

February 2013 - Monthly Update, Quest Diagnostics Nichols Institute, Valencia

NEW TESTS			
Please Note: Not all test codes assigned to each assay are listed in the table of contents. Please refer to the complete listing on the page numbers indicated.			
Test Code	Test Name	Effective Date	Page #
90973	Deoxycorticosterone, LC/MS/MS	1/22/2013	3
91258	Zolpidem Quantitation, Urine	2/12/2013	4
19546	Bile Acids, Fractionated and Total, Pregnancy	2/26/2013	4
91307	<i>Echinococcus</i> Antibody (IgG), EIA with Reflex to Western Blot	2/26/2013	5
16482	BV Smear Nugent Score	3/4/2013	5

TEST CHANGES				
Please Note: Not all test codes assigned to each assay are listed in the table of contents. Please refer to the complete listing on the page numbers indicated.				
Test Code	Former Test Code	Test Name	Effective Date	Page #
S51476		CA 125 w/HAMA Treatment [17717]	2/4/2013	6
S51387		CEA with HAMA Treatment [15018]	2/4/2013	6
S52476		TSH with HAMA Treatment [19537]	2/4/2013	7
19704		Activated Protein C Resistance with Reflex to Factor V (Leiden) Mutation	2/12/2013	7
17900		Factor V (Leiden) Mutation Analysis	2/12/2013	8
4175U		Fentanyl Screen, Urine W/Reflex Confirmation	2/12/2013	8
3021		HIV-1 Antibodies [WB] reflex to HIV-2 Antibodies [WB]	2/12/2013	9
17911		Methylenetetrahydrofolate Reductase (MTHFR), DNA Mutation Analysis	2/12/2013	9
17909		Prothrombin (Factor II) 20210G>A Mutation Analysis	2/12/2013	9
18041		SMA Carrier Screen	2/12/2013	10
S50070		SMA Diagnostic Test	2/12/2013	10
1513		Alpha-1-Antitrypsin, Quantitative	2/26/2013	11
5300		Carbon Dioxide	2/26/2013	11
4311		Cyclosporine A, Whole Blood [Immunoassay]	2/26/2013	12
1440		Fetal Fibronectin	2/26/2013	12
5301		Glucose	2/26/2013	13
4861W		Lead, Blood	2/26/2013	13
7745		Pneumocystis jiroveci (carinii), DFA	2/26/2013	14
799		RPR (Monitor) with Reflex to Titer	2/26/2013	14
5649		Susceptibility, <i>Mycobacterium tuberculosis</i>, First-tier Drugs	2/26/2013	14
3236		T3, Reverse	2/26/2013	15
3460		Tryptase	3/4/2013	15
5648		AFB Identification <i>Mycobacterium</i> spp. by HPLC	3/12/2013	15

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<u>2440</u>		<i>Chlamydia trachomatis</i> Antigen, DFA	3/12/2013	16
<u>2400</u>		<i>Chlamydia trachomatis</i> Culture	3/12/2013	16
<u>3182</u>		Growth Hormone	3/12/2013	17
<u>2425</u>		Respiratory Virus Panel, DFA	3/12/2013	17
<u>9640</u>		Group B Strep, PCR	3/18/2013	18
<u>3170</u>		Ferritin	3/19/2013	18

REDIRECTS
Please Note: Not all test codes assigned to each assay are listed in the table of contents.
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Test Code	Former Test Code	Test Name	Effective Date	Page #
<u>514</u>	S51309	Hemoglobin, Free, Plasma	2/11/2013	19
<u>36170</u>	S51829N	Testosterone, Free and Total, LC/MS/MS	2/19/2013	19
<u>391</u>	S41147	Biotin (Vitamin B7)	2/26/2013	20
<u>91030</u>	S44445	Vitamin B5 (Pantothenic Acid)	2/26/2013	20
<u>345</u>	S50818	Cobalt, Serum/Plasma [345]	3/5/2013	21

DISCONTINUED TESTS
Please Note: Not all test codes assigned to each assay are listed in the table of contents.
Please refer to the complete listing on the page numbers indicated.

Test Code	Test Name	Effective Date	Page #
<u>S50604</u>	Comprehensive Drug Screen Stool [1864ST]	1/7/2013	22
<u>S49602</u>	Bartonella DNA PCR, Tissue [47000]	1/22/2013	22
<u>S51354</u>	Deoxycorticosterone [6559X]	1/22/2013	22
<u>7560</u>	Treponema pallidum Total Antibodies, FTA-Antibodies Quant	1/22/2013	22
<u>S44505</u>	Vitamin B3 (Whole Blood Niacin)	2/25/2013	22
<u>S49644</u>	Zolpidem Screen Urine [9498]	2/26/2013	22

NY UPDATE
Please Note: Not all test codes assigned to each assay are listed in the table of contents.
Please refer to the complete listing on the page numbers indicated.

Test Code	Test Name	Page #
<u>90570</u>	SureSwab™ Herpes Simplex Virus, Type 1/2 DNA, Real-Time PCR	22
<u>S49825</u>	Vitamin B2 [36399]	23
<u>3231</u>	Testosterone, Free, Total, and Sex Hormone Binding Globulin	23
<u>3922</u>	Testosterone, Total, LC/MS/MS	23

SEND OUTS
Please Note: Not all test codes assigned to each assay are listed in the table of contents.
Please refer to the complete listing on the page numbers indicated.

Test Code	Former Test Code	Test Name	Effective Date	Page #
<u>S52388</u>		Lyme Disease Antibody Index for CNS Infection	1/22/2013	23

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S49883		<i>Sporothrix</i> Antibody [9673]	1/22/2013	23
S41710		Acetone Blood [205]	1/29/2013	24
S47310		Acylglycines Quant [81249]	1/29/2013	24
S52567		IBD sgi Diagnostic (1800)	1/29/2013	25
S51162		Monogenic Diabetes (MODY) Eval [885]	1/29/2013	26
S51301		Phospholipids [717]	1/29/2013	26
S43665		Cimetidine [1262]	2/4/2013	26
S52175		Metoclopramide, Serum/Plasma [3041SP]	2/4/2013	27
S47815		Prostaglandins PG-D2	2/4/2013	27
S52011		CD57, CD3, CD8, Flow Cytometry	2/11/2013	27
S49112		D-Xylose Absorption Blood Fasting [1198X]	2/11/2013	28
S52113		HIV-1 Integrase Genotype [16868]	2/11/2013	29
S51368		Prekallikrein (Fletcher Factor) Activity [10334X]	2/11/2013	29
S51656		Serotonin, Blood	2/12/2013	30
S52578		Hexosaminidase A and Total, S	2/21/2013	30
S49273		Hexosaminidase A and Total, WBC	2/21/2013	30
S50740		Toxocara Antibody, ELISA (Fluid) [60945]	2/25/2013	31
S50345		Toxocara Antibody, ELISA (Serum) [40945]	2/25/2013	31
S41360		Legionella pneumophila Antibodies (IgM)	2/26/2013	31

New Test Offerings

The following tests will be available through Quest Diagnostics on the dates indicated below.

Deoxycorticosterone, LC/MS/MS	
Clinical Significance	Deoxycorticosterone (DOC) is a weak mineralocorticoid derived from 21-hydroxylation of progesterone in the adrenal cortex.
Effective Date	1/22/2013
Test Code	90973
CPT Codes	82633
Specimen Requirements	0.5 mL serum collected in a red-top (no gel) tube Collect specimen in a non additive red top tube; spin down immediately and pour off into a 13x75 plastic transport tube.
Reject Criteria	Serum separator tubes, moderate hemolysis, gross hemolysis, gross lipemia, grossly icteric
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 72 hours Refrigerated: 7 days Frozen: 30 days
Set-up/Analytic Time	Set up: Sun, Tues, Thurs; Report available: 4-7 days

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Reference Range	Male > or = 18 years:	< or = 15 ng/dL		
	Female:	Phase of Menstrual Cycle		
		Mid Follicular:	< or = 18 ng/dL	
		Surge:	< or = 23 ng/dL	
	Mid Luteal:	< or = 19 ng/dL		
	Pediatric 6-17 years:	< or = 35 ng/dL		
Units Of Measure	ng/dL			
Methodology	Liquid Chromatography, Tandem Mass Spectrometry			
Assay Category	Laboratory Developed Test			
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano			
CPU Mappings	Result Code	Result Name		
	86007607	Deoxycorticosterone		

Zolpidem Quantitation, Urine			
Clinical Significance	Zolpidem is used to treat patients with insomnia. This test is used to detect the presence of the drug as a therapeutic drug monitoring and to aide clinicians with the drug's dosage effectiveness.		
Effective Date	2/12/2013		
Test Code	91258		
CPT Codes	80299		
Specimen Requirements	1 mL (0.5 mL minimum) random urine collected in a plastic, leakproof preservative-free container		
Reject Criteria	Preserved urines and any other sample types that are not urine		
Transport Temperature	Refrigerated		
Specimen Stability	Room temperature: 7 days Refrigerated and Frozen: 30 days		
Set-up/Analytic Time	Set up: Mon - Fri; Report available 4 days		
Reference Range	None detected		
Methodology	Liquid Chromatography, Tandem Mass Spectrometry		
Performing Site	Quest Diagnostics Nichols Institute, Chantilly		
CPU Mappings	Result Code:	Result Name:	
	86008832	Zolpidem Quantitation, Urine	

Bile Acids, Fractionated and Total, Pregnancy	
Clinical Significance	Intrahepatic cholestasis of pregnancy requires rapid TAT of results. Sample for this test will be run straight on dilution to improve TAT.

