	X	X		X	X			X
6	Nuclear Matrix Proteins (NMP)	9620													X
17	PTH, Intact and Calcium	3943			X		X							X	X
17	Reticulin IgA Screen with Reflex to Titer	1162			X		X		X			X			
17	Rubella Antibody (IgM)	2475			X				X			X		X	X
18	SureSwab™, CT/NG, T. vaginalis	16492				X	X		X						X
19	T3, Total	3224		X							X	X			X
19	T4, Free	3228		X			X		X						X
20	TBG	3238		X			X		X	X					X
20	Testosterone, Total (Males), ICMA	3244		X			X								X
21	Thyroid Stimulating Immunoglobulins	1092					X	X				X		X	
21	Trichomonas vaginalis TMA	15509													X
21	Troponin I	3393		X		X	X		X						X
22	TSH, 3rd Generation	3250		X		X	X		X			X			X
22	Vitamin B12, Serum	3504		X			X					X		X	X

New Test Offerings

Cardiolipin Antibodies (IgG, IgM)			
Clinical Significance:	Cardiolipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjögren's syndrome.		
Effective Date	**August 29, 2011**		
Test Code:	**3375**		
CPT Code(s):	**86147x2**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Plasma-3.2% Sodium Citrate, Serum** **1.0 mL** **0.5 mL**	
Transport Temperature:	**Room Temperature**		
Specimen Stability:	**Room Temperature: 4 days** **Refrigerated: 7 days** **Frozen: 30 days**		
Set-Up/Analytic Time:	**Set-up: Sun, Tue-Sat; Report Available: 1-3 days**		
Reference Ranges:	**Cardiolipin (IgG)**	**Accompanies report**	**GPL U/mL**
	Cardiolipin (IgM)	**Accompanies report**	**MPL U/mL**
Methodology:	**Immunoassay**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	211380	**Cardiolipin (IgG)**	
	211381	**Cardiolipin (IgM)**	

Carisoprodol Screen		
Clinical Significance:	Carisoprodol is a muscle relaxant often used in the treatment of back pain. The drug has some potential for abuse. This test will aid the physician in monitoring therapeutic compliance.	
Effective Date	**October 10, 2011**	
Test Code:	**90488**	
CPT Code(s):	**80101**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Urine** **10.0 mL** **2.0 mL**
Rejection Criteria:	**Urine specimens with preservatives**	
Transport Temperature:	**Room Temperature**	
Specimen Stability:	**Room Temperature: 28 days** **Refrigerated: 28 days** **Frozen: 28 days**	
Set-Up/Analytic Time:	**Set-up: Tue, Fri; Report Available: 3-4 days**	
Reference Ranges:	**Carisoprodol Screen**	**Negative**
Methodology:	**Immunoassay**	
Always Message:	**This test(s) was performed using a kit that has not been cleared or approved by the FDA. The analytical performance characteristics of this test have been determined by Quest Diagnostics Nichols Institute, Valencia, CA. This test should not be used for diagnosis without confirmation by other medically established means.**	
Performing Site:	**Quest Diagnostics Nichols Institute, Valencia**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	86007858	**Carisoprodol**

Chromium, Blood ***This test is not approved for the testing of patient samples from New York State – see Test S52523N****			
Clinical Significance:	This assay is useful to: 1. Monitor exposure to chromium. 2. Monitor progress of medical treatment. 3. Determine nutritional status		
Effective Date	**October 10, 2011**		
Test Code:	**6085**		
CPT Code(s):	**82495**		
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions:	**Whole Blood – EDTA, Royal Blue Top Tube** **4.0 mL** **2.0 mL** **Patient should refrain from taking mineral supplements and multi-vitamin three days prior to specimen collection.** **To avoid contamination, use powderless gloves. Do Not Aliquot Specimen. Draw one vacutainer of blood (1-2 mL) and discard. Draw second vacutainer (2-4 mL in royal blue top tube, EDTA) for submission.**	
Rejection Criteria:	**Moderate hemolysis, gross lipemia, clotted specimen**		
Transport Temperature:	**Refrigerated**		
Specimen Stability:	**Room Temperature: 48 hours** **Refrigerated: 7 days** **Frozen: Unacceptable**		
Set-Up/Analytic Time:	**Set-up: Tue, Thurs, Sat; Report Available: 2-3 days**		
Reference Ranges:		**Less than 1.3 mcg/L**	
Methodology:	**Inductively Coupled Plasma - Mass Spectrometry**		
Performing Site:	**Quest Diagnostics Nichols Institute, Valencia**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	86007157	**Chromium, Blood**	

Lacosamide, LC/MS/MS			
Clinical Significance:	Lacosamide is an antiepileptic medication. Monitoring the serum concentration is beneficial to ensure compliance with drug therapy.		
Effective Date:	**October 10, 2011**		
Test Code:	**16262**		
CPT Code(s):	**83788**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum, Plasma Heparin, Plasma EDTA** **2 mL** **1 mL**	
Rejection Criteria:	**Serum separator tubes are not acceptable.**		
Transport Temperature:	**Room temperature**		
Specimen Stability:	**Room Temperature: 7 days** **Refrigerated: 14 days** **Frozen: 30 days**		
Set-Up/Analytic Time:	**Set-up: Tue, Thu, Sat; Report Available: 2-3 days**		
Reference Ranges:	**Lacosamide**	**Accompanies report**	**mcg/mL**
Methodology:	**LC/MS/MS**		
Always Message:	**Expected concentrations of lacosamide in patients receiving recommended daily dosages: Up to 15.0 mcg/mL.** **Toxic range not established.**		
Performing Site:	**Quest Diagnostics Nichols Institute, Valencia**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	86007859	**Lacosamide**	

Test Changes

The following test changes will be effective on the dates indicated below. Please note that only the information that is changing appears in this update. *Former test codes and test names have been italicized.*

DNase-B Antibody		
Effective Date:	**Immediate**	
Test Code:	2351	
Specimen Stability:	Room temperature: 48 hours Refrigerated: 8 days Frozen: 90 days	
Reference Range:	< 5 yrs: 5-17 yrs: Adults (> or = 18 yrs):	< or = 250 U/mL < or = 375 U/mL < or = 300 U/mL

Nuclear Matrix Proteins (NMP)		
Effective Date:	**Immediate**	
Test Code:	9620	
Specimen Requirements:	Collection Instructions	Add: 1.Test should not be performed on persons with total cystectomy. 2.Urine sample should be collected at least 5 days after invasive procedures such as cystoscopy or catherization.

Alcohol, Ethyl Serum		
Effective Date:	**September 27, 2011**	
Test Code:	4102	
Specimen Requirements:	Collection Instructions	Serum separator tubes (SST®) should not be used for this test.
Transport Temperature:	Refrigerated	

Allergen-Seminal Fluid IgE		
Clinical Significance:	This procedure is based on a fluorescent enzyme immunoassay (FEIA) technique. The allergen of interest, covalently coupled to an ImmunoCap, reacts with the specific IgE in the patients serum. After washing away nonspecific IgE, enzyme-labelled antibodies against IgE are added to form a complex. After incubation, unbound enzyme anti-IgE is washed away and the bound complex is then incubated with a developing agent. After the reaction is stopped, the fluorescence of the eluate is measured. The higher the fluorescence value, the more specific IgE is present in the specimen. To classify test results, fluorescence for patient samples is compared directly with fluorescence for a reference serum run in parallel.	
Effective Date:	**September 27, 2011**	
Test Code:	O70	
Specimen Requirements:	Collection Instructions	Centrifuge and transfer serum specimens to clean, plastic, screw-capped vial(s).
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 2 Weeks Refrigerated: 2 Weeks Frozen: 1 Month (-20c)	
Methodology:	Immunoassay	

Allergen-Sole IgE		
Clinical Significance:	This procedure is based on a fluorescent enzyme immunoassay (FEIA) technique. The allergen of interest, covalently coupled to an ImmunoCap, reacts with the specific IgE in the patients serum. After washing away nonspecific IgE, enzyme-labelled antibodies against IgE are added to form a complex. After incubation, unbound enzyme anti-IgE is washed away and the bound complex is then incubated with a developing agent. After the reaction is stopped, the fluorescence of the eluate is measured. The higher the fluorescence value, the more specific IgE is present in the specimen. To classify test results, fluorescence for patient samples is compared directly with fluorescence for a reference serum run in parallel. In patients suffering from extrinsic asthma, hay fever, or atopic eczema, symptoms develop immediately after exposure to specific allergens. This immediate (atopic or anaphylactic) type of allergy is a function of a special type of serum antibody which belongs to the IgE class of Immunoglobulins.	
Effective Date:	**September 27, 2011**	
Test Code:	RF337	
Specimen Requirements:	Collection Instructions	Centrifuge and transfer serum specimens to clean, plastic, screw-capped vial(s).
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 2 Weeks Refrigerated: 2 Weeks Frozen: 1 Month (-20c)	
Methodology:	Immunoassay	