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Effective Date	2/26/2013											
Test Code	19546											
CPT Codes	83789											
Specimen Requirements	1 mL (0.5 mL) Serum											
Instructions	Collect blood in a red top or SST tube. After clot formation centrifuge sample and pour off serum into a transport tube. Store sample refrigerated or frozen. Overnight fasting is preferred.											
Transport Temperature	Room temperature											
Specimen Stability	Room Temperature: 7 Days Refrigerated: 14 Days Frozen: 30 Days											
Set-up/Analytic Time	Tues-Sat; Report available: 2-4 days											
Reference Range	Cholic Acid: < or = 3.1 umol/L Deoxycholic Acid: < or = 7.3 umol/L Chenodeoxycholic Acid: < or = 9.9 umol/L Total Bile Acids: 4.5 - 19.2 umol/L											
Units Of Measure	umol/L											
Methodology	Liquid Chromatography, Tandem Mass Spectrometry											
Assay Category	Laboratory Developed Test											
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano											
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86002132</td> <td>Cholic Acid</td> </tr> <tr> <td>86002133</td> <td>Deoxycholic Acid</td> </tr> <tr> <td>86002134</td> <td>Chenodeoxycholic Acid</td> </tr> <tr> <td>86002135</td> <td>Total Bile Acids</td> </tr> </tbody> </table>		Result Code	Result Name	86002132	Cholic Acid	86002133	Deoxycholic Acid	86002134	Chenodeoxycholic Acid	86002135	Total Bile Acids
Result Code	Result Name											
86002132	Cholic Acid											
86002133	Deoxycholic Acid											
86002134	Chenodeoxycholic Acid											
86002135	Total Bile Acids											

<i>Echinococcus</i> Antibody (IgG), EIA with Reflex to Western Blot	
Clinical Significance	<i>Echinococcus</i> IgG detection is an important tool for diagnosing hydatid disease, since infected individuals do not exhibit fecal shedding of <i>E. granulosus</i> eggs.
Effective Date	2/26/2013
Test Code	91307
CPT Codes	86682
Specimen Requirements	1 mL serum collected in a red-top tube (no gel) (0.2 mL minimum)
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 7 days Refrigerated: 14 days Frozen: 30 days
Set-up/Analytic Time	Set up: Tues, Fri; Report available: 1-5 days
Reference Range	Negative
Always Message	REFERENCE RANGE: NEGATIVE

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	Detection of serum antibodies to <i>Echinococcus</i> plays an important role in the diagnosis of hydatid disease, since infected individuals do not exhibit fecal shedding of <i>Echinococcus</i> eggs. Serum antibodies may remain detectable for years after cyst removal. Serologic crossreactivity between <i>Echinococcus</i> and <i>Cysticercus</i> may occur.										
Methodology	Immunoassay										
Performing Site	Focus Diagnostics, Inc.										
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>85968630</td> <td>Echinococcus IgG, EIA</td> </tr> <tr> <td colspan="2"><i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 91307-2 Echinococcus Antibody (IgG), Western Blot</i></td> </tr> <tr> <th>Result Code</th> <th>Result Name</th> </tr> <tr> <td>86008882</td> <td>Echinococcus IgG, WB</td> </tr> </tbody> </table>	Result Code	Result Name	85968630	Echinococcus IgG, EIA	<i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 91307-2 Echinococcus Antibody (IgG), Western Blot</i>		Result Code	Result Name	86008882	Echinococcus IgG, WB
Result Code	Result Name										
85968630	Echinococcus IgG, EIA										
<i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 91307-2 Echinococcus Antibody (IgG), Western Blot</i>											
Result Code	Result Name										
86008882	Echinococcus IgG, WB										
Additional Information	If the Echinococcus IgG result is Positive, then the Echinococcus Ab (IgG), Western Blot will be performed at an additional charge (CPT code: 86682).										

BV Smear Nugent Score	
Clinical Significance	Bacterial vaginosis in the symptomatic patient is defined as a shift in the vaginal flora from predominately lactobacilli to a variety of other morphologies.
Effective Date	3/4/2013
Test Code	16482
CPT Codes	87205
Specimen Requirements	Vaginal swab in Amies transport medium or similar. An air-dried smear is also acceptable.
Reject Criteria	Broken Slides
Transport Temperature	Room temperature
Specimen Stability	Room temperature: 48 hours Refrigerated: 48 hours Frozen: Unacceptable
Methodology	Gram stained smears are examined microscopically using a scoring system based on the relative amounts of bacterial morphotypes present.
Performing Site	Quest Diagnostics Nichols Institute, Chantilly
CPU Mappings	CPU mapping available upon request.

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 names and test codes have been italicized.

[Note to Business Units:](#) Please delete any information in blue and test codes that do not apply to your Business Unit.

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CA 125 w/HAMA Treatment [17717]							
Effective Date	2/4/2013						
Test Code	S51476						
Reference Range	CA 125, HAMA Treated <21 U/mL CA 125, Untreated <21 U/mL						
Always Message	This test was performed using the Siemens chemiluminescent method. Values obtained from different assay methods cannot be used interchangeably. CA 125 levels, regardless of value, should not be interpreted as absolute evidence of the presence or absence of disease.						
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano						
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>110417</td> <td>CA 125, HAMA Treated</td> </tr> <tr> <td>110418</td> <td>CA 125, Untreated</td> </tr> </tbody> </table>	Result Code	Result Name	110417	CA 125, HAMA Treated	110418	CA 125, Untreated
Result Code	Result Name						
110417	CA 125, HAMA Treated						
110418	CA 125, Untreated						

CEA with HAMA Treatment [15018]							
Effective Date	2/4/2013						
Test Code	S51387						
Reference Range	CEA, HAMA Treated See below CEA, Untreated Non-Smoker: <2.5 ng/mL Smoker: <5.0 ng/mL						
Always Message	This test was performed using the Siemens chemiluminescent method. Values obtained from different assay methods cannot be used interchangeably. CEA levels, regardless of value, should not be interpreted as absolute evidence of the presence or absence of disease.						
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano						
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>113011</td> <td>CEA, HAMA Treated</td> </tr> <tr> <td>110264</td> <td>CEA, Untreated</td> </tr> </tbody> </table>	Result Code	Result Name	113011	CEA, HAMA Treated	110264	CEA, Untreated
Result Code	Result Name						
113011	CEA, HAMA Treated						
110264	CEA, Untreated						
Additional Information	Update report format						

TSH with HAMA Treatment [19537]					
Effective Date	2/4/2013				
Former Test Name	TSH, 3rd Generation with HAMA Treatment [19537X]				
Test Code	S52476				
Reference Range	<table border="1"> <thead> <tr> <th>TSH, HAMA Treated</th> <th>See below</th> </tr> </thead> <tbody> <tr> <td>TSH, Untreated</td> <td>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</td> </tr> </tbody> </table>	TSH, HAMA Treated	See below	TSH, Untreated	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
TSH, HAMA Treated	See below				
TSH, Untreated	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				

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	<p>< or = 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 > or = 20 Years: 0.40-4.50 mIU/L</p> <p>Pregnancy First Trimester: 0.26-2.66 mIU/L Second Trimester: 0.55-2.73 mIU/L Third Trimester: 0.43-2.91 mIU/L</p> <p>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.</p>						
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano						
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86002326</td> <td>TSH, HAMA Treated</td> </tr> <tr> <td>86002327</td> <td>TSH, Untreated</td> </tr> </tbody> </table>	Result Code	Result Name	86002326	TSH, HAMA Treated	86002327	TSH, Untreated
Result Code	Result Name						
86002326	TSH, HAMA Treated						
86002327	TSH, Untreated						

Activated Protein C Resistance with Reflex to Factor V (Leiden) Mutation											
Effective Date	2/12/2013										
Test Code	19704										
Set-up/Analytic Time	Set up: Daily; Report available: 3-4 days										
Reference Range	Accompanies report										
Always Message	<p>19704 Factor V (Leiden) Mutation Analysis Mutation Analysis: The Factor V Leiden (R506Q) mutation [NM 000130.2: c.1601G>A (p.R534Q)] in the Factor V gene is one of the most common causes of inherited thrombophilia. This mutation causes resistance to degradation of activated Factor V protein by activated protein C (APC). The Factor V Leiden (R506Q) mutation is detected by amplification of the selected region of Factor V gene by polymerase chain reaction (PCR) and fluorescent probe hybridization to the targeted region, followed by melting curve analysis with a real time PCR system. Although rare, false positive or false negative results may occur. All results should be interpreted in context of clinical findings, relevant history, and other laboratory data.</p> <p>This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.</p> <p>Health care providers, please contact your local Quest Diagnostics genetic counselor or call 1-866-GENEINFO (866-436-3463) for assistance with interpretation of these results.</p>										
Methodology	RVTT-Based Assay (Clot-Based), Hybeacons										
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano										
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>26703</td> <td>APC Resistance</td> </tr> <tr> <td colspan="2">19704-2 Reflex Factor V (Leiden) Mutation Analysis</td> </tr> <tr> <th>Result Code</th> <th>Result Name</th> </tr> <tr> <td>85985660</td> <td>Factor V (Leiden) Mutation</td> </tr> </tbody> </table>	Result Code	Result Name	26703	APC Resistance	19704-2 Reflex Factor V (Leiden) Mutation Analysis		Result Code	Result Name	85985660	Factor V (Leiden) Mutation
Result Code	Result Name										
26703	APC Resistance										
19704-2 Reflex Factor V (Leiden) Mutation Analysis											
Result Code	Result Name										
85985660	Factor V (Leiden) Mutation										

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Factor V (Leiden) Mutation Analysis					
Effective Date	2/12/2013				
Test Code	17900				
CPT Codes	81241				
Set-up/Analytic Time	Set up: Daily; Report available: 3-4 days				
Reference Range	Accompanies report				
Always Message	<p>Mutation Analysis: The Factor V Leiden (R506Q) mutation [NM 000130.2: c.1601G>A (p.R534Q)] in the Factor V gene is one of the most common causes of inherited thrombophilia. This mutation causes resistance to degradation of activated Factor V protein by activated protein C (APC). The Factor V Leiden (R506Q) mutation is detected by amplification of the selected region of Factor V gene by polymerase chain reaction (PCR) and fluorescent probe hybridization to the targeted region, followed by melting curve analysis with a real time PCR system. Although rare, false positive or false negative results may occur. All results should be interpreted in context of clinical findings, relevant history, and other laboratory data.</p> <p>This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.</p> <p>Health care providers, please contact your local Quest Diagnostics genetic counselor or call 1-866-GENEINFO (866-436-3463) for assistance with interpretation of these results.</p>				
Methodology	Hybeacons				
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano				
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>85985660</td> <td>Factor V Leiden Mutation</td> </tr> </tbody> </table>	Result Code	Result Name	85985660	Factor V Leiden Mutation
Result Code	Result Name				
85985660	Factor V Leiden Mutation				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>19704</td> <td>Activated Protein C Resistance with Reflex to Factor (Leiden) Mutation</td> </tr> </tbody> </table>	Test Codes:	Name:	19704	Activated Protein C Resistance with Reflex to Factor (Leiden) Mutation
Test Codes:	Name:				
19704	Activated Protein C Resistance with Reflex to Factor (Leiden) Mutation				

Fentanyl Screen, Urine W/Reflex Confirmation					
Effective Date	2/12/2013				
Test Code	4175U				
Assay Category	Laboratory Developed Test				
Performing Site	Quest Diagnostics Nichols Institute, Valencia				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>4472U</td> <td>Expanded Drugs Of Abuse Screen Urine + Fentanyl W/Reflex Confirmation</td> </tr> </tbody> </table>	Test Codes:	Name:	4472U	Expanded Drugs Of Abuse Screen Urine + Fentanyl W/Reflex Confirmation
Test Codes:	Name:				
4472U	Expanded Drugs Of Abuse Screen Urine + Fentanyl W/Reflex Confirmation				

HIV-1 Antibodies [WB] reflex to HIV-2 Antibodies [WB]	
Effective Date	2/12/2013
Test Code	3021

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Performing Site	Quest Diagnostics Nichols Institute, Valencia	
Additional Information	If HIV-1 Abs Western Blot is Negative or Indeterminate, HIV-2 Abs Western Blot, is performed for an additional fee, adding CPT code 86689.	
Tests Affected	Test Codes:	Name:
	3021B	HIV-1 Antibodies + bands [WB] reflex HIV-2 Antibodies [WB]
	3021BT	HIV-1 Abs [WB] w/Reflex HIV-2 Abs [WB] (Blood Bank)

Methylenetetrahydrofolate Reductase (MTHFR), DNA Mutation Analysis		
Effective Date	2/12/2013	
Test Code	17911	
CPT Codes	81291	
Set-up/Analytic Time	Set up: Daily; Report available: 3-4 days	
Reference Range	Accompanies report	
Always Message	<p>Hyperhomocysteinemia is a risk factor for arterial disease and venous thrombosis. Homocysteine levels are affected by nutritional and genetic factors. Since MTHFR is involved in methylation of homocysteine to methionine, individuals with MTHFR gene mutations that reduce enzyme activity may develop hyperhomocysteinemia and thus be at elevated risk for vascular disease.</p> <p>The C677T [NM 005957.3: c.665C>T (p.A222V)] and A1298C [c. 1286A>C (p.E429A)] mutations are detected by amplification of the selected regions of MTHFR gene by polymerase chain reaction (PCR) and fluorescent probes hybridization to the targeted regions, followed by melting curve analysis with a real time PCR system. Although rare, false positive or false negative results may occur. All results should be interpreted in context of clinical findings, relevant history, and other laboratory data.</p> <p>This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.</p> <p>Health care providers, please contact your local Quest Diagnostics genetic counselor or call 1-866-GENEINFO (866-436-3463) for assistance with interpretation of these results.</p>	
Methodology	Hybeacons	
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano	
CPU Mappings	Result Code	Result Name
	85986610	MTHFR

Prothrombin (Factor II) 20210G>A Mutation Analysis	
Effective Date	2/12/2013
Test Code	17909
CPT Codes	81240
Set-up/Analytic Time	Set up: Daily; Report available: 3-4 days
Reference Range	Accompanies report
Always Message	<p>The G20210A mutation [AF478696.1: g.21538G>A (c.*97G>A)] in the Prothrombin/Factor II gene is the second most common inherited risk factor for thrombosis occurring in approximately 2% of Caucasians. Presence of the mutation is associated with an elevation of prothrombin levels to about 30% above normal in heterozygotes and to 70% above normal in homozygotes.</p>

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	<p>The G20210A mutation is detected by amplification of the selected region of Factor II gene by polymerase chain reaction (PCR) and fluorescent probe hybridization to the targeted region, followed by melting curve analysis with a real time PCR system. Although rare, false positive or false negative results may occur. All results should be interpreted in context of clinical findings, relevant history, and other laboratory data.</p> <p>This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, San Juan Capistrano. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.</p> <p>Health care providers, please contact your local Quest Diagnostics genetic counselor or call 1-866-GENEINFO (866-436-3463) for assistance with interpretation of these results.</p>					
Methodology	Hybeacons					
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano					
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>85994504</td> <td>Prothrombin (Factor II)</td> </tr> </tbody> </table>		Result Code	Result Name	85994504	Prothrombin (Factor II)
Result Code	Result Name					
85994504	Prothrombin (Factor II)					

SMA Carrier Screen											
Effective Date	2/12/2013										
Test Code	18041										
CPT Codes	81401										
Specimen Requirements	Chorionic villi samples are no longer acceptable										
Instructions	Whole blood: Normal phlebotomy procedure. Store and ship ambient immediately. Do not freeze.										
Set-up/Analytic Time	Set up: Daily; Report available: 3-4 days										
Methodology	Allele Specific Real-Time Polymerase Chain Reaction, ddCt Method										
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano										
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86008027</td> <td>Technical Results</td> </tr> <tr> <td>86008021</td> <td>SMN1</td> </tr> <tr> <td>86008026</td> <td>SMN2</td> </tr> <tr> <td>86008020</td> <td>Interpretation</td> </tr> </tbody> </table>	Result Code	Result Name	86008027	Technical Results	86008021	SMN1	86008026	SMN2	86008020	Interpretation
Result Code	Result Name										
86008027	Technical Results										
86008021	SMN1										
86008026	SMN2										
86008020	Interpretation										
Additional Information	Updated CPU mapping to remove analytes for Comments, Methods and References.										

SMA Diagnostic Test	
Effective Date	2/12/2013
Test Code	S50070
CPT Codes	81401
Specimen Requirements	4 mL whole blood collected in EDTA (lavender-top) tube or cultured cells from amniotic fluid collected in two T-25 flasks. Chorionic villi samples and cultured amniocytes are no longer acceptable
Instructions	For prenatal diagnosis with a fetal specimen:

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	<p>1) parents must be documented carriers of one of the mutations tested; 2) maternal blood or DNA must be available to rule out maternal cell contamination (order test code 10262X); 3) contact the laboratory genetic counselor before submission. Amniotic Fluid: Normal collection procedure. Specimen stability is crucial. Store and ship ambient immediately. Amniocyte or chorionic villus culture: Two sterile T25 flasks, filled with culture medium. Specimen stability is crucial. Store and ship ambient immediately. Do not refrigerate or freeze.</p>										
Specimen Stability	<p>Whole blood Room temperature: 8 days</p> <p>Cultured cells from amniotic fluid, amniotic fluid and cultured cells from CVS Room temperature: 48 hours Refrigerated and Frozen: Unacceptable</p>										
Set-up/Analytic Time	<p>Set up: Daily; Report available: 7-8 days Prenatal samples require added time for confirmatory testing</p>										
Methodology	Allele Specific Real-Time Polymerase Chain Reaction, ddCt Method										
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano										
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86008027</td> <td>Technical Results</td> </tr> <tr> <td>86008021</td> <td>SMN1</td> </tr> <tr> <td>86008026</td> <td>SMN2</td> </tr> <tr> <td>86008020</td> <td>Interpretation</td> </tr> </tbody> </table>	Result Code	Result Name	86008027	Technical Results	86008021	SMN1	86008026	SMN2	86008020	Interpretation
Result Code	Result Name										
86008027	Technical Results										
86008021	SMN1										
86008026	SMN2										
86008020	Interpretation										
Additional Information	Updated CPU mapping to remove analytes for Comments, Methods and References.										

Alpha-1-Antitrypsin, Quantitative					
Clinical Significance	Alpha-1-Antitrypsin level may be increased in normal pregnancy and in several diseases including chronic pulmonary disease; hereditary angioedema; renal, gastric, liver and pancreatic diseases; diabetes; carcinomas and rheumatoid diseases. Alpha-1-Antitrypsin may be decreased in emphysema, hepatic cirrhosis, respiratory distress syndrome of the newborn, nephrosis, malnutrition and cachexia.				
Effective Date	2/26/2013				
Former Test Name	Alpha-1-Antitrypsin				
Test Code	1513				
Reject Criteria	Gross hemolysis,gross lipemia,gross icterea				
Instructions	Overnight fasting is preferred. Centrifuge and transfer serum specimens to clean, plastic, screw-capped vial(s).				
Transport Temperature	Room temperature				
Specimen Stability	<p>Room temperature: 2 days Refrigerated: 7 days Frozen: 3 monts</p>				
Reference Range	83-199 mg/dL				
Performing Site	Quest Diagnostics Nichols Institute, Valencia				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>1614</td> <td>Alpha-1-Antitrypsin PhenotypR™ PLUS</td> </tr> </tbody> </table>	Test Codes:	Name:	1614	Alpha-1-Antitrypsin PhenotypR™ PLUS
Test Codes:	Name:				
1614	Alpha-1-Antitrypsin PhenotypR™ PLUS				

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Carbon Dioxide											
Effective Date	2/26/2013										
Former Test Name	Bicarbonate										
Test Code	5300										
Specimen Stability	Room Temperature: 48 hours Refrigerated: 72 hours Frozen: 30 days										
Reference Range	19-30 mmol/L										
Performing Site	Quest Diagnostics Nichols Institute, Valencia										
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>5316</td> <td>Electrolyte Panel</td> </tr> <tr> <td>5315</td> <td>Metabolic Panel, Basic</td> </tr> <tr> <td>5317</td> <td>Comprehensive Metabolic Panel</td> </tr> <tr> <td>5314</td> <td>Renal Function Panel</td> </tr> </tbody> </table>	Test Codes:	Name:	5316	Electrolyte Panel	5315	Metabolic Panel, Basic	5317	Comprehensive Metabolic Panel	5314	Renal Function Panel
Test Codes:	Name:										
5316	Electrolyte Panel										
5315	Metabolic Panel, Basic										
5317	Comprehensive Metabolic Panel										
5314	Renal Function Panel										

Cyclosporine A, Whole Blood [Immunoassay]					
Clinical Significance	Cyclosporine (Cyclosporin A) is an immunosuppressant therapeutic agent used in the prevention of organ graft rejection. Measurement of blood levels is recommended due to the inter-individual variability of metabolism as well as the toxicity associated with excessive dosage.				
Effective Date	2/26/2013				
Test Code	4311				
Specimen Requirements	2 mL (1 mL) whole blood collected in an EDTA (lavender-top) tube				
Reject Criteria	Clotted				
Transport Temperature	Room Temperature				
Units Of Measure	mcg/L				
Performing Site	Quest Diagnostics Nichols Institute, Valencia				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>4311SR</td> <td>Cyclosporine A, Whole Blood [Immunoassay] with Serial Reporting</td> </tr> </tbody> </table>	Test Codes:	Name:	4311SR	Cyclosporine A, Whole Blood [Immunoassay] with Serial Reporting
Test Codes:	Name:				
4311SR	Cyclosporine A, Whole Blood [Immunoassay] with Serial Reporting				

Fetal Fibronectin	
Clinical Significance	Fetal fibronectin is a protein that performs two roles during pregnancy. It is produced by the placenta and acts as the glue that attaches the placenta to the uterine wall. In late pregnancy, it acts as a lubricant, aiding in the passage of the newborn through the vaginal canal. Amniotic fluid contains fetal fibronectin and when the membranes leak, fetal fibronectin can be detected in a cervicovaginal collection. This can be used as a predictor of pre-term delivery, defined as less than 37 weeks gestation.
Effective Date	2/26/2013
Test Code	1440