Allergen-Virginia Live Oak IgE		
Clinical Significance:	This procedure is based on a fluorescent enzyme immunoassay (FEIA) technique. The allergen of interest, covalently coupled to an ImmunoCap, reacts with the specific IgE in the patients serum. After washing away nonspecific IgE, enzyme-labelled antibodies against IgE are added to form a complex. After incubation, unbound enzyme anti-IgE is washed away and the bound complex is then incubated with a developing agent. After the reaction is stopped, the fluorescence of the eluate is measured. The higher the fluorescence value, the more specific IgE is present in the specimen. To classify test results, fluorescence for patient samples is compared directly with fluorescence for a reference serum run in parallel.	
Effective Date:	**September 27, 2011**	
Test Code:	RT218	
Specimen Requirements:	Collection Instructions	Centrifuge and transfer serum specimens to clean, plastic, screw-capped vial(s).
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 2 Weeks Refrigerated: 2 Weeks Frozen: 1 Month (-20c)	
Methodology:	Immunoassay	

Amiodarone		
Clinical Significance:	Anti-arrhythmic drug monitoring. Amiodarone peak concentrations are reached in 3-7 hours following oral administration. Half-life of amiodarone is 26-107 days and shows a biphasic elimination pattern. Elimination half-life of desethylamiodarone is about 61 days.	
Effective Date:	**September 27, 2011**	
Test Code:	4147	
Former Test Name:	*Amiodarone and Metabolites*	
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions	Serum or Plasma (EDTA or Heparin) 3.0 mL 1.0 mL Centrifuge and immediately separate serum or plasma specimens from the cells into clean, plastic, screw-capped vial(s).
Rejection Criteria:	Hemolysis, Lipemia, or Serum Separator	
Transport Temperature:	Refrigerated	
Specimen Stability:	Room Temperature: 2 Days Refrigerated: 4 Days Frozen: 1 Month	
Set-Up/Analytic Time:	Set Up: Tuesday, Thursday, Saturday; Report Available: 2 days	
Reference Ranges:	Amiodarone: Desethylamiodarone:	1.2 – 2.5 mcg/mL 1.2 – 2.5 mcg/mL Toxic: > 2.5 mcg/mL Toxic effects have been observed at levels as low as 2.0 mcg/mL.

Cardio CRP		
Effective Date:	**September 27, 2011**	
Test Code:	1536	
Former Test Name:	*C-Reactive Protein (CRP) UltraQuant® (Cardiac Risk)*	
Specimen Requirements:	Type:	Alternate: Plasma Heparin
Rejection Criteria:	Marked hemolysis and lipemia	
Specimen Stability:	Room Temperature: 7 Days Refrigerated: 7 Days Frozen: 3 Months	
Additional Information:	Also affects: 1537	
CPU Interface Mapping:	11209	Cardio CRP

Cardiolipin Antibodies (IgA, IgG, IgM)			
Clinical Significance:	Cardiolipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjögren's syndrome.		
Effective Date:	**August 29, 2011**		
Test Code:	3371		
Specimen Requirements:	Type: Opt Volume: Min Volume:	Plasma-3.2% Sodium Citrate, Serum 1.0 mL 0.5 mL	
Transport Temperature:	Room temperature		
Specimen Stability:	Room Temperature: 4 days Refrigerated: 7 days Frozen: 30 days		
Set-Up/Analytic Time:	Set-up: Sun, Tue-Sat; Report Available: 1-3 days		
Reference Ranges:	Cardiolipin (IgA)	Accompanies report	APL U/mL
	Cardiolipin (IgG)	Accompanies report	GPL U/mL
	Cardiolipin (IgM)	Accompanies report	MPL U/mL
Methodology:	Immunoassay		
CPU Interface Mapping:	Result Code:	Result Name:	
	63622	Cardiolipin (IgA)	
	63602	Cardiolipin (IgG)	
	63612	Cardiolipin (IgM)	

Cardiolipin Antibodies (IgG)			
Clinical Significance:	Cardiolipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjögren's syndrome.		
Effective Date:	**August 29, 2011**		
Test Code:	3372		
Specimen Requirements:	Type: Opt Volume: Min Volume:	Plasma-3.2% Sodium Citrate, Serum 1.0 mL 0.5 mL	
Transport Temperature:	Room temperature		
Specimen Stability:	Room Temperature: 4 days Refrigerated: 7 days Frozen: 30 days		
Set-Up/Analytic Time:	Set-up: Sun, Tue-Sat; Report Available: 1-3 days		
Reference Ranges:	Cardiolipin (IgG)	Accompanies report	GPL U/mL
Methodology:	Immunoassay		
CPU Interface Mapping:	Result Code:	Result Name:	
	63601	Cardiolipin (IgG)	

Cardiolipin Antibodies (IgM)			
Clinical Significance:	Cardiolipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjögren's syndrome.		
Effective Date:	**August 29, 2011**		
Test Code:	3373		
Specimen Requirements:	Type: Opt Volume: Min Volume:	Plasma-3.2% Sodium Citrate, Serum 1.0 mL 0.5 mL	
Transport Temperature:	Room temperature		
Specimen Stability:	Room Temperature: 4 days Refrigerated: 7 days Frozen: 30 days		
Set-Up/Analytic Time:	Set-up: Sun, Tue-Sat; Report Available: 1-3 days		
Reference Ranges:	Cardiolipin (IgM)	Accompanies report	MPL U/mL
Methodology:	Immunoassay		
CPU Interface Mapping:	Result Code:	Result Name:	
	63611	Cardiolipin (IgM)	

Cardiolipin Antibodies (IgA)			
Clinical Significance:	Cardiolipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjögren's syndrome.		
Effective Date:	**August 29, 2011**		
Test Code:	3374		
Specimen Requirements:	Type: Opt Volume: Min Volume:	Plasma-3.2% Sodium Citrate, Serum 1.0 mL 0.5 mL	
Transport Temperature:	Room temperature		
Specimen Stability:	Room Temperature: 4 days Refrigerated: 7 days Frozen: 30 days		
Set-Up/Analytic Time:	Set-up: Sun, Tue-Sat; Report Available: 1-3 days		
Reference Ranges:	Cardiolipin (IgA)	Accompanies report	APL U/mL
Methodology:	Immunoassay		
CPU Interface Mapping:	Result Code:	Result Name:	
	63621	Cardiolipin (IgA)	

C-Reactive Protein		
Effective Date:	**September 27, 2011**	
Test Code:	1535	
Former Test Name:	*C-Reactive Protein (CRP) Inflammation*	
Specimen Requirements:	Collection Instructions	A fasting sample is preferred; however, no special patient preparation is necessary. Centrifuge within 1 hour of collection and transfer serum or plasma specimens to clean, plastic, screw- capped vial(s). Transport on refrigerant coolant.
Specimen Stability:	Room Temperature: 7 Days Refrigerated: 1 Month Frozen: 1 Year	
Methodology:	Immunoturbidimetric	

Cortisol, Total		
Effective Date:	**September 27, 2011**	
Test Code:	3128	
Former Test Name:	*Cortisol*	
Specimen Requirements:	Type: Opt Volume: Min Volume:	Plasma not accepted 1.0 mL 0.5 mL
Specimen Stability:	Room Temperature: 48 Hours Refrigerated: 7 Days Frozen: 28 Days	
Set-Up/Analytic Time:	Set Up: Mon-Fri; Report Available: 1-2 Days	
Methodology:	Immunoassay	
Always Message:	0-3 days Premature Infants (31-35 wks) < or = 15.0 mcg/dL Term Infants < or = 14.0 mcg/dL 4 days-1 month Reference range not established 1-11 months a.m 3.0-23.0 mcg/dL p.m. Reference range not established 1-17 years a.m. 3.0-25.0 mcg/dL p.m. 3.0-17.0 mcg/dL > 17 years 8 a.m. (7-9 a.m.) specimen 4.0-22.0 mcg/dL 4 p.m. (3-5 p.m.) specimen 3.0-17.0 mcg/dL	

Creatine Kinase, Total		
Effective Date:	**September 27, 2011**	
Test Code:	3976	
Former Test Name:	*Creatine Kinase (CK)*	
Specimen Requirements:	Collection Instructions	Centrifuge serum or plasma specimens within 1 hour of collection, transfer serum to a sterile, plastic, screw-capped vial(s). If CK and CK isoenzymes are ordered together, specimen must be submitted frozen.
Additional Information:	Also affects: 3851	

Folate, Serum		
Effective Date:	**September 27, 2011**	
Test Code:	3522	
Former Test Name:	*Folate*	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.5 mL
Rejection Criteria:	Hemolyzed Samples	
Specimen Stability:	Frozen: 21 Days	
Methodology:	Immunoassay	
Additional Information:	Also affects: 3020	

FSH, Serum		
Effective Date:	**September 27, 2011**	
Test Code:	3174	
Former Test Name:	*Follicle-Stimulating Hormone*	
Specimen Requirements:	Opt Volume: Min Volume: Collection Instructions	1.0 mL 0.5 mL Allow appropriate time for the specimen to clot (30 minutes). Centrifuge for 15 minutes. Pour the serum into an appropriately labeled plastic tube.
Transport Temperature:	Room Temperature	
Reference Ranges:		>17 years old male: 1.6-8.0 mIU/mL
Methodology:	Immunoassay	
Additional Information:	Also affects: 2020, 2016, 2023	
Always Message:	Add: FSH reference ranges established on post-pubertal patient population. Reference range not established for pre-pubertal patients using this assay. For pre-pubertal patients, the Quest Diagnostics Nichols Institute FSH, Pediatrics assay is recommended (Order Code 36087).	