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Specimen Requirements	Adeza Biomedical Specimen Collection Kit
Instructions	<p>1. The specimen should be obtained from the posterior fornix of the vagina during a speculum examination. The polyester tipped swab provided in the collection kit should be inserted into the vagina and lightly rotated across the posterior fornix for approximately 10 seconds to absorb the cervical/vaginal secretions.</p> <p>2. Carefully remove the swab from the vagina and immerse the swab tip in the tube of buffer provided with the specimen collection kit.</p> <p>3. Break the shaft (at the score) even with the top of the tube. Align the shaft with the hole inside the tube cap and push down lightly over the shaft, sealing the tube.</p> <p>4. Label the tube with the patients name and any other identifying information required on the tube label. Patients with suspected or known placental abruption, placenta previa, or moderate or gross vaginal bleeding should not be tested for fetal fibronectin.</p>
Transport Temperature	Refrigerated
Specimen Stability	Room Temperature: 8 hours Refrigerated: 72 hours Frozen: 3 months
Set-up/Analytic Time	Set up: Mon-Sun ; Report available: 1 day
Reference Range	Negative
Methodology	Solid Phase Immunosorbent Colorimetric Assay
Performing Site	Quest Diagnostics Nichols Institute, Valencia
Additional Information	<p>Limitations: The Fetal Fibronectin test result should not be interpreted as absolute evidence for the presence or absence of a process that will result in delivery in < or = 7 days from specimen collection for symptomatic women or < or = 34 weeks, 6 days of gestation for asymptomatic women. A positive Fetal Fibronectin Enzyme Immunoassay or Rapid fFN result may be observed for patients who have experienced cervical disruption caused by, but not limited to, events such as sexual intercourse, digital cervical examination, or vaginal probe ultrasound. The test sensitivity is 86.4%, specificity is 82.3%, positive predictive value is 12.7%, and negative predictive value is 99.5% in symptomatic women.</p>

Glucose					
Effective Date	2/26/2013				
Test Code	5301				
Specimen Requirements	1 mL serum (minimum 0.5 mL) Patient preparation: Fasting required. Fasting is defined as no consumption of food or beverage other than water for at least 8 hours before testing.				
Specimen Stability	<table border="1"> <tr> <td>Whole blood (gray-top)</td> <td> Room temperature: 24 hours Refrigerated: 72 hours Frozen: Unacceptable </td> </tr> <tr> <td colspan="2">Note: Serum and plasma submissions must be separated from cells.</td> </tr> </table>	Whole blood (gray-top)	Room temperature: 24 hours Refrigerated: 72 hours Frozen: Unacceptable	Note: Serum and plasma submissions must be separated from cells.	
Whole blood (gray-top)	Room temperature: 24 hours Refrigerated: 72 hours Frozen: Unacceptable				
Note: Serum and plasma submissions must be separated from cells.					
Performing Site	Quest Diagnostics Nichols Institute, Valencia				

Lead, Blood	
Message	Removal of demographic "ask at order entry" questions in CPU mapping. Information for public health reporting is still required for applicable assays and should be included with order but will no longer be required in transmitted order. CPU mapping will include assay result codes only.

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Effective Date	2/26/2013													
Test Code	4861W													
Performing Site	Quest Diagnostics Nichols Institute, Valencia													
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>4861X</td> <td>LEAD, BLOOD (PRIORITY)</td> </tr> <tr> <td>4861I</td> <td>LEAD, BLOOD (OSHA)</td> </tr> <tr> <td>4861IX</td> <td>LEAD, BLOOD (OSHA PRIORITY)</td> </tr> <tr> <td>4861CP</td> <td>LEAD CAPILLARY</td> </tr> <tr> <td>4080W</td> <td>HEAVY METALS PANEL, BLOOD</td> </tr> </tbody> </table>		Test Codes:	Name:	4861X	LEAD, BLOOD (PRIORITY)	4861I	LEAD, BLOOD (OSHA)	4861IX	LEAD, BLOOD (OSHA PRIORITY)	4861CP	LEAD CAPILLARY	4080W	HEAVY METALS PANEL, BLOOD
Test Codes:	Name:													
4861X	LEAD, BLOOD (PRIORITY)													
4861I	LEAD, BLOOD (OSHA)													
4861IX	LEAD, BLOOD (OSHA PRIORITY)													
4861CP	LEAD CAPILLARY													
4080W	HEAVY METALS PANEL, BLOOD													

Pneumocystis jiroveci (carinii), DFA	
Effective Date	2/26/2013
<i>Former Test Name</i>	<i>Pneumocystis jiroveci (carinii) Antigen Detection</i>
Test Code	7745
Specimen Requirements	3 mL (2 mL) bronchial lavage/wash or sputum Alternatives: Bronchial brushing or Two acetone fixed slides from bronchial brushing/wash
Instructions	1. Source of specimen is required, please include on requisition. 2. Respiratory specimens such as sputum, bronchial wash, bronchoalveolar lavage, or pleural fluid collected in sterile container are acceptable. Ship specimens on cold packs. 3. Unacceptable specimens: specimen in fixatives, slides fixed with ethanol or formalin.
Transport Temperature	Refrigerated
Specimen Stability	Bronchial lavage/wash, sputum: Room temperature: Unacceptable Refrigerated: 7 days Frozen: Unacceptable Slides: Room temperature: 7 days Refrigerated: 7 days Frozen: 30 days
Performing Site	Quest Diagnostics Nichols Institute, Valencia

RPR (Monitor) with Reflex to Titer	
Effective Date	2/26/2013
Test Code	799
Reject Criteria	Gross hemolysis; gross lipemia
Instructions	Remove current collection instructions
Transport Temperature	Room temperature

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Set-up/Analytic Time	Set up: Tues-Sat; Report available: 1-5 days											
Always Message	The RPR is a non-treponemal-specific test; therefore, a treponemal-specific confirmatory test should be performed unless prior syphilis infection has been documented for this patient.											
Performing Site	Quest Diagnostics Nichols Institute, Valencia											
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>8600747</td> <td>RPR Screen</td> </tr> <tr> <td colspan="2"><i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 799-2 Reflex RPR Titer</i></td> </tr> <tr> <th>Result Code</th> <th>Result Name</th> </tr> <tr> <td>86007408</td> <td>RPR Titer</td> </tr> </tbody> </table>		Result Code	Result Name	8600747	RPR Screen	<i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 799-2 Reflex RPR Titer</i>		Result Code	Result Name	86007408	RPR Titer
Result Code	Result Name											
8600747	RPR Screen											
<i>This is a true reflex. Please build the unit codes below separately. Non-Orderable Reflex 799-2 Reflex RPR Titer</i>												
Result Code	Result Name											
86007408	RPR Titer											
Additional Information	If the RPR Screen is Reactive, then the RPR Titer will be performed at an additional charge (CPT code 86593).											

Susceptibility, <i>Mycobacterium tuberculosis</i>, First-tier Drugs	
Clinical Significance	Susceptibility reports can be used as a guide in the choice of first course therapy or in confirming antimicrobial resistance that leads to a further course of treatment. Also used to estimate the prevalence of primary and acquired antimicrobial resistance in a community.
Effective Date	2/26/2013
Former Test Name	<i>AFB Susceptibility: M. tuberculosis Primary Drugs Susceptibility</i>
Test Code	5649
Specimen Requirements	Pure culture of mycobacteria in Agar slant submitted in double walled container.
Instructions	Pure culture agar slant/plate or broth-based media must be safely contained in double-walled container. Transport at room temperature. Mixed or contaminated cultures are not acceptable.
Specimen Stability	Room Temperature: 30 days Refrigerated: 30 days Frozen: Unacceptable
Always Message	The units of measure, in mcg/mL, are the critical concentrations as they relate to the agar proportion method. The critical concentration is the lowest concentration that inhibits 95% of "wild type" strains of <i>M. tuberculosis</i> that have not been exposed to the drug, but that simultaneously does not inhibit strains of <i>M. tuberculosis</i> that are considered resistant when isolated from patients are not responding to therapy. This test was performed on the BACTEC MGIT 960 System.
Methodology	Broth Based Susceptibility (a variation of the Agar Proportion Method)
Performing Site	Quest Diagnostics Nichols Institute, Valencia

T3, Reverse	
Message	Test is now approved for New York patients.
Effective Date	2/26/2013
Former Test Name	<i>Triiodothyronine, Reverse (RT3)</i>
Test Code	3236
Assay Category	FDA Exempt

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Performing Site	Quest Diagnostics Nichols Institute, Valencia
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Tryptase	
Effective Date	3/4/2013
Test Code	3460
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 2 days Refrigerated: 7 days Frozen: 1 month
Set-up/Analytic Time	Set up: Tues,Thurs, Sat; Report available: 1-4 days
Reference Range	<11.0 ug/L
Assay Category	FDA Approved/Cleared
Performing Site	Quest Diagnostics Nichols Institute, Valencia

AFB Identification Mycobacterium spp. by HPLC	
Effective Date	3/12/2013
Former Test Name	AFB Identification Mycobacterium spp. by HPLC reflex Suscept
Test Code	5648
Performing Site	Quest Diagnostics Nichols Institute, Valencia
Additional Information	Add to Notes: 6. If Mycobacterium tuberculosis is suspected please order test code 2939 AFB IDENTIFICATION BY DNA PROBE [GEN PROBE] W/REFLEX HPLC.

Chlamydia trachomatis Antigen, DFA	
Effective Date	3/12/2013
Former Test Name	Chlamydia trachomatis Antigen Detection [DFA]
Test Code	2440
Specimen Requirements	Specimen 1: Smear/Slides 3.0 (2.0) Alternate:UTM/M4 Transport Media/Swab See COLLECTION INSTRUCTIONS Alternate: VCM Transport Media 3.0 mL (1.0mL)
Instructions	<ol style="list-style-type: none"> Specimens should be collected early in the acute phase of infection. The chance of microorganism recovery is best during the first 3 days after onset and is greatly reduced beyond 5 days with many microorganisms Two prepared slides or smears can be submitted. Fix with methanol. Place in slide holder. Ship at ambient temperature Acceptable specimens: Urethral, cervical, rectal mucosal, eye, nasopharyngeal specimens. To maintain optimum viability, place swab or fluid into UTM or equivalent Chlamydia transport medium. Transport the specimen to the laboratory as soon as possible. Best recovery is obtained when the specimens are refrigerated at 2-8°C or kept on wet ice following collection and while in transit. If there will be a long delay before processing, specimens in UTM or equivalent should be frozen at -70°C or colder and transported on dry ice. Storage or transport at -20°C is not acceptable. Unacceptable specimens: Urine, wooden shaft or calcium alginate swabs, dry swabs. Swabs in bacterial gel-based transport

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	<p>media, swabs in nucleic acid transport media, tissues in fixatives. Broken slides.</p> <p>6. Specimen source is essential because processing and set up is dependent on it. Indicate on the requisition form where specimen was obtained.</p> <p>9. Universal transport media (UTM) and dacron-tipped swabs with plastic or fine-wire shafts available for use with UTM are provided. Please call Client Services, 800-421-4449 to request media.</p>
Specimen Stability	<p>Specimen 1: Smear/Slides Room temperature: 14 days Refrigerated: 14 days Frozen: 14 days</p> <p>Alternate:UTM/M4 Transport Media/Swab Room temperature: 24 hours Refrigerated: 72 hours Frozen: 7 days</p> <p>Alternate: VCM Transport Media Room temperature: 24 hours Refrigerated: 72 hours Frozen: 7 days</p>
Performing Site	Quest Diagnostics Nichols Institute, Valencia

<i>Chlamydia trachomatis</i> Culture	
Effective Date	3/12/2013
Test Code	2400
Specimen Requirements	<p>Specimen 1: UTM/M4 Transport Media/Swab 3.0ml (1.0ml) See COLLECTION INSTRUCTIONS</p> <p>Alternate: VCM Transport Media 3.0 mL (1.0mL)</p>
Instructions	<p>1. Specimen source is essential because processing and set up is dependent on it. Indicate on the requisition form where specimen was obtained.</p> <p>2. Specimens should be collected early in the acute phase of infection. The chance of microorganism recovery is best during the first 3 days after onset and is greatly reduced beyond 5 days with many microorganisms</p> <p>3. Acceptable specimens: Urethral, cervical, rectal mucosal, eye, nasopharyngeal (aspirate/wash/swab) specimens, body fluid, seminal fluid.</p> <p>4. To maintain optimum viability, place swab or fluid into UTM or equivalent Chlamydia transport medium and transport the specimen to the laboratory as soon as possible. Best recovery is obtained when the specimens are refrigerated at 2-8°C or kept on wet ice following collection and while in transit. If there will be a long delay before processing, specimens in UTM or equivalent should be frozen at -70°C or colder and transported on dry ice. Storage or transport at -20°C is not acceptable. Raw (unpreserved) samples should only be refrigerated and not frozen.</p> <p>5. Unacceptable specimens: Urine, wooden shaft or calcium alginate swabs, dry swabs. Swabs in bacterial gel-based transport media, swabs in nucleic acid transport media, tissues in fixatives</p> <p>6. Universal transport media (UTM) and dacron-tipped swabs with plastic or fine-wire shafts available for use with UTM are provided. Please call Client Services, 800-421-4449 to request media</p>
Specimen Stability	<p>Specimen 1: UTM/M4 Transport Media/Swab Room temperature: 24 hours Refrigerated: 72 hours Frozen: 7 days</p> <p>Alternate: VCM Transport Media Room temperature: 24 hours Refrigerated: 72 hours Frozen: 7 days</p>
Performing Site	Quest Diagnostics Nichols Institute, Valencia

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Growth Hormone											
Effective Date	3/12/2013										
Test Code	3182										
Specimen Requirements	1 mL (0.5 mL) Serum										
Reference Range	< 20 years: < or = 13.0 ng/mL > or = 20 years: < or = 10.0 ng/mL										
Always Message	<p>Because of a pulsatile secretion pattern, random (unstimulated) growth hormone (GH) levels are frequently undetectable in normal children and adults are not reliable for diagnosing GH deficiency. Regarding suppression tests, failure to suppress GH is diagnostic of acromegaly. Typical GH response in healthy subjects:</p> <p>Using the glucose tolerance (GH suppression) test, acromegaly is ruled out if the patient's GH level is <4.0 ng/mL at any point in the timed sequence. Using GH stimulation testing, the following result at any point in the timed sequence makes GH deficiency unlikely:</p> <p>Adults (> or = 20 years) Insulin Hypoglycemia: > or = 5.1 ng/mL Arginine/GHRH > or = 4.1 ng/mL Children (< 20 years) All Stimulation Tests > or = 10.0 ng/mL</p>										
Performing Site	Quest Diagnostics Nichols Institute, Valencia										
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>3171</td> <td>Growth Hormone (GH), 2 Specimens</td> </tr> <tr> <td>3175</td> <td>Growth Hormone (GH), 3 Specimens</td> </tr> <tr> <td>3185</td> <td>Growth Hormone (GH), 4 Specimens</td> </tr> <tr> <td>3195</td> <td>Growth Hormone (GH), 5 Specimens</td> </tr> </tbody> </table>	Test Codes:	Name:	3171	Growth Hormone (GH), 2 Specimens	3175	Growth Hormone (GH), 3 Specimens	3185	Growth Hormone (GH), 4 Specimens	3195	Growth Hormone (GH), 5 Specimens
Test Codes:	Name:										
3171	Growth Hormone (GH), 2 Specimens										
3175	Growth Hormone (GH), 3 Specimens										
3185	Growth Hormone (GH), 4 Specimens										
3195	Growth Hormone (GH), 5 Specimens										

Respiratory Virus Panel, DFA	
Effective Date	3/12/2013
Former Test Name	<i>Respiratory Infection Evaluation, Viral</i>
Test Code	2425
Specimen Requirements	<p>Specimen 1: Viral Transport Media or equivalent 3.0mL (1.0mL)</p> <p>Alternates: M4 / VCM Transport Media/Swab 3.0mL (1.0mL) Sterile Container/Tube 3.0mL (1.0mL) Smear/Slides 8.0 (4.0)</p>
Instructions	<p>Collection instructions</p> <ol style="list-style-type: none"> 1. Source of specimen is required, please include on requisition. 2. Specimens should be collected early in the acute phase of infection. The chance of viral recovery is best during the first 3 days after onset and is greatly reduced beyond 5 days with many viruses. 3. Submit 8 acetone-fixed slides or specimens in viral transport media. <p>Acceptable specimens: Nasopharyngeal swab/washings/aspirate, bronchial lavage.</p> <ol style="list-style-type: none"> 4. Unacceptable specimens: Throat swabs on patients less than 2 years of age, non-respiratory sites, specimen in nucleic acid transport system, dry swabs, wooden or calcium alginate swabs, samples received ambient or frozen at -20 degrees C. 5. Specimens received more than 72 hours from time of draw must be frozen at -70C or on dry ice. Do not freeze at -20 C. Virus loses infectivity. 6. Ship specimens on cold pack or on dry ice. 7. Viral transport media and dacron-tipped swabs with plastic or fine-wire shafts available for use are provided. Please call Client Services, 800-421-4449 to request media.

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Specimen Stability	<p>Specimen 1: Viral Transport Media or equivalent Room temperature: Unacceptable Refrigerated: 4 days Frozen: 30 days</p> <p>Alternate: M4 / VCM Transport Media/Swab Room temperature: Unacceptable Refrigerated: 4 days Frozen: 30 days</p> <p>Alternate: Sterile Container/Tube Room temperature: Unacceptable Refrigerated: 72 hours Frozen: Unacceptable</p> <p>Alternate: Smear/Slides Room temperature: 7 days Refrigerated: 7 days Frozen: 7 days</p>														
Performing Site	Quest Diagnostics Nichols Institute, Valencia														
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>2424</td> <td>Parainfluenza Types 1-3 Antigen</td> </tr> <tr> <td>2423</td> <td>Influenza Virus, Types A & B Detection [DFA]</td> </tr> <tr> <td>2523</td> <td>Influenza Virus, Types A Detection [DFA]</td> </tr> <tr> <td>2524</td> <td>Influenza Virus, Types B Detection [DFA]</td> </tr> <tr> <td>2509</td> <td>Adenovirus Antigen Detection</td> </tr> <tr> <td>2704</td> <td>Respiratory Syncytial Virus Antigen Detection [DFA]</td> </tr> </tbody> </table>	Test Codes:	Name:	2424	Parainfluenza Types 1-3 Antigen	2423	Influenza Virus, Types A & B Detection [DFA]	2523	Influenza Virus, Types A Detection [DFA]	2524	Influenza Virus, Types B Detection [DFA]	2509	Adenovirus Antigen Detection	2704	Respiratory Syncytial Virus Antigen Detection [DFA]
Test Codes:	Name:														
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2423	Influenza Virus, Types A & B Detection [DFA]														
2523	Influenza Virus, Types A Detection [DFA]														
2524	Influenza Virus, Types B Detection [DFA]														
2509	Adenovirus Antigen Detection														
2704	Respiratory Syncytial Virus Antigen Detection [DFA]														

Group B Strep, PCR	
Effective Date	3/18/2013
Former Test Name	<i>Streptococcus Group B DNA DetectR™</i>
Test Code	9640
Always Message	According to the College of American Pathologists (CAP), all patients testing negative for GBS by direct PCR should be cultured for GBS by the broth method.
Performing Site	Quest Diagnostics Nichols Institute, Valencia

Ferritin	
Clinical Significance	Useful in the diagnosis of hypochromic, microcytic anemias. Decreased in iron deficiency anemia and increased in iron overload.
Effective Date	3/19/2013
Test Code	3170
Specimen Requirements	1.0 mL (0.5 mL) Serum
Reject Criteria	Grossly hemolyzed
Specimen Stability	Applies to test code 3170 only:

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	Room temperature: 7 days Refrigerated: 7 days Frozen: 28 days					
Reference Range	Age (ng/mL)	Female (ng/mL)	Male (ng/mL)	Age	Female (ng/mL)	Male
	< 1 month	25 – 200	25 – 200	20 – 39 years	10 – 154	20 – 345
	1 – 2 months	200 – 600	200 – 600	40 – 59 years	10 – 232	20 – 380
	3 – 5 months	50 – 200	50 – 200	> 59 years	20 - 288	20 - 380
	6 – 11 months	7 – 140	7 – 140			
	1 – 19 years	10 – 143	10 – 105			
Always Message	Remove existing message.					
Methodology	Immunoassay					
Performing Site	Quest Diagnostics Nichols Institute, Valencia					
Tests Affected	Test Codes:		Name:			
	3535		Iron Status MonitR			

Redirects

Hemoglobin, Free, Plasma					
Effective Date	2/11/2013				
<i>Former Test Name</i>	<i>Hemoglobin Plasma [514]</i>				
<i>Former Test Code</i>	S51309				
Test Code	514				
Instructions	Centrifuge plasma within 1 hour of collection, transfer the plasma to a sterile, plastic, screw-cap vial(s), and send refrigerated (cold packs).				
Set-up/Analytic Time	Mon-Fri; Report available 2-3 days				
Performing Site	Quest Diagnostics Nichols Institute, Chantilly				
CPU Mappings	<table border="1"> <tr> <td>Result Code</td> <td>Result Name</td> </tr> <tr> <td>85988650</td> <td>Hemoglobin, Free, Plasma</td> </tr> </table>	Result Code	Result Name	85988650	Hemoglobin, Free, Plasma
Result Code	Result Name				
85988650	Hemoglobin, Free, Plasma				