Gastrin	
Effective Date:	**September 27, 2011**
Test Code:	3176
Specimen Stability:	Frozen: 28 Days
Methodology:	Immunoassay
Additional Information:	Also affects: REN
Always Message:	Adults, Males and Females: 100 pg/mL or less Pediatrics 5-17 years 13-64 pg/mL < 5 years Not established Note: Reference range applies to fasting specimens only.

Glutamic Acid Decarboxylase (GAD) Autoantibodies		
Clinical Significance:	Remove	
Effective Date:	**September 27, 2011**	
Test Code:	1033	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.2 mL
Rejection Criteria:	Hemolysis, Lipemia and reject due to thawing or any other rejections; room temperature.	
Transport Temperature:	Refrigerated or cold packs	
Specimen Stability:	Room Temperature: 8 Hours Refrigerated: 7 Days Frozen: 6 Months	

Herpes Simplex Virus Type 1 & 2 IgG Abs (HerpeSelect®)	
Clinical Significance:	Herpes Simplex Virus (HSV) is responsible for several clinically significant human viral diseases, with severity ranging from inapparent to fatal. Clinical manifestations include genital tract infections, neonatal herpes, meningoencephalitis, keratoconjunctivitis, and gingivostomatitis. There are two HSV serotypes that are closely related antigenically. HSV type 2 is more commonly associated with genital tract and neonatal infections, while HSV type 1 is more commonly associated with infections of non-genital sites. Specific typing is not usually required for diagnosis or treatment. The mean time to seroconversion using the type specific assay is 25 days. The performance of this assay has not been established for use in a pediatric population, for neonatal screening, or for testing of immunocompromised patients.
Effective Date:	**September 27, 2011**
Test Code:	9446
Specimen Stability:	Room Temperature: 4 Days Refrigerated: 7 Days Frozen: 30 Days
Additional Information:	Also affects: 9451, 9461, 8051
Always Message:	This assay is type specific and will differentiate between HSV-1 and HSV-2 infections. A single positive result only indicates previous immunologic exposure and the level of antibody response may not be used to determine active infection or disease stage. The test should be repeated in 4-6 weeks when negative or equivocal results are obtained in suspected early Herpes simplex disease. The performance of this assay has not been established for pediatric populations, for neonatal screening, or for the testing of immunocompromised patients.

HIV-1 RNA Quantitation [Real Time PCR]	
Clinical Significance:	Quantitates HIV-1 virus RNA down to 20 copies/mL to monitor viral load in established HIV-1 infected individuals. (Specimens with viral loads greater than 10,000,000 copies/mL will be reported out as >10,000,000 copies/mL). The assay provides an assessment of viral load prior to initiation of therapy, and may be helpful in early detection of potential therapeutic failure and/or disease progression. Additional testing may be useful in the assessment of antiviral therapeutic efficacy.
Effective Date:	**September 27, 2011**
Test Code:	7485A
Set-Up/Analytic Time:	Set Up: Sun-Sat; Report Available: 3 Days

HIV-1 RNA Quantitation [Real Time PCR] w/Serial Reporting		
Clinical Significance:	Quantitates HIV-1 virus RNA down to 20 copies/mL to monitor viral load in established HIV-1 infected individuals. (Specimens with viral loads greater than 10,000,000 copies/mL will be reported out as >10,000,000 copies/mL). The assay provides an assessment of viral load prior to initiation of therapy, and may be helpful in early detection of potential therapeutic failure and/or disease progression. Additional testing may be useful in the assessment of antiviral therapeutic efficacy.	
Effective Date:	**September 27, 2011**	
Test Code:	7485ASR	
Specimen Requirements:	Type:	Plasma ACD not acceptable
Specimen Stability:	Room Temperature: Plasma EDTA & Plasma PPT Tube: 24 Hours Refrigerated: Plasma EDTA & Plasma PPT Tube: 6 Days Frozen: Plasma EDTA & Plasma PPT Tube: 42 Days	
Set-Up/Analytic Time:	Set Up: Sun-Sat; Report Available: 3 Days	
Additional Information:	Replace with: For serial reporting, you must provide the patient's Social Security Number.	

HIV-1 RNA Quantitation [Real Time PCR] w/reflex HIV-1 GenotypR™ PLUS		
Clinical Significance:	Quantitates HIV-1 virus RNA down to 20 copies/mL to monitor viral load in established HIV-1 infected individuals. (Specimens with viral loads greater than 10,000,000 copies/mL will be reported out as >10,000,000 copies/mL). The assay provides an assessment of viral load prior to initiation of therapy, and may be helpful in early detection of potential therapeutic failure and/or disease progression. Additional testing may be useful in the assessment of antiviral therapeutic efficacy.	
Effective Date:	**September 27, 2011**	
Test Code:	7482A	
Specimen Requirements:	Type: Collection Instructions	Plasma ACD not acceptable Plasma PPT acceptable See "Guidelines for Shipping Infectious Substances". Plasma must be physically separated from cells in PPT collection tubes and will be considered EDTA plasma. This plasma MUST be processed and shipped as indicated below. Plasma EDTA: Plasma must be separated within 24 hours of collection to ensure accuracy. Frozen plasma collected in and separated from either K3 EDTA or PPT tubes is REQUIRED. Collect whole blood in two 5 mL PPT or K3 EDTA tubes (each yielding 2.5 mL plasma). Centrifuge at room temperature for 20 min at 800-1600 x g RCF within 24 hours of blood collection. DO NOT freeze plasma in original collection PPT tubes after centrifugation. Place separated plasma in 2 polypropylene tubes and ship frozen on dry ice by overnight courier. Unacceptable Specimens: 1. Specimens collected using heparin or ACD as the anticoagulant. 2. Leaking, uncapped, or broken containers. 3. Frozen plasma received in plasma preparation tubes (PPT) in situ. 4. Specimen with inadequate sample volume. 5. Samples shipped and received ambient or refrigerated.
Rejection Criteria:	See Collection Instructions	
Specimen Stability:	Room Temperature: Plasma EDTA & Plasma PPT Tube: Not acceptable Refrigerated: Plasma EDTA & Plasma PPT Tube: Not acceptable Frozen: Plasma EDTA & Plasma PPT Tube: 42 Days	
Additional Information:	Replace with: If viral load quantitation result is greater than or equal to 1000 copies/mL, a reflex to HIV-1 Genotype will be performed for an additional fee. Add CPT code 87901. Add up to 10 days to the turnaround time.	

HPV DNA, High and Low Risk	
Effective Date:	**September 27, 2011**
Test Code:	1822
Always Message:	Replace with: The analytical performance characteristics of this assay, when used to test SurePath or Vaginal specimens, or to test Low-Risk HPV types with the Rapid Capture System have been determined by Quest Diagnostics Nichols Institute, Valencia, CA. Methodology: Hybrid Capture with Signal Amplification.

HPV DNA, High and Low Risk, Anal-Rectal	
Effective Date:	**September 27, 2011**
Test Code:	1822R
Always Message:	Replace with: The performance characteristics of this assay have been determined by Quest Diagnostics Nichols Institute, Valencia, CA. Performance characteristics refer to the analytical performance of the test. Methodology: Hybrid Capture with Signal Amplification.

IgA	
Effective Date:	**September 27, 2011**
Test Code:	1506
Former Test Name:	*IgA, Total*
Methodology:	Immunoturbidimetric
Performing Site:	Quest Diagnostics Nichols Institute, Valencia
Additional Information:	Also affects: 1148, 1931, 1506, 1896, 1045, 1055, 1148P, 1075, 1149, 1149P, 1147, 1147P, RGX, RKA, RKH, RKX, RLQ

LD	
Effective Date:	**September 27, 2011**
Test Code:	3452
Former Test Name:	*Lactate Dehydrogenase*
Specimen Stability:	Room Temperature: Plasma: 14 Days

Legionella pneumophila Total Antibodies, Pooled Serotypes 1-6	
Effective Date:	**September 27, 2011**
Test Code:	8246
Always Message:	This test was performed with EIA method. Values obtained with different methods may not be used interchangeably. The magnitude of the measured result (ISR), above the cutoff, is not indicative of the total amount of antibody present and cannot be correlated to IFA titers.

LH, Serum		
Effective Date:	**September 27, 2011**	
Test Code:	3198	
Former Test Name:	*Luteinizing Hormone*	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.5 mL
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 7 Days Refrigerated: 7 Days Frozen: 28 Days	
Reference Ranges:		Male : 18-59 yrs 1.5-9.3mIU/ml >or =60yrs 1.6-15.2mIU/ml Female: Follicular Phase 1.9 -12.5mIU/ml Mid -Cycle Peak 8.7-76.3 mIU/ml Luteal Phase 0.5-16.9 mIU/ml Postmenopausal 10.0-54.7 mIU/ml
Methodology:	Immunoassay	
Additional Information:	Also affected: 2020, 2016, 2023	
Always Message:	Male and Female <18 yrs -LH reference ranges established on post-pubertal patient population .Reference range not established for pre-pubertal patients using this assay.For prebubertal patients, the Quest Diagnostics Nichols Institute LH, Pedriatrics assay is recommended (order code 36086).	

PTH, Intact and Calcium		
Effective Date:	**September 27, 2011**	
Test Code:	3943	
Former Test Name:	*PTH, Intact, Including Total Calcium*	
Specimen Requirements:	Opt Volume: Min Volume: Collection Instructions	2.0 mL 1.0 mL Spin to separate serum and transfer to plastic transport tube. Freeze immediately and submit to laboratory frozen. Do not submit glass tubes.
Rejection Criteria:	Gross hemolysis, gross lipemia, or icterus	

Reticulin IgA Screen with Reflex to Titer		
Effective Date:	**September 27, 2011**	
Test Code:	1162	
Former Test Name:	*Reticulin IgA Autoantibodies*	
CPT Code(s):	86255 If reflexed, add 86256 at an additional charge.	
Specimen Requirements:	Opt Volume: Min Volume: Collection Instructions	0.5 mL 0.1 mL Red top tube (no gel)
Specimen Stability:	Room Temperature: 5 days Refrigerated: 14 days Frozen: 1 Month	
Reference Ranges:	Reticulin Ab (IgA) Screen Reticulin Ab (IgA) Titer	Negative <1:10
Methodology:	Indirect Immunofluorescence Assay	
Additional Information:	Also affects: 1076, 1162, 1077, 1075	
CPU Interface Mapping:	211382	Reticulin Ab (IgA) Screen
	211383	Reticulin Ab (IgA) Titer

Rubella Antibody (IgM)		
Effective Date:	**September 27, 2011**	
Test Code:	2475	
Former Test Name:	*Rubella IgM Antibodies*	
Rejection Criteria:	Gross hemolysis or gross lipemia	
Specimen Stability:	Room Temperature: 4 Days Refrigerated: 7 Days Frozen: 30 Days	
Reference Ranges:		<0.90 Ratio
Methodology:	Immunoassay	
Performing Site:	Quest Diagnostics Nichols Institute, Valencia	
Additional Information:	Also affects: 9421, 9901, 2231	
Always Message:	<0.90 Negative 0.90-1.09 Equivocal >or= 1.10 Positive	

SureSwab™, CT/NG, T. vaginalis		
Effective Date:	**September 27, 2011**	
Test Code:	16492	
Specimen Requirements:	Type:	Vaginal (Aptima Vag Swab) Endocervical swab (Aptima Unisex Transport) Urine Urine (Aptima Urine Transport) PreservCyt (ThinPrep)
	Opt Volume:	Vaginal (Aptima Vag Swab) 3.0 mL Endocervical swab (Aptima Unisex Transport) 3.0 mL Urine 3.0 mL Urine (Aptima Urine Transport) 4.0 mL PreservCyt (ThinPrep) 2.0 mL
	Min Volume:	Vaginal (Aptima Vag Swab) 2.0 mL Endocervical swab (Aptima Unisex Transport) 2.0 mL Urine 2.0 mL Urine (Aptima Urine Transport) 2.0 mL PreservCyt (ThinPrep) 1.0 mL
	Collection Instructions:	Add the following: Endocervical swab specimens: Follow the instructions provided in the Aptima Unisex Swab Collection Kit. Remove excess mucus from the cervical os and surrounding mucosa using the cleaning swab (white shaft swab in the package with red printing). Discard this swab. Note: To remove excess mucus from the cervical os, a large-tipped swab (not provided) may be used. Insert the specimen collection swab (blue shaft swab in the package with the green printing) into the endocervical canal. Gently rotate the swab clockwise for 10 to 30 seconds in the endocervical canal to ensure adequate sampling. Withdraw the swab carefully; avoid any contact with the vaginal mucosa. Remove the cap from the swab specimen transport tube and immediately place the specimen collection swab into the transport tube. Carefully break the swab shaft against the side of the tube at the scoreline and discard the top portion of the swab shaft; use care to avoid splashing of contents. Re-cap the swab specimen transport tube tightly. Urine (unprocessed): ship ambient or refrigerated to arrive within 24 hours of collection. Do not ship frozen (see below for proper collection). Urine (processed): The patient should not have urinated for at least 1 hour prior to specimen collection. Direct patient to provide a first-catch urine (approximately 20 mL to 30 mL of the initial urine stream) into a urine collection cup free of any preservatives. Collection of larger volumes of urine may result in rRNA target dilution that may reduce test sensitivity. Female patients should not cleanse the labial area prior to providing the specimen. Remove the cap and transfer 2 mL of urine into the urine specimen transport tube using a disposable pipette. The

		correct volume of urine has been added when the fluid level is between the black fill lines on the urine specimen transport tube label. Re-cap the urine specimen transport tube tightly. This is now known as the processed urine specimen. Sample may be shipped ambient, refrigerated, or frozen. PreservCyt (ThinPrep): Place 2 mL of solution in sterile screw capped vial and ship ambient or refrigerated.
Specimen Stability:	Room Temperature: Vaginal (Aptima Vag Swab) 60 Days Endocervical swab (Aptima Unisex Transport) 60 Days Urine 24 Hours Urine (Aptima Urine Transport) 30 Days PreservCyt (ThinPrep) 30 Days Refrigerated: Vaginal (Aptima Vag Swab) 60 Days Endocervical swab (Aptima Unisex Transport) 60 Days Urine 24 Hours Urine (Aptima Urine Transport) 30 Days PreservCyt (ThinPrep) 30 Days Frozen: Vaginal (Aptima Vag Swab) 90 Days Endocervical swab (Aptima Unisex Transport) 90 Days Urine Unacceptable Urine (Aptima Urine Transport) 90 Days PreservCyt (ThinPrep) Unacceptable	

T3, Total	
Effective Date:	**September 27, 2011**
Test Code:	3224
Former Test Name:	*Triiodothyronine (T3)*
Specimen Stability:	Room Temperature: 7 Days Refrigerated: 7 Days Frozen: 28 Days
Additional Information:	Also affects: 3072, 3225
Always Message:	< 4 years Reference Range Not Established 4 - 9 years 104 - 190 ng/dL 10 - 13 years 94 - 213 ng/dL 14 - 17 years 84 - 179 ng/dL > or = 18 years 76 - 181 ng/dL

T4, Free		
Effective Date:	**September 27, 2011**	
Test Code:	3228	
Former Test Name:	*Thyroxine, (T4), Free*	
Specimen Requirements:	Opt Volume: Min Volume: Collection Instructions	1.0 mL 0.3 mL Add: Ensure that complete clot formation has taken place before centrifugation. Keep tubes stoppered and upright at all times. Centrifuge within 8 hours of collection. Transfer serum to clean, plastic, screw-capped vial(s).
Specimen Stability:	Frozen: 28 Days	
Additional Information:	Also affected: 3072, 3074	

TBG		
Effective Date:	**September 27, 2011**	
Test Code:	3238	
Former Test Name:	*Thyroxine Binding Globulin*	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.5 mL
Specimen Stability:	Frozen: 28 Days	
Set-Up/Analytic Time:	Set Up: Mon-Fri; Report Available: 1-3 Days	
Reference Ranges:		mcg/mL
Always Message:	Adults Females: 13.5-30.9 Males: 12.7-25.1 Pediatric Ranges Age mcg/mL 4-6 years: 14.8-32.9 7-8 years: 16.3-30.7 9-10 years: 15.8-27.4 11 years: 15.5-27.4 12 years: 14.8-26.2 13 years: 13.8-25.2 14 years: 12.2-25.2 15 years: 10.8-23.8 16 years: 10.0-23.8 17 years: 8.5-23.1 Tanner Females Males Stages mcg/mL mcg/mL Stage I: 14.2-28.5 13.5-28.4 Stage II: 15.0-23.1 15.1-25.9 Stage III: 13.7-23.0 4.0-26.3 Stage IV: 12.0-22.8 13.2-25.0 Stage V: 9.1-22.8 12.2-23.7 to convert to nmol/L, multiply the result by 18.5	

Testosterone, Total (Males), ICMA		
Clinical Significance:	Testosterone circulates almost entirely bound to transport proteins; normally less than 1% is free. The principal transport protein for testosterone is known as sex hormone binding globulin (SHBG) or testosterone-estradiol binding globulin (TeBG). Testosterone measurements are used to assess erectile dysfunction, infertillity, gynecomastia, and osteoporosis and to assess hormone replacement therapy.	
Effective Date:	**September 27, 2011**	
Test Code:	3244	
Former Test Name:	*Testosterone, Total*	
Specimen Requirements:	Opt Volume: Min Volume: Collection Instructions	1.0 mL 0.5 mL Red top, no gel preferred.
Always Message:	In hypogonadal males, Testosterone, Total, LC/MS/MS is the recommended assay. This test code (3921) must be collected in a red-top tube with no gel. The Endocrine Society recommends obtaining at least two morning (8-10am) samples on different days when screening for hypogonadism. Aging men with clinically significant hypogonadal symptoms and testosterone values repeatedly in the range of 200-300 ng/dL or less may benefit from testosterone treatment after adequate risk and benefits counseling.	