Testosterone, Free and Total, LC/MS/MS			
Effective Date	2/19/2013		
<i>Former Test Name</i>	<i>Testosterone, Free and Total LC/MS/MS [36170][INY]</i>		
<i>Former Test Code</i>	S51829N		
Test Code	36170		
Performing Site	Quest Diagnostics Nichols Institute, Valencia		
CPU Mappings	<table border="1"> <tr> <td>Result Code</td> <td>Result Name</td> </tr> </table>	Result Code	Result Name
Result Code	Result Name		

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	85996653	Testosterone Total
	86000542	Testosterone Free

Biotin (Vitamin B7)					
Effective Date	2/26/2013				
Former Test Name	Biotin 1493				
Former Test Code	S41147				
Test Code	391				
CPT Codes	84591				
Specimen Requirements	2 mL (1 mL) frozen serum - protect from light				
Reject Criteria	Gross hemolysis, Lipemia, Received room temperature, Received refrigerated, Samples not protected from light, Samples other than serum				
Instructions	Allow sample to clot for 30 minutes. Centrifuge at 3000 rpm for 10 minutes and transfer serum to plastic, amber vial. If amber vial is not available. wrap tube in aluminum foil to protect from light. Freeze within 30 minutes and send frozen.				
Transport Temperature	Frozen				
Specimen Stability	Room temperature: Unacceptable Refrigerated: Unacceptable Frozen: 14 days				
Set-up/Analytic Time	Set up: Tue; Report Available: 19 days				
Reference Range	<table border="1"> <tr> <td>Pediatric (<12 years)</td> <td>57.0-2460.2 pg/mL</td> </tr> <tr> <td>Adult (> or =12 years)</td> <td>221.0-3004.0 pg/mL</td> </tr> </table>	Pediatric (<12 years)	57.0-2460.2 pg/mL	Adult (> or =12 years)	221.0-3004.0 pg/mL
Pediatric (<12 years)	57.0-2460.2 pg/mL				
Adult (> or =12 years)	221.0-3004.0 pg/mL				
Units Of Measure	pg/mL				
Always Message	The performance characteristics of the listed assay was validated by Cambridge Biomedical Inc. The US FDA has not approved or cleared this test. The results of this assay can be used for clinical diagnosis without FDA approval. Cambridge Biomedical Inc. is a CLIA certified, CAP accredited laboratory for performing high complexity assays such as this one.				
Methodology	Bioassay				
Assay Category	Laboratory Developed Test				
Performing Site	Cambridge Biomed Research Group				
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>85997128</td> <td>Vitamin B7 (Biotin)</td> </tr> </tbody> </table>	Result Code	Result Name	85997128	Vitamin B7 (Biotin)
Result Code	Result Name				
85997128	Vitamin B7 (Biotin)				

Vitamin B5 (Pantothenic Acid)	
Clinical Significance	Vitamin B5 (Pantothenic Acid) is a component of coenzyme A and phosphopantetheine both of which are involved in fatty acid metabolism. It is essential to almost all forms of life and is widely distributed in food.
Effective Date	2/26/2013

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Former Test Name	Pantothenic Acid					
Former Test Code	S44445					
Test Code	91030					
CPT Codes	84591					
Specimen Requirements	1.2 mL (0.6 mL) Serum Alternate: 1.2 mL (0.6 mL) Plasma collected in an EDTA (lavender-top) or Sodium heparin (green-top)					
Transport Temperature	Refrigerated					
Specimen Stability	Room temperature: 6 hours Refrigerated: 4 days Frozen: 30 days					
Set-up/Analytic Time	Mon,Wed, Fri; Report available 2-4 days					
Reference Range	<275 ng/mL					
Units Of Measure	ng/mL					
Methodology	Liquid Chromatography, Tandem Mass Spectrometry					
Assay Category	Laboratory Developed Test					
Performing Site	Quest Diagnostics Nichols Institute, Valencia					
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86008462</td> <td>Vitamin B5</td> </tr> </tbody> </table>		Result Code	Result Name	86008462	Vitamin B5
Result Code	Result Name					
86008462	Vitamin B5					

Cobalt, Serum/Plasma [345]	
Clinical Significance	Purpose: Occupational exposure monitoring, evaluation of orthopedic implants
Effective Date	3/5/2013
Former Test Name	Cobalt [3480]
Former Test Code	S50818
Test Code	345
CPT Codes	83018
Specimen Requirements	0.5 mL (0.2 mL) serum collected in no additive (royal blue-top) tube Alternate: 0.5 mL (0.2 mL) plasma collected in an EDTA (royal blue-top) tube
Instructions	All venipunctures should be performed using trace metal-free, dark/royal blue top tubes. Promptly centrifuge and separate serum or plasma specimens into acid-washed, plastic, screw-capped vial(s), using approved guidelines.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: 10 days Refrigerated: 10 days Frozen: 10 days
Set-up/Analytic Time	Set-up: Mon-Fri; Report available 3-4 days
Reference Range	0.1-0.4 mcg/L

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Units Of Measure	mcg/L					
Methodology	Inductively-Coupled Plasma/Mass Spectrometry					
Assay Category	Laboratory Developed Test					
Performing Site	Quest Diagnostics Nichols Institute, Chantilly					
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86008383</td> <td>Cobalt, Serum/Plasma</td> </tr> </tbody> </table>		Result Code	Result Name	86008383	Cobalt, Serum/Plasma
Result Code	Result Name					
86008383	Cobalt, Serum/Plasma					

Discontinued Tests

Comprehensive Drug Screen Stool [1864ST]	
Effective Date	1/7/2013
Test Code	S50604
Additional Information	The recommended alternative is 4129U Drugs Of Abuse Screen Urine W/reflex Confirmation performed at Quest Diagnostics Nichols Institute, Valencia

Bartonella DNA PCR, Tissue [47000]	
Effective Date	1/22/2013
Test Code	S49602
Additional Information	The replacement test is S51531 Bartonella DNA PCR [47000] performed at Focus Diagnostics

Deoxycorticosterone [6559X]	
Effective Date	1/22/2013
Test Code	S51354
Additional Information	The recommended alternative is: 90973 Deoxycorticosterone, LC/MS/MS, in the New Test Offerings Section

Treponema pallidum Total Antibodies, FTA-Antibodies Quant	
Effective Date	1/22/2013
Test Code	7560
Performing Site	Quest Diagnostics Nichols Institute, Valencia
Additional Information	Suggested alternative test 2104 Treponema pallidum Total Antibodies [IFA]

Vitamin B3 (Whole Blood Niacin)	
Effective Date	2/25/2013
Test Code	S44505

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Additional Information	The recommended alternative is: 91029 Vitamin B3 performed at Quest Diagnostics Nichols Institute, Valencia
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Zolpidem Screen Urine [9498]	
Effective Date	2/26/2013
Test Code	S49644
Additional Information	The recommended alternative is: <ul style="list-style-type: none"> 91258 Zolpidem Quantitation, Urine performed at Quest Diagnostics Nichols Institute, Chantilly

New York Update

SureSwab™ Herpes Simplex Virus, Type 1/2 DNA, Real-Time PCR	
Message	Test is now approved for New York patients.
Effective Date	12/12/2012
Test Code	90570
Performing Site	Quest Diagnostics Nichols Institute, Valencia

Vitamin B2 [36399]	
Message	** This test is not available for New York patient testing. **
Effective Date	1/29/2013
Test Code	S49825
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

Testosterone, Free, Total, and Sex Hormone Binding Globulin					
Message	Test is now approved for New York patients.				
Effective Date	1/30/2013				
Test Code	3231				
Performing Site	Quest Diagnostics Nichols Institute, Valencia				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>37073</td> <td>Testosterone, Total and Free and Sex Hormone Binding Globulin</td> </tr> </tbody> </table>	Test Codes:	Name:	37073	Testosterone, Total and Free and Sex Hormone Binding Globulin
Test Codes:	Name:				
37073	Testosterone, Total and Free and Sex Hormone Binding Globulin				

Testosterone, Total, LC/MS/MS	
Message	Test is now approved for New York patients.
Effective Date	1/30/2013

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Test Code	3922	
Performing Site	Quest Diagnostics Nichols Institute, Valencia	
Tests Affected	Test Codes:	Name:
	36170	Testosterone, Free and Total. LC/MS/MS

Send Outs

Lyme Disease Antibody Index for CNS Infection	
Effective Date	1/22/2013
Test Code	S52388
Specimen Requirements	2 mL serum (1.0 mL) AND 2 mL CSF (1.0 mL)
Performing Site	Focus Diagnostics

Sporothrix Antibody [9673]	
Clinical Significance	Aiding in the diagnosis of extracutaneous sporotrichosis.
Effective Date	1/22/2013
Test Code	S49883
Reject Criteria	Gross hemolysis; Gross lipemia
Set-up/Analytic Time	Mon,Wed,Fri; Report available: 1-4 days
Performing Site	Mayo Medical Laboratories

Acetone Blood [205]	
Effective Date	1/29/2013
Test Code	S41710
Specimen Requirements	1 mL (0.5 mL) whole blood collected in a fluoride oxalate (gray-top) tube Alternative: 1 mL (0.5 mL) whole blood (EDTA or heparin)
Instructions	Do not use alcohol solutions as skin preparation for drawing specimens. Use non-alcohol solutions such as Betadine(R) or Zephiran (R). Keep transport container tightly sealed.
Set-up/Analytic Time	Set-up: Tue-Sat; Report available: 72 hours
Reference Range	None detected
Always Message	Reportable Limit: 5 mg/dL
Performing Site	Quest Diagnostics, West Hills