Thyroid Stimulating Immunoglobulins		
Clinical Significance:	Remove	
Effective Date:	**September 27, 2011**	
Test Code:	1092	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.2 mL
Rejection Criteria:	Grossly hemolyzed, grossly lipemia, reject due to thawing or any other rejections; Sodium Heparin (green TOP) tube, Received room temperature, grossly icteric.	
Transport Temperature:	Refrigerated or cold packs	
Methodology:	Immunoassay	

Trichomonas vaginalis TMA	
Test Code:	15509
Additional Information:	FDA-approved Also affects 16492, 19550, 17333

Troponin I		
Effective Date:	**September 27, 2011**	
Test Code:	3393	
Former Test Name:	*Troponin I-Ultra*	
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions	Add: Plasma heparin, Plasma EDTA 1.0 mL 0.5 mL Remove serum from cells and freeze as soon as possible. Minimize exposure to room temperature. Avoid repeated freeze/thaw cycles.
Specimen Stability:	Refrigerated: Not acceptable	
Additional Information:	Also affects: 3390	
Always Message:	In accord with published recommendations, serial testing of Troponin I at intervals of 2 to 4 hours for up to 12 to 24 hours is suggested in order to corroborate a single Troponin I result. An elevated Troponin alone is not sufficient to make the diagnosis of MI.	

TSH, 3rd Generation		
Effective Date:	**September 27, 2011**	
Test Code:	3250	
Former Test Name:	*Thyroid Stimulating Hormone, 3rd Generation*	
Specimen Requirements:	Type: Opt Volume: Min Volume:	Add: Heparinized plasma 1.0 mL 0.7 mL
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: Serum: 7 Days Plasma: 3 Days Refrigerated: Serum: 7 Days Plasma: 7 Days Frozen: Serum: 28 Days Plasma: 28 Days	
Reference Ranges:		mIU/L
Methodology:	Immunoassay	
Additional Information:	Also affects: 2016, 3060, 3072, 1091, 1090, 3074, 3250SR TSH levels decline rapidly during the first week of life in most children, but may remain transiently elevated in a few individuals despite normal free T4 levels. For proper interpretation of an abnormal TSH from a newborn thyroid screen, a free (or total) T4 is usually required.	
Always Message:	Premature Infants (28-36 Weeks) 1st Week of Life 0.20-27.90 mIU/L Term Infants (>37 Weeks) Serum or Cord Blood 1.00-39.00 mIU/L ≤4 Days 3.20-35.00 mIU/L 5-6 Days Not established 1-4 Weeks 1.70-9.10 mIU/L 1-11 Months 0.80-8.20 mIU/L 1-19 Years 0.50-4.30 mIU/L ≥20 Years 0.40-4.50 mIU/L Pregnancy First Trimester 0.20-4.70 mIU/L Second Trimester 0.30-4.10 mIU/L Third Trimester 0.40-2.70 mIU/L	

Vitamin B12, Serum		
Effective Date:	**September 27, 2011**	
Test Code:	3504	
Former Test Name:	*Vitamin B12*	
Specimen Requirements:	Opt Volume: Min Volume:	1.0 mL 0.3 mL
Rejection Criteria:	Hemolyzed Samples	
Specimen Stability:	Frozen: 28 Days	
Methodology:	Immunoassay	
Additional Information:	Also affects: 3020 Although the reference range for Vitamin B12 is 200-1100 pg/mL, it has been reported that between 5% and 10% of patients with values between 200 and 400 pg/mL may experience neuropsychiatric and hematologic abnormalities, due to occult B12 deficiency; less than 1% of patients with values above 400 pg/mL will have symptoms.	
Always Message:	> 17 years: 200-1100 pg/mL Pediatric Ranges *< 5 years: Not established 5-9 years: 250-1205 pg/mL 10-17 years: 260-935 pg/mL	

Test Discontinuations

Lymphocyte Enumeration, Helper/Inducer	
Effective Date:	**September 1, 2011**
Test Code:	**1656**
Additional Information:	Suggested Alternate: 83608- Lymphocyte Subset Panel 5 Also Affects: 1656SR
Performing Site:	**Quest Diagnostics Nichols Institute, Valencia**

PTH, C Terminal & Intact, Incl Ionized & Total Calcium	
Effective Date:	**September 1, 2011**
Test Code:	**3213**
Additional Information:	Suggested Alternatives: 3941-PTH, Intact or 3944-PTH, Intact, Including Ionized & Total Calcium Performed at Quest Diagnostics Nichols Institute, Valencia

PTH, C Terminal, Including Ionized & Total Calcium	
Effective Date:	**September 1, 2011**
Test Code:	**3208**
Additional Information:	Suggested Alternatives: 3941-PTH, Intact or 3944-PTH, Intact, Including Ionized & Total Calcium Performed at Quest Diagnostics Nichols Institute, Valencia

PTH, C Terminal, Including Total Calcium	
Effective Date:	**September 1, 2011**
Test Code:	**3945**
Additional Information:	Suggested Alternatives: 3941-PTH, Intact or 3943-PTH, Intact, Including Total Calcium Performed at Quest Diagnostics Nichols Institute, Valencia

New York Patient Testing Update

The following test performed at Quest Diagnostics Nichols Institute, Valencia is **now available** for New York patient testing.

- **Test Code: 16984 - ColoVantage™ (methylated Septin 9)**

New Referral Tests

Anaplasma Phagocytophilum DNA, Qualitative Real-Time PCR (47600) **This test is not approved for the testing of patient samples from New York State.*			
Clinical Significance:	The real-time PCR assay is a highly sensitive and specific method to detect *Anaplasma phagocytophilum*, the agent responsible for Human Granulocytic Anaplasmosis (HGA) in whole blood or ticks.		
Effective Date	**Immediate**		
Test Code:	**S52502**		
CPT Code(s):	**87798**		
Specimen Requirements:	Type: Opt Volume: Min Volume: or	**Whole blood-EDTA, ACD or Tick** **0.7 mL** **0.3 mL** **1 tick**	
Transport Temperature:	**Refrigerated**		
Specimen Stability:	**Room Temperature: 2 days** **Refrigerated: 7 days** **Frozen:** **Whole blood: Unacceptable Tick: 30 days**		
Set-Up/Analytic Time:	**Set-up: Mon-Sat; Report Available: 2-3 days**		
Reference Ranges:	**Anaplasma Phagocytophilum DNA**	**Not Detected**	

Methodology:	**Real-Time PCR**	
Always Message:	**This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test. This test is performed pursuant to a licence agreement with Roche Molecular Systems, Inc.**	
Performing Site:	**Focus Diagnostics**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113491	**Anaplasma Phagocytophilum DNA**

Antimicrobial Combination Testing, Synergy (3 Drugs) (5240)			
Clinical Significance:	Antimicrobial combination therapy may help to expand the spectrum of coverage, minimize drug toxicity, minimize development of resistance, and may lead to antimicrobial combination synergy. This antimicrobial combination assay measures the activity of three antibacterial agents alone (A, B, and C) and in combination with each other (A+B, A+C, and B+C) to determine if synergy is present. A Fractional Inhibitory Concentration (FIC) index is obtained based on the activity of each drug in the presence of the other drug and interpretations of Synergy, Additive, Indifference, or Antagonism are reported. Antibacterial agents listed in the chart are available for combination testing.		
Effective Date	**Immediate**		
Test Code:	**S52503**		
CPT Code(s):	**87181x9**		
Specimen Requirements:	Type: Collection Instructions:	**Pure isolate, slant or transport swab** **The identification of the isolate and the three drugs to be tested are required. Missing information may cause testing delays.** **Specimen viability decreases during transit. Send specimen to testing lab for viability determination. DO NOT REJECT**	
Transport Temperature:	**Room Temperature**		
Specimen Stability:	**Room Temperature: 72 hours** **Refrigerated: 72 hours** **Frozen: Unacceptable**		
Set-Up/Analytic Time:	**Set-up: Sun-Sat; Report Available: 4-7 days**		
Reference Ranges:	**Antimicrobial Combination A+B** **Antimicrobial Combination A+C** **Antimicrobial Combination B+C**	**Accompanies report** **Accompanies report** **Accompanies report**	**mcg/mL** **mcg/mL** **mcg/mL**
Methodology:	**Antibiotic Gradient**		
Always Message:	**Interpretations of drug combinations (ex: A+B and B+A) are based on the calculated Fractional Inhibitory Concentration (FIC) index that measures the in vitro activity of each primary drug in the presecne of each secondary drug. The FIC index is a value obtained from results of both antimicrobial combinations with:** **1) An FIC of < or = 0.5 are reported as:** **"Synergy Detected" indicating the drug combination is significantly more active than each individual drug alone.** **2) An FIC of >0.5 to < or = 1.0 is reported as "Additive" where there is minimal increased activity, not significantly more than the two drugs alone.** **3) An FIC of >1.0 to < or = 4.0 is reported as "Indifference" where there is no increased activity of the combinations.** **4) An FIC of >4.0 is reported as "Antagonism detected" indicating drugs actually may work against each other in combination. For a result that indicates Antagonism, the combination therapy may be considered to be counter-indicated.**		

	If necessary, refer to an appropriate healthcare provded such as an Infectious Disease specialist. Results of in vitro antimicrobial combination testing have not been correlated with clinical efficacy at this time. **This test was developed and its performance characteristics have been determined by Focus Diagnostics. Performance characteristics refer to the analytical performance of the test.**	
Performing Site:	**Focus Diagnostics**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113492	**Antimicrobial Combination A+B**
	113493	**Antimicrobial Combination A+C**
	113494	**Antimicrobial Combination B+C**

Chromium, Blood (6085) (NY) ***This test code is for New York patient testing only***			
Clinical Significance:	The assay is useful to: 1. Monitor exposure to chromium 2. Monitor progress of medical treatment 3. Determine nutritional status		
Effective Date	**Immediate**		
Test Code:	**S52523N**		
CPT Code(s):	**82495**		
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions:	**Whole blood, EDTA trace metal (royal blue-top)** **4.0 mL** **2.0 mL** **To avoid contamination, use powderless gloves. Do not aliquot specimen. Draw one Vacutainer® of blood (1-2 mL) and discard. Draw second Vacutainer® (2-4 mL in an EDTA royal blue-top) for submission.**	
Rejection Criteria:	**Moderate hemolysis, gross lipemia, clotted specimen**		
Transport Temperature:	**Refrigerated**		
Specimen Stability:	**Room Temperature: 48 hours** **Refrigerated: 7 days** **Frozen: Unacceptable**		
Set-Up/Analytic Time:	**Set-up: Mon-Sat; Report Available: 3-4 days**		
Reference Ranges:	**Chromium, Blood**	**<1.3**	**Mcg/L**
Methodology:	**Inductively Coupled Plasma-Mass Spectrometry with Dynamic Reaction Cell**		
Additional Information:	**Patient should refrain from taking mineral supplements and multi-vitamin three days prior to specimen collection.**		
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113581	**Chromium, Blood**	

Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Blood (15777)		
Clinical Significance:	The diagnosis of Lyme disease is most often made by clinical examination combined with evidence of tick bite or exposure in endemic areas. Amplification of Borrelia genomic DNA from blood, fluids or tissues can support the diagnosis.	
Effective Date	**Immediate**	
Test Code:	**S52515**	
CPT Code(s):	**87801**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Whole blood-EDTA, ACD** **1.0 mL** **0.5 mL**
Transport Temperature:	**Refrigerated**	
Specimen Stability:	**Room Temperature: 48 hours** **Refrigerated: 7 days** **Frozen: Unacceptable**	
Set-Up/Analytic Time:	**Set-up:Sun-Sat ; Report Available: 1-3 days**	

Reference Ranges:	**Lyme Disease DNA Blood**		**Not Detected**
Methodology:	**Real-Time PCR**		
Performing Site:	**Focus Diagnostics**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113570	**Lyme Disease DNA Blood**	

Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Synovial Fluid/CSF (15564)			
Clinical Significance:	The diagnosis of Lyme disease is most often made by clinical examination combined with evidence of tick bite or exposure in endemic areas. Amplification of Borrelia genomic DNA from blood, fluids or tissues can support the diagnosis.		
Effective Date	**Immediate**		
Test Code:	**S52516**		
CPT Code(s):	**87801**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Synovial fluid, CSF** **1.0 mL** **0.5 mL**	
Transport Temperature:	**Refrigerated**		
Specimen Stability:	**Room Temperature: 48 hours** **Refrigerated: 7 days** **Frozen: 30 days**		
Set-Up/Analytic Time:	**Set-up:Sun-Sat ; Report Available: 1-3 days**		
Reference Ranges:	**Lyme Disease DNA Synov fld/CSF**		**Not Detected**
Methodology:	**Real-Time PCR**		
Performing Site:	**Focus Diagnostics**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113571	**Lyme Disease DNA Synov fld/CSF**	

Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Tick (15510)			
Clinical Significance:	The diagnosis of Lyme disease is most often made by clinical examination combined with evidence of tick bite or exposure in endemic areas. Amplification of Borrelia genomic DNA from blood, fluids or tissues can support the diagnosis.		
Effective Date	**Immediate**		
Test Code:	**S52517**		
CPT Code(s):	**87801**		
Specimen Requirements:	Type: Collection Instructions:	**Deer tick** **1 deer tick in 70% ethanol or in wet tissue in a sterile screw cap container**	
Transport Temperature:	**Room temperature**		
Specimen Stability:	**Room Temperature: 14 days** **Refrigerated: 14 days** **Frozen: 14 days**		
Set-Up/Analytic Time:	**Set-up:Sun-Sat ; Report Available: 1-3 days**		
Reference Ranges:	**Lyme Disease DNA Tick**		**Not Detected**
Methodology:	**Real-Time PCR**		
Performing Site:	**Focus Diagnostics**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113572	**Lyme Disease DNA Tick**	

Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Urine (15868)	
Clinical Significance:	The diagnosis of Lyme disease is most often made by clinical examination combined with evidence of tick bite or exposure in endemic areas. Amplification of Borrelia genomic DNA from blood, fluids or tissues can support the diagnosis.
Effective Date	**Immediate**
Test Code:	**S52514**
CPT Code(s):	**87801**

Specimen Requirements:	Type: Opt Volume: Min Volume:	**Urine** **4.0 mL** **2.0 mL**
Transport Temperature:	**Frozen**	
Specimen Stability:	**Room Temperature: 48 hours** **Refrigerated: 7 days** **Frozen: 30 days**	
Set-Up/Analytic Time:	**Set-up:Sun-Sat ; Report Available: 1-3 days**	
Reference Ranges:	**Lyme Disease DNA**	**Not Detected**
Methodology:	**Real-Time PCR**	
Performing Site:	**Focus Diagnostics**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113569	**Lyme Disease DNA**

Serotonin Release Assay (SRA), LMWH (16284) **This test is not approved for the testing of patient samples from New York State.*			
Clinical Significance:	Low molecular weight heparin serotonin release assay (LMWH-SRA) may be useful for in-vitro investigation of LMWH-induced thrombocytopenia and/or thrombocytopenia with thrombosis syndrome (HIT/HITT).		
Effective Date	**Immediate**		
Test Code:	**S52520**		
CPT Code(s):	**86022**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **1.0 mL** **0.4 mL**	
Transport Temperature:	**Frozen**		
Specimen Stability:	**Room Temperature: 24 hours** **Refrigerated: 48 hours** **Frozen: 6 months**		
Set-Up/Analytic Time:	**Set-up: Sun-Thu; Report Available: 2-3 days**		
Reference Ranges:	**LMWH SRA Result** **LMWH Low Dose, 0.1 U/mL** **LMWH Low Dose, 1.0 U/mL** **LMWH High Dose, 50 U/mL**	**Negative** **Accompanies report**	 **% release** **% release** **% release**
Methodology:	**Radiobinding 14C Serotonin Radiolabel**		
Always Message:	**A sample is considered negative if there is: <20% release.** **This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. Performance characteristics refer to the analytical performance of the test.**		
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113497 **113498** **113499** **113500**	**LMWH SRA Result** **LMWH Low Dose, 0.1 U/mL** **LMWH Low Dose, 1.0 U/mL** **LMWH High Dose, 50 U/mL**	

Syphilis Antibody Cascading Reflex (90349)		
Clinical Significance:	Identification of *Treponema pallidum* antibodies may aid in the diagnosis of syphilis**.**	
Effective Date	**Immediate**	
Test Code:	**S52440**	
CPT Code(s):	**86780**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **3.0 mL** **1.0 mL**
Transport Temperature:	**Refrigerated**	
Specimen Stability:	**Room Temperature: 4 days** **Refrigerated: 7 days**	

	Frozen: 30 days	
Set-Up/Analytic Time:	**Set-up: Tue, Fri; Report Available: 2-6 days**	
Reference Ranges:	**T. *pallidum* Ab**	**Negative**
Methodology:	**Immunoassay**	
Additional Information:	**If the *T. pallidum* Ab is "Equivocal" or "Positive" it will reflex to RPR Screen with Reflex to Titer performed at an additional charge (add CPT code 86592).** **If the RPR Screen is "Reactive" the titer is performed at an additional charge (add CPT code 86593).** **If the RPR screen results in "Nonreactive" it will reflex to *T. pallidum* Antibody, Particle Agglutination for an additional charge (add CPT code 86780).**	
Performing Site:	**Focus Diagnostics**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113367	**T. *pallidum* Ab**

Mephobarbital, Serum (630X)			
Effective Date	**September 13, 2011**		
Test Code:	**S52483**		
CPT Code(s):	**82205**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **1.0 mL** **0.5 mL**	
Rejection Criteria:	**SST® tubes**		
Transport Temperature:	**Refrigerated**		
Specimen Stability:	**Room Temperature: 5 days** **Refrigerated: 3 weeks** **Frozen: 12 months**		
Set-Up/Analytic Time:	**Set-up: Mon-Sun; Report Available: 2-3 days**		
Reference Ranges:	**Mephobarbital**	**15.0-40.0**	**mg/L**
Methodology:	**Fluorescence Polarization Immunoassay**		
Performing Site:	**Quest Diagnostics Nichols Institute, Chantilly**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113487	**Mephobarbital**	