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Acylglycines Quant [81249]																																					
Effective Date	1/29/2013																																				
Test Code	S47310																																				
Specimen Requirements	10 mL (4 mL minimum) random urine collected in a 10-mL urine tube																																				
Reject Criteria	Specimens other than urine Received room temperature																																				
Instructions	Collect a random urine specimen (no preservative). Patient age is required. Include family history, clinical condition (asymptomatic or acute episode), diet and drug therapy information.																																				
Specimen Stability	Refrigerated: 24 hours Frozen: 1 year																																				
Performing Site	Mayo Medical Laboratories																																				
CPU Mappings	<table border="1"> <thead> <tr> <th>VAL Result Code:</th> <th>Result Name:</th> </tr> </thead> <tbody> <tr> <td>100509</td> <td>Ethylmalonic Acid</td> </tr> <tr> <td>100510</td> <td>2-Methylsuccinic Acid</td> </tr> <tr> <td>100511</td> <td>Glutaric Acid</td> </tr> <tr> <td>100512</td> <td>Isobutyrylglycine</td> </tr> <tr> <td>47310</td> <td>n-Butyrylglycine</td> </tr> <tr> <td>100513</td> <td>2-Methylbutyrylglycine</td> </tr> <tr> <td>100514</td> <td>Isovalerylglucose</td> </tr> <tr> <td>47311</td> <td>n-Hexanoylglycine</td> </tr> <tr> <td>100515</td> <td>n-Octanoylglycine</td> </tr> <tr> <td>47312</td> <td>3-Phenylpropionylglycine</td> </tr> <tr> <td>100516</td> <td>Suberylglucose</td> </tr> <tr> <td>101781</td> <td>trans-Cinnamoylglycine</td> </tr> <tr> <td>100587</td> <td>Dodecanedioic Acid</td> </tr> <tr> <td>100588</td> <td>Tetradecanedioic Acid</td> </tr> <tr> <td>100589</td> <td>Hexadecanedioic Acid</td> </tr> <tr> <td>110833</td> <td>Interpretation</td> </tr> <tr> <td>86004979</td> <td>Reviewed By</td> </tr> </tbody> </table>	VAL Result Code:	Result Name:	100509	Ethylmalonic Acid	100510	2-Methylsuccinic Acid	100511	Glutaric Acid	100512	Isobutyrylglycine	47310	n-Butyrylglycine	100513	2-Methylbutyrylglycine	100514	Isovalerylglucose	47311	n-Hexanoylglycine	100515	n-Octanoylglycine	47312	3-Phenylpropionylglycine	100516	Suberylglucose	101781	trans-Cinnamoylglycine	100587	Dodecanedioic Acid	100588	Tetradecanedioic Acid	100589	Hexadecanedioic Acid	110833	Interpretation	86004979	Reviewed By
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86004979	Reviewed By																																				

IBD sgi Diagnostic (1800)	
Effective Date	1/29/2013
Test Code	S52567
Always Message	<p>General Test Information Patient test results are based on the Smart Diagnostic Algorithm which interprets complex patterns among assay values from a combination of serologic, genetic, and inflammatory markers. The test was developed using 1,520 samples from well-characterized IBD patients and non-IBD disease and healthy controls.</p>

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Overall performance of PROMETHEUS IBD sgi Diagnostic: Sensitivity IBD 74%, CD 89%, UC 98%; Specificity IBD 90%, CD 81%, UC 83%. Smart Diagnostic Algorithm technology was trained (n=1083; 39% CD, 21% UC, 29% disease controls, and 11% healthy controls) and validated (n=437; 35% CD, 23% UC, 28% disease controls, and 14% healthy controls) from results of serology, genetic, and inflammation assays. A test result is the product of a collective evaluation of all individual assays by a complex algorithm. From this, it is possible to produce a result of "Pattern Not Consistent with IBD" when one or more assay values are above the specified reference value. It is also possible to produce a result of "Pattern Consistent with IBD" when all individual assay values are below the specified reference value. Reference values have been calculated based on a population of non-IBD controls.

Patient samples exhibiting a pattern consistent with IBD but not conclusive for a Crohn's Disease or Ulcerative Colitis pattern determination.

References available on request.

Prometheus diagnostic services provide important information to aid in the diagnosis and management of certain diseases. Test results should be used with other clinical and diagnostic findings to make a diagnosis. This test was developed and its performance characteristics determined by Prometheus Laboratories Inc. It has not been cleared or approved by the U.S. Food and Drug Administration. This test may be covered by one or more US pending or issued patents - see prometheuslabs.com for details

Performing Site

Prometheus

CPU Mappings

Result Code	Result Name
113781	Patient Test Result
113763	ASCA IgA ELISA
113764	ASCA IgG ELISA
113765	Anti-OmpC IgA ELISA
113766	Anti-CBir1 IgG ELISA
113767	Anti-A4-Fla2 IgG ELISA
113768	Anti-FlaX IgG ELISA
113769	AutoAntibody ELISA
113770	IFA Perinuclear Pattern
113771	DNase Sensitivity
113772	ATG16L1 SNP (rs2241880)
113773	ECM1 SNP (rs3737240)
113774	NKX2-3 SNP (rs10883365)
113775	STAT3 SNP (rs744166)
113776	ICAM-1
113777	VCAM-1
113778	VEGF
113779	CRP
113780	SAA

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Monogenic Diabetes (MODY) Eval [885]	
Effective Date	1/29/2013
Former Test Name	Monogenic Diabetes (MODY) Eval [850]
Test Code	S51162
CPT Codes	81406+AT (X2) and 81479+AT (X8)
Instructions	Hemolysis may compromise DNA recovery and integrity after 48 hrs
Methodology	DNA sequencing, Multiplex Ligation-dependent Probe Amplification
Performing Site	Athena Diagnostics
Additional Information	<p>Indications for Testing: Non-ketotic insulin-sensitive hyperglycemia in individuals of any age; Family history of diabetes</p> <p>Profile Includes: GCK (MODY2) DNA Sequencing and Deletion Test, HNF4A (MODY1) DNA Sequencing and Deletion Test, IPF1 (MODY4) DNA Sequencing Test, TCF1 (MODY3) DNA Sequencing and Deletion Test, TCF2 (MODY5) DNA Sequencing and Deletion Test</p>

Phospholipids [717]	
Effective Date	1/29/2013
Test Code	S51301
Reject Criteria	Plasma; lipemia
Instructions	Centrifuge within 1 hour of collection. Immediately separate serum specimens from the cells into clean, plastic, screw-capped vial(s).
Transport Temperature	Refrigerated
Specimen Stability	Frozen: 60 days
Set-up/Analytic Time	Set up: Mon, Thurs; Report available: 1-4 days
Performing Site	This test previously performed at Quest Diagnostics Nichols Institute, San Juan Capistrano, will now be performed at Quest Diagnostics Nichols Institute, Chantilly.

Cimetidine [1262]	
Effective Date	2/4/2013
Test Code	S43665
Specimen Requirements	3 mL serum collected in a red-top tube (no gel) --or-- 3 mL plasma collected in an EDTA (lavender-top) or EDTA (pink-top) tube
Reject Criteria	Polymer gel separation tube (SST or PST)
Specimen Stability	Room temperature, Refrigerated and Frozen: 30 days
Set-up/Analytic Time	Set up: Thurs; Report available: 2 days
Performing Site	National Medical Services

Metoclopramide, Serum/Plasma [3041SP]	
Effective Date	2/4/2013

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Test Code	S52175
Specimen Requirements	3 mL (1.2 mL minimum) serum collected in a red-top tube (no gel) --or-- 3 mL plasma collected in an EDTA (lavender-top) or EDTA (pink-top) tube
Specimen Stability	Room temperature: 14 days Refrigerated and Frozen: 30 days
Set-up/Analytic Time	Set up: Thurs; Report available: 2 days
Performing Site	National Medical Services

Prostaglandins PG-D2	
Effective Date	2/4/2013
Test Code	S47815
Specimen Stability	Room temperature: Unacceptable Refrigerated: 24 Hours Frozen: 6 Months
Performing Site	Interscience

CD57, CD3, CD8, Flow Cytometry																			
Effective Date	2/11/2013																		
Test Code	S52011																		
Reference Range	<table border="1"> <tr> <td>CD57+/CD3- of % Lymphs</td> <td>1 - 10 % Lymphocytes</td> </tr> <tr> <td>CD57+/CD3- of % WBC</td> <td>1 - 4 % WBC</td> </tr> <tr> <td>CD57+/CD3- Cells/uL</td> <td>20 - 258 Cells/uL</td> </tr> <tr> <td>CD57+/CD3-/CD8- of % Lymph</td> <td>1 - 5 % Lymphocytes</td> </tr> <tr> <td>CD57+/CD3-/CD8- of % WBC</td> <td>1 - 3 % WBC</td> </tr> <tr> <td>CD57+/CD3-/CD8- Cells/uL</td> <td>20 - 114 Cells/uL</td> </tr> <tr> <td>CD57+/CD8- of % Lymphs</td> <td>1 - 15 % Lymphocytes</td> </tr> <tr> <td>CD57+/CD8- of % WBC</td> <td>1 - 4 % WBC</td> </tr> <tr> <td>CD57+/CD8- Cells/uL</td> <td>20 - 248 Cells/uL</td> </tr> </table>	CD57+/CD3- of % Lymphs	1 - 10 % Lymphocytes	CD57+/CD3- of % WBC	1 - 4 % WBC	CD57+/CD3- Cells/uL	20 - 258 Cells/uL	CD57+/CD3-/CD8- of % Lymph	1 - 5 % Lymphocytes	CD57+/CD3-/CD8- of % WBC	1 - 3 % WBC	CD57+/CD3-/CD8- Cells/uL	20 - 114 Cells/uL	CD57+/CD8- of % Lymphs	1 - 15 % Lymphocytes	CD57+/CD8- of % WBC	1 - 4 % WBC	CD57+/CD8- Cells/uL	20 - 248 Cells/uL
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Always Message	<p>It has been reported that lower frequencies of circulating CD57+ NK cells can be associated with chronic Lyme Disease. Increasing levels of CD57+CD3- lymphocytes over time for patients on antibiotic therapy appeared to correlate with clinical improvement (Stricker, RA and E.E. Winger, Immunology Letters 76 (2001) pp 43-48) .</p> <p>This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute. Performance characteristics refer to the analytical performance of the test.</p>																		
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano																		
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86002787</td> <td>CD57+/CD3- of % Lymphs</td> </tr> <tr> <td>86002788</td> <td>CD57+/CD3- of % WBC</td> </tr> </tbody> </table>	Result Code	Result Name	86002787	CD57+/CD3- of % Lymphs	86002788	CD57+/CD3- of % WBC												
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86002787	CD57+/CD3- of % Lymphs																		
86002788	CD57+/CD3- of % WBC																		

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86002789	CD57+/CD3- Cells/uL
86002793	CD57+/CD3-/CD8- of % Lymph
86002794	CD57+/CD3-/CD8- of % WBC
86002795	CD57+/CD3-/CD8- Cells/uL
86002790	CD57+/CD8- of % Lymphs
86002791	CD57+/CD8- of % WBC
86002792	CD57+/CD8- Cells/uL