Salicylate (805)			
Clinical Significance:	Salicylates are used in the treatment of fever, analgesia and in the treatment of acute rheumatic fever, rheumatoid arthritis and for inhibition of platelet aggregation in patients with cad. When treating rheumatoid arthritis, salicylates reduce the inflammation in joint tissues. Salicylate level monitored to assess toxicity.		
Effective Date	**September 13, 2011**		
Test Code:	**S52500**		
CPT Code(s):	**80196**		
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions:	**Serum, Plasma-Heparin, Sodium Fluoride, Sodium Oxalate, EDTA** **1.0 mL** **0.5 mL** **Collect just prior to next dose. Centrifuge, pour, and send specimens at room temperature.**	
Rejection Criteria:	**SST® tubes**		
Transport Temperature:	**Room Temperature**		
Specimen Stability:	**Room Temperature: 7 days** **Refrigerated: 7 days** **Frozen: 7 days**		
Set-Up/Analytic Time:	**Set-up: Mon-Sat; Report Available: 2-3 days**		
Reference Ranges:	**Salicylate**	**Accompanies report**	**mcg/L**
Methodology:	**Immunoassay**		
Always Message:	**Therapeutic ranges (not for use with single dose intoxication):** **Analgesic: 50-100 mcg/L** **Anti-inflammatory: 150-300 mcg/L** **Detection limit: 15.0 mcg/L**		
Performing Site:	**Quest Diagnostics Nichols Institute, Chantilly**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113488	**Salicylate**	

Anidulafungin, HPLC (51433)			
Clinical Significance:	Anidulafungin is an antifungal of the echinocandin class of antifungals, targeting susceptible strains of Candida. The mechanism of action for anidulafungin is to inhibit the synthesis of (1,3) B-D Glucan, an essential compound in the structure of fungal cell walls and one that is not present in mammalian cells. Measurement of serum anidulafungin levels may be helpful to optimize drug dosing regiments, particularly where there is non-compliance, concern about drug interactions, pharmacokinetic variability, or suspected toxicity.		
Effective Date	**September 26, 2011**		
Test Code:	**S52485**		
CPT Code(s):	**80299**		
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **2.0 mL** **1.0 mL**	
Rejection Criteria:	**SST® tubes; other body fluids including plasma**		
Transport Temperature:	**Frozen**		
Specimen Stability:	**Room Temperature: Unacceptable** **Refrigerated: Unacceptable** **Frozen: 14 days**		
Set-Up/Analytic Time:	**Set-up: Tue, Fri; Report Available: 3-5 days**		
Reference Ranges:	**Anidulafungin, HPLC**	**<0.1**	**mcg/mL**
Methodology:	**High Performance Liquid Chromatography**		
Always Message:	**This test was developed and its performance characteristics have been determined by Focus Diagnostics, Inc. Performance characteristics refer to the analytical performance of the test.**		
Performing Site:	**Focus Diagnostics**		
CPU Interface Mapping:	**Result Code:**	**Result Name:**	
	113459	**Anidulafungin, HPLC**	

Referral Test Changes

FLT3 (ITD) and D835 Variant Detection by PCR *****This test is not available for New York patient testing. *****		
Effective Date:	**August 17, 2011**	
Test Code:	**S52494**	
Collection Instruction:	**Specify specimen source on test request form and specimen container. Include patient's date of birth on test request form.**	
Performing Site:	**LabPMM, Laboratory for Personalized Molecular Medicine**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113574	**Date of Birth**
	113575	**Source**
	113471	**FLT3 ITD**
	113472	**FLT3 D835**
	113473	**Comment**
	113474	**Interpretation**

AccuType® IL28B ***** New York State approval pending. This test is not available for New York State patient testing. *****		
Effective Date:	**August 29, 2011**	
Test Code:	**S52417**	
Reference Ranges:	**IL28B Genotype: Accompanies report** **AccuType IL28B: Accompanies report**	
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**	
Additional Information:	**Adding reporting analyte IL28B Genotype.**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113573	**IL28B Genotype:**
	113286	**AccuType IL28B:**

Babesia *microti* DNA, Real-Time PCR (47800) *****This test is not available for New York patient testing. *****				
Effective Date	**Immediate**			
Test Code:	**S51508**			
Performing Site:	**Focus Diagnostics**			

Bacterial Culture, Aerobic, Special (51250)		
Effective Date	**Immediate**	
Test Code:	**S50229**	
Specimen Requirements:	Collection Instructions:	**Please indicate suspected organism(s) when submitting specimen.** ***Bartonella* spp.** ***Brucella* spp.** ***Corynebacterium diphtheriae*** ***Haemophilus ducreyii*** ***Listeria monocytogenes*** ***Neisseria gonorrhoeae*** ***Streptobacillus moniliformis*** ***Vibrio* spp.** ***Yersinia pestis*** **Other** **Culture includes the identification of the predominant organism or pathogen. Serotyping of select species is available for an additional charge. Please refer to the Microbiology Specimen Collection and Transport Guide before submitting a sample for testing. Verify all sample types submitted for testing with the organism provided.**
Performing Site:	**Focus Diagnostics**	

C3d Circulating Immune Complexes			
Effective Date	**Immediate**		
Test Code:	**S51808**		
Reference Ranges:	**C3 Immune Complex**	**2-25**	**mcg Eq/mL**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**		

Chromium RBC (1261R)		
Effective Date	**Immediate**	
Test Code:	**S41192**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**RBCs** **1.0 mL** **0.4 mL**
Methodology:	**Inductively Coupled Plasma Mass Spectrometry**	
Performing Site:	**National Medical Service**	

Hereditary Spherocytosis Panel (81087)		
Effective Date	**Immediate**	
Test Code:	**S50696**	
Additional Analyte:	**Sex of Control Vial**	
Performing Site:	**Mayo Medical Laboratory**	
CPU Interface Mapping:	**Result Code:**	**Result Name:**
	113539	**Sex of Control Vial**

P0 (Zero) Antobodies (350)		
Effective Date	**Immediate**	
Test Code:	**S50581**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **1.0 mL** **0.2 mL**
Performing Site:	**Immco Diagnostics**	

SMA Diagnostic Test		
Effective Date	**Immediate**	
Test Code:	**S50070**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Whole blood-EDTA, ACD** **4.0 mL** **2.0 mL** **For prenatal samples:** **20 mL of amniotic fluid (sterile transport tube) (minimum: 10 mL) is preferred.** **10-20 mg of chorionic villus sample (sterile container, with** **2-3 mL of sterile saline or tissue culture medium added) is acceptable.**
Additional Information:	**Cultured cells preferred. Direct specimen accepted if client agrees to provide backup cell culture if needed for additional testing. Please call 1-866-GENEINFO (1--866-436-3463) prior to sending prenatal samples.**	
Performing Site:	**Athena Diagnostics**	

***Treponema pallidum* Antibody, IFA (CSF)**	
Effective Date	**Immediate**
Test Code:	**S49738**
Specimen Stability:	**Room temperature: Unacceptable** **Refrigerated: 7 days** **Frozen: 30 days**
Setup/Analytic Time:	**Set up Mon-Fri; Report available: 1- 4 days**
Performing Site:	**Focus Diagnostics**

Trypsin, Stool (0020383)		
Effective Date	**Immediate**	
Test Code:	**S43880**	
Set-Up/Analytic Time:	**Set-up: Sun-Sat; Report Available: 2-3 days**	
Reference Ranges:	**Trypsin, Stool**	**Greater than or equal to 1:96**
Always Message:	**A fecal trypsin titer greater than or equal to 1:96 is considered normal. Fecal trypsin is measured by serially diluting stool in buffer and identifying the greatest titer at which x-ray film is cleared of its gelatin emulsion. Pancreatic Elastase, Fecal, 0080526, a quantitative measurement of pancreatic elastase in stool, is the preferred test for determining exocrine pancreatic function.**	
Performing Site:	**ARUP Laboratories**	

C3A Desarg Fragment (17689X)		
Effective Date	**September 19, 2011**	
Test Code:	**S51404**	
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions:	**Plasma- EDTA** **1.0 mL** **0.5 mL** **In each of 2 tubes**
Specimen Stability:	**Room Temperature: Unacceptable** **Refrigerated: Unacceptable** **Frozen: 21 days**	
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**	

IGF Binding Protein-1 (36590)			
Effective Date	**September 19, 2011**		
Test Code:	**S51316**		
Reference Ranges:	**Adults:**	**5-34**	**ng/mL**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**		

Neopterin, Serum (34890)			
Effective Date	**September 19, 2011**		
Test Code:	**S49926**		
Reference Ranges:	**Neopterin, Serum**	**<15**	**nmol/L**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**		

Capreomycin, HPLC (51959)			
Effective Date	**September 26, 2011**		
Test Code:	**S51326**		
Rejection Criteria:	**SST® tubes; Other body fluids including plasma**		
Reference Ranges:	**Capreomycin, HPLC**	**<1.0**	**mcg/mL**
Always Message:	**Mean peak serum levels 1 to 2 hours after a 1gm intramuscular dose: 28 to 32 mcg/mL (range 20.0-47.0 mcg/mL).** **Intravenous dosing results in a 30 +/- 47% increase in peak levels.**		
Performing Site:	**Focus Diagnostics**		

Fluconazole, HPLC (51969)			
Effective Date	**September 26, 2011**		
Test Code:	**S43875**		
Rejection Criteria:	**SST® tubes; Other body fluids including plasma**		
Reference Ranges:	**Fluconazole, HPLC**	**<1.0**	**mcg/mL**
Always Message:	**Pharmacokinetics are similar after IV or oral administration.** **Adult, Peak, (mean)** **Single 400 mg oral dose, 1-2 hr:** **4.1 to 8.1 mcg/mL** **Pediatric, Peak (mean)** **Single oral dose, 9 mo. To 13 yrs** **2 mg/kg: 2.9 mcg/mL** **8 mg/kg: 9.8 mcg/mL** **Multiple IV doses, 5 to 15 years** **2 mg/kg: 5.5 mcg/mL** **8 mg/kg: 14.1 mcg/mL**		
Performing Site:	**Focus Diagnostics**		