D-Xylose Absorption Blood Fasting [1198X]																																			
Effective Date	2/11/2013																																		
Test Code	S49112																																		
Specimen Requirements	4 mL (1 mL minimum) whole blood collected in a sodium fluoride (gray-top) tube																																		
Instructions	<p>For fasting test, patient should fast overnight before blood collection.</p> <p>4 mL blood, drawn 1 hour post oral ingestion of d-Xylose. Label sample vial with patient's name and the time of collection postdose (e.g., 1 hour, etc.).</p> <p>4 mL blood, drawn 2 hours post oral ingestion of d-Xylose. Label sample vial with patient's name and the time of collection postdose (e.g., 2 hour, etc.).</p>																																		
Set-up/Analytic Time	Set up: Mon, Thurs; Report available: Next day																																		
Reference Range	<table border="1"> <tr> <td colspan="2">d-Xylose Absortion Test, Blood, Fasting</td> </tr> <tr> <td colspan="2">Accompanies report</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2">d-Xylose Absortion Test, Blood, 1 Hour</td> </tr> <tr> <td>Age:</td> <td>ReferenceRange:</td> </tr> <tr> <td>< 6 years</td> <td>>14.9 mg/dL</td> </tr> <tr> <td>> or = 6 years</td> <td>>19.9 mg/dL</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2">d-Xylose Absortion Test, Blood, 2 hour</td> </tr> <tr> <td>Age:</td> <td>ReferenceRange:</td> </tr> <tr> <td>< 6 years</td> <td>>14.9 mg/dL</td> </tr> <tr> <td>> or = 6 years</td> <td>>19.9 mg/dL</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2">d-Xylose Absortion Test, Urine</td> </tr> <tr> <td> </td> <td>ReferenceRange:</td> </tr> <tr> <td>25 g dose</td> <td>4.1-8.2 g in 5hr urine</td> </tr> <tr> <td>5 g dose</td> <td>1.2-2.4 g in 5-hr urine</td> </tr> </table>	d-Xylose Absortion Test, Blood, Fasting		Accompanies report				d-Xylose Absortion Test, Blood, 1 Hour		Age:	ReferenceRange:	< 6 years	>14.9 mg/dL	> or = 6 years	>19.9 mg/dL			d-Xylose Absortion Test, Blood, 2 hour		Age:	ReferenceRange:	< 6 years	>14.9 mg/dL	> or = 6 years	>19.9 mg/dL			d-Xylose Absortion Test, Urine			ReferenceRange:	25 g dose	4.1-8.2 g in 5hr urine	5 g dose	1.2-2.4 g in 5-hr urine
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Performing Site	This test previously performed at Quest Diagnostics Nichols Institute, San Juan Capistrano will now be performed at Quest Diagnostics Nichols Institute, Chantilly.	
CPU Mappings	Test code: S49112	
	Result Code:	Result Name:
	85990790	d-Xylose, Blood, Fasting
	Test code: S49113	
	85990784	d-Xylose, Blood, 1 hr
	Test code: S49114	
	85990785	d-Xylose, Blood, 2hr
	Test code: S49104	
	86002858	d-Xylose, Urine, 5hr
	86002859	Urine Total Volume
Tests Affected	Test Codes:	Name:
	S49113	D-Xylose Absorption Blood 1 Hour [104521P]
	S49114	D-Xylose Absorption Blood 2 Hours [104547P]]
	S49104	D-Xylose Absorption Urine 5Hr [16469P]

HIV-1 Integrase Genotype [16868]					
Effective Date	2/11/2013				
Test Code	S52113				
Always Message	<p>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.</p> <p>The method used in this test is RT-PCR and sequencing of the HIV-1 integrase gene. The phrases "resistance predicted" and "probable or emerging resistance" refer to the application of the interpretive rules. The FDA has not reviewed all of the interpretive rules used by the laboratory to predict drug resistance. FDA may not currently recognize some of the HIV gene mutations reported as predictive of drug resistance, but the laboratory considers these mutations to be associated with resistance to anti-viral drugs based on current clinical or scientific studies.</p> <p>The test has been validated pursuant to CLIA regulations and is not considered investigational or for research use only. Treatment decisions should be made in consideration of all relevant clinical and laboratory findings.</p>				
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano				
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>112691</td> <td>Value of Last Viral Load</td> </tr> </tbody> </table>	Result Code	Result Name	112691	Value of Last Viral Load
	Result Code	Result Name			
112691	Value of Last Viral Load				

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	112692	Date Viral Load Collected
	112251	Raltegravir Resistance
	86008936	Elvitegravir Resistance
Additional Information	Report format change	

Prekallikrein (Fletcher Factor) Activity [10334X]	
Effective Date	2/11/2013
Test Code	S51368
Additional Information	There is no recommended alternative for this test

Serotonin, Blood	
Effective Date	2/12/2013
Test Code	S51656
Reference Range	56-244 ng/mL
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

Hexosaminidase A and Total, S													
Message	*This test is now available for New York patient testing.												
Effective Date	2/21/2013												
Former Test Name	Hexosaminidase A and Total Hexosaminidase, Serum												
Test Code	S52578												
Instructions	Forms: New York State Clients-Informed consent is required. Please document on the request form or electronic order that a copy is on file.												
Transport Temperature	Frozen												
Reference Range	<table border="1"> <tr> <th colspan="2">Hexosaminidase Total, S</th> </tr> <tr> <td>< or =15 yrs</td> <td>> or =20 nmol/min/mL</td> </tr> <tr> <td>> or =16 yrs</td> <td>10.4-23.8 nmol/min/mL</td> </tr> <tr> <th colspan="2">Hexosaminidase Percent A,S</th> </tr> <tr> <td>< or =15 yrs</td> <td>20-90%</td> </tr> <tr> <td>> or =16 yrs</td> <td>56-80%</td> </tr> </table>	Hexosaminidase Total, S		< or =15 yrs	> or =20 nmol/min/mL	> or =16 yrs	10.4-23.8 nmol/min/mL	Hexosaminidase Percent A,S		< or =15 yrs	20-90%	> or =16 yrs	56-80%
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Units Of Measure	nmol/min/mL												
Performing Site	Mayo Medical Laboratories												
CPU Mappings	<table border="1"> <tr> <td>VAL Result Code:</td> <td>Result Name:</td> </tr> </table>	VAL Result Code:	Result Name:										
VAL Result Code:	Result Name:												

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	113795	Hexosaminidase Total, S
	113796	Hexosaminidase Percent A, S
	113797	Interpretation (NAGS)
	86004126	Reviewed By
Additional Information	The following result code will be removed from the VAL unit code: 113794	

Hexosaminidase A and Total, WBC													
Effective Date	2/21/2013												
Former Test Name	Hexosaminidase Blood [8775]												
Test Code	S49273												
Reference Range	<table border="1"> <tr> <th colspan="2">Hexosaminidase Total</th> </tr> <tr> <td>< or =15 yrs</td> <td>> or =20 nmol/min/mg</td> </tr> <tr> <td>> or =16 yrs</td> <td>16.4-36.2 nmol/min/mg</td> </tr> <tr> <th colspan="2">Hexosaminidase Percent A</th> </tr> <tr> <td>< or =15 yrs</td> <td>20-80% of total</td> </tr> <tr> <td>> or =16 yrs</td> <td>63-75% of total</td> </tr> </table>	Hexosaminidase Total		< or =15 yrs	> or =20 nmol/min/mg	> or =16 yrs	16.4-36.2 nmol/min/mg	Hexosaminidase Percent A		< or =15 yrs	20-80% of total	> or =16 yrs	63-75% of total
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> or =16 yrs	63-75% of total												
Units Of Measure	nmol/min/mg												
Performing Site	Mayo Medical Laboratories												
CPU Mappings	<table border="1"> <tr> <th>VAL Result Code:</th> <th>Result Name:</th> </tr> <tr> <td>35380</td> <td>Hexosaminidase Total, WBC</td> </tr> <tr> <td>35381</td> <td>Hexosaminidase Percent A, WBC</td> </tr> <tr> <td>35382</td> <td>Interpretation (NAGW)</td> </tr> <tr> <td>86009305</td> <td>Reviewed By</td> </tr> </table>	VAL Result Code:	Result Name:	35380	Hexosaminidase Total, WBC	35381	Hexosaminidase Percent A, WBC	35382	Interpretation (NAGW)	86009305	Reviewed By		
VAL Result Code:	Result Name:												
35380	Hexosaminidase Total, WBC												
35381	Hexosaminidase Percent A, WBC												
35382	Interpretation (NAGW)												
86009305	Reviewed By												

Toxocara Antibody, ELISA (Fluid) [60945]	
Message	This test is not available for NY patient testing
Effective Date	2/25/2013
Former Test Name	Toxocara Antibody, Fluid [60945]
Test Code	S50740
Reference Range	Negative
Always Message	<p>Reference Range: Negative</p> <p>As with many parasitic serology assays, antibodies induced by other parasitic infections may crossreact in this assay.</p>
Performing Site	Focus Diagnostics, Inc.

Toxocara Antibody, ELISA (Serum) [40945]	
Effective Date	2/25/2013
Former Test Name	Toxocara Abs [40945]
Test Code	S50345
Reference Range	Negative
Always Message	<p>Reference Range: Negative</p> <p>Results of this assay must be interpreted with caution, as broad variations in antibody response occur, and levels may remain elevated for years after infection. Further, as with many parasitic serology assays, antibodies induced by other parasitic infections may crossreact in this assay. Although a negative result usually rules out infection with Toxocara spp., parallel testing of serial samples may prove useful in following patients with suspected Toxocara infection.</p>
Performing Site	Focus Diagnostics, Inc.

Legionella pneumophila Antibodies (IgM)							
Effective Date	2/26/2013						
Former Test Name	Legionella Ab IgM [40605]						
Test Code	S41360						
CPT Codes	86713 (x2)						
Transport Temperature	Room temperature						
Specimen Stability	<p>Room temperature: 7 days</p> <p>Refrigerated: 14 days</p> <p>Frozen: 30 days</p>						
Set-up/Analytic Time	Set up: Mon-Fri; Report available: 1-4 days						
Reference Range	<p>Reference Range: <1:16</p> <p>IgM antibodies to Legionella pneumophila serogroup 1 and 6 additional L. pneumophila serogroups (2, 3, 4, 5, 6, 8) are measured using an IgM specific conjugate. We recommend that the IgM test always be performed in conjunction with the polyvalent antibody test.</p> <p>The IgM response to Legionella tends to develop concurrently with the IgG response and may remain elevated as long as the IgG response remains elevated. Cross reactions have been described with several species of bacteria and mycoplasma.</p> <p>This test was developed and its performance characteristics have been determined by Focus Diagnostics. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. Performance characteristics refer to the analytical performance of the test.</p>						
Performing Site	Focus Diagnostics						
CPU Mappings	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>41360</td> <td>L pneumophila (Sero 1)</td> </tr> <tr> <td>103045</td> <td>L pneumophila(Sero 2-6,8)</td> </tr> </tbody> </table>	Result Code	Result Name	41360	L pneumophila (Sero 1)	103045	L pneumophila(Sero 2-6,8)
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103045	L pneumophila(Sero 2-6,8)						