Streptomycin, HPLC (51962)			
Effective Date	**September 26, 2011**		
Test Code:	**S51478**		
Rejection Criteria:	**SST® tubes; Other body fluids including plasma**		
Reference Ranges:	**Streptomycin, HPLC**	**<1.0**	**mcg/mL**
Always Message:	**Following intramuscular injection of 1 g of streptomycin as the sulfate, a peak serum level of 25 to 50 mcg/mL is reached within 1 hour.**		
Performing Site:	**Focus Diagnostics**		

Sulfamethoxazole, HPLC (51526)			
Effective Date	**September 26, 2011**		
Test Code:	**S51436**		
Rejection Criteria:	**SST® tubes; Other body fluids including plasma**		
Reference Ranges:	**Sulfamethoxazole, HPLC**	**<5.0**	**mcg/mL**
Methodology:	**High Performance Liquid Chromatography**		
Always Message:	**Sulfamethoxazole peak levels occur approximately 1 to 4 hours after oral dosing. Mean steady-state level of sulfamethoxazole (3 days) is 68.0 mcg/mL**		
Performing Site:	**Focus Diagnostics**		

Benzene (0541B)	
Effective Date	**October 3, 2011**
Test Code:	**S46505**
Methodology:	**Headspace Gas Chromatography**
Always Message:	**Following exposure to 25 ppm in air for 2 hours:** **Approximately 0.2 mcg/mL.** **Reporting Limit: 0.050**
Performing Site:	**National Medical Service**

Ethylene Glycol, Serum/Plasma (2062SP)			
Effective Date	**October 3, 2011**		
Test Code:	**S40435**		
Reference Ranges:	**Ethylene Glycol**	**None Detected**	**mg/dL**
Performing Site:	**National Medical Service**		

Fecal Lipids, Total (3046N)	
Effective Date	**October 3, 2011**
Test Code:	**S51333**
Methodology:	**Nuclear Magnetic Resonance (NMR)**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**

Hexane (2290SP)	
Effective Date	**October 3, 2011**
Test Code:	**S47028**
Methodology:	**Headspace Gas Chromatography**
Performing Site:	**National Medical Service**

Paraldehyde and Metabolite, Blood (3310B)	
Effective Date	**October 3, 2011**
Test Code:	**S43895**
Methodology:	**Headspace Gas Chromatography**
Performing Site:	**National Medical Service**

Paraldehyde and Metabolite, Serum/Plasma (3310SP)	
Effective Date	**October 3, 2011**
Test Code:	**S52299**
Methodology:	**Headspace Gas Chromatography**
Performing Site:	**National Medical Service**

Propylene Glycol (4003SP)	
Effective Date	**October 3, 2011**
Test Code:	**S46510**
Always Message:	**Propylene glycol is used extensively as a preservative, emollient and vehicle for both oral and intervenous medications. Plasma levels of 80-200 mg/dL have been reported following oral ingestion of 41.4 grams every 12 hours.**
Performing Site:	**National Medical Service**

IGF Binding Protein-2 (IGFBP-2) (37102X)					
Effective Date	**October 17, 2011**				
Test Code:	**S51427**				
Specimen Requirements:	Type: Opt Volume: Min Volume: Collection Instructions:		**Serum** **1.0 mL** **0.2 mL** **Fasting is preferred**		
Rejection Criteria:	**Gross hemolysis, gross lipemia**				
Transport Temperature:	**Refrigerated**				
Specimen Stability:	**Room Temperature: 12 hours** **Refrigerated: 4 days** **Frozen: 28 days**				
Reference Ranges:	**IGF Binding Protein-2**	**Pediatrics:**	**5-9.9 years** **10-13.9 years** **14-17.9 years**	**49-208** **41-167** **37-135**	**ng/mL** **ng/mL** **ng/mL**
		Adults:	**18-49 years** **>49 years**	**38-267** **47-350**	**ng/mL** **ng/mL**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**				

Bordetella pertussis IgG Antibodies, MAID (42250)			
Effective Date	**October 24, 2011**		
Test Code:	**S51533**		
Reference Ranges:	**PT IgG** **FHA IgG**	**<45** **<90**	**IU/mL** **IU/mL**
Performing Site:	**Focus Diagnostics**		

Bordetella pertussis IgG Antibodies, MAID (42250)			
Effective Date	**October 24, 2011**		
Test Code:	**S51776**		
Reference Ranges:	**PT IgG** **PT IgA** **FHA IgG** **FHA IgA**	**<45** **<10** **<90** **<50**	**IU/mL** **IU/mL** **IU/mL** **IU/mL**
Performing Site:	**Focus Diagnostics**		

Filaria IgG4 Antibody, ELISA (40495)		
Effective Date	**October 24, 2011**	
Test Code:	**S49865**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **0.2 mL** **0.1 mL**
Transport Temperature:	**Room temperature**	
Specimen Stability:	**Room Temperature: 7 days** **Refrigerated: 14 days** **Frozen: 30 days**	
Reference Ranges:	**Filaria IgG4 Antibody**	**Negative**
Performing Site:	**Focus Diagnostics**	

PTH Antibody (139287P)		
Effective Date	**October 24, 2011**	
Test Code:	**S49865**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **1.0 mL** **0.5 mL**
Rejection Criteria:	**Plasma**	
Transport Temperature:	**Room temperature**	
Specimen Stability:	**Room Temperature: 14 days** **Refrigerated: 14 days** **Frozen: 28 days**	
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**	

TSH Antibody (53843P)		
Effective Date	**October 24, 2011**	
Test Code:	**S49865**	
Specimen Requirements:	Type: Opt Volume: Min Volume:	**Serum** **1.0 mL** **0.5 mL**
Rejection Criteria:	**Plasma**	
Transport Temperature:	**Room temperature**	
Specimen Stability:	**Room Temperature: 14 days** **Refrigerated: 14 days** **Frozen: 28 days**	
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**	

Referral Test Discontinuations

Allergen – Gelatin Bovine IgE (46810S)	
Effective Date:	**Immediate**
Test Code:	**S52287**
Additional Information:	Suggested Alternate: C74- Allergen – Gelatin IgE, Performed at Quest Diagnostics Nichols Institute, Valencia
Performing Site:	**Viracor-IBT Laboratories**

Chromium, Blood	
Effective Date:	**Immediate**
Test Code:	**S52418**
Additional Information:	Suggested Alternate: 6085 – Chromium, Blood, Performed at Quest Diagnostics Nichols Institute, Valencia.
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**

Histamin Release (Chronic Urticaria) (16838) **This test is not approved for the testing of patient samples from New York State.*	
Effective Date:	**Immediate**
Test Code:	**S52240**
Performing Site:	**Quest Diagnostics Nichols Institute, San Juan Capistrano**

Mephobarbital (Mebaral) (2630SP)	
Effective Date:	**September 13, 2011**
Test Code:	**S52166**
Additional Information:	Suggested Alternate: S52483- Mephobarbital, Serum (630X), Performed at Quest Diagnostics Nichols Institute, Chantilly
Performing Site:	**National Medical Service**

Salicylate, Serum/Plasma (4137SP)	
Effective Date:	**September 13, 2011**
Test Code:	**S52170**
Additional Information:	Suggested Alternate: S52500- Salicylate (805), Performed at Quest Diagnostics Nichols Institute, Chantilly
Performing Site:	**National Medical Service**

Lyme Disease DNA, Real-Time PCR, Blood (42300)	
Effective Date:	**September 19, 2011**
Test Code:	**S51256**
Additional Information:	Suggested Alternate: S52515- Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Blood (15777), Performed at Focus Diagnostics
Performing Site:	**Focus Diagnostics**

Lyme Disease DNA, R-T PCR, CSF/Synovial Fluid (42400)	
Effective Date:	**September 19, 2011**
Test Code:	**S51646**
Additional Information:	Suggested Alternate: S52516-Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Synovial Fluid/CSF (15564), Performed at Focus Diagnostics
Performing Site:	**Focus Diagnostics**

Lyme Disease DNA, Qualitative Real-Time PCR, Tick (42200)	
Effective Date:	**September 19, 2011**
Test Code:	**S51737**
Additional Information:	Suggested Alternate: S52517-Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Tick (15510), Performed at Focus Diagnostics
Performing Site:	**Focus Diagnostics**

Lyme Disease (*Borrelia burgdorferi*) DNA, QL, R-T PCR,UR (42500)	
Effective Date:	**September 19, 2011**
Test Code:	**S51277**
Additional Information:	Suggested Alternate: S52514- Lyme Disease (*Borrelia spp*) DNA, Qualitative Real-Time PCR, Urine (15868), Performed at Focus Diagnostics
Performing Site:	**Focus Diagnostics**

Lacosamide, Serum/Plasma (2527SP)	
Effective Date:	**October 10, 2011**
Test Code:	**S52166**
Additional Information:	Suggested Alternate: 16262- Lacosamide, LC/MS/MS, Performed at Quest Diagnostics Nichols Institute, Valencia
Performing Site:	**National Medical Service**