ANNOUNCEMENTS 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 #**
35299	Quetiapine, Serum/Plasma	2

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 #**
91334	**Beta-lactamase Gene Detection, Enteric Bacteria**	9/9/2013	2
91826	**HPV Genotypes 16,18/45**	10/7/2013	3
91805	**Platelet Antibody, Indirect (IgG), Flow Cytometry**	10/28/2013	4
91806	**Platelet Antibody, Indirect (IgM)**	10/28/2013	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 #**
11363		*Chlamydia trachomatis/Neisseria gonorrhoeae* RNA, TMA	10/7/2013	6
90887		**HPV mRNA E6/E7**	10/7/2013	7
90942		**HPV mRNA E6/E7 Reflex to Genotypes 16,18/45**	10/7/2013	7
2146		Babesia Organism Detection	10/8/2013	7
37523	*A52339*	Neutrophil Function, Oxidative Burst	10/28/2013	8

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 #**
S41930	Niacin	9/17/2013	9
S48877	Phagocytic Index, FC	10/28/2013	9

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 #**
S52276		Prostate Cancer Gene 3 (PCA3)	9/24/2013	9
S46515		Bicarbonate, Urine	10/7/2013	10
30540	*S43160*	**Bromide, Serum/Plasma**	10/7/2013	10
S43900		Glutethimide, Serum/Plasma	10/7/2013	10
S52174		Methyl Bromide as Metabolite, Blood	10/7/2013	11

Announcement

Recent discovery of rare falsely undetectable TSH variant

In May 2013, Siemens (manufacturer of the ultra-sensitive TSH assay in use at Quest Diagnostics) issued a product safety notice (#10814911) to inform its customers that "a rare variant of TSH, identified in a small cluster of patients, is not detected" because "the monoclonal antibody used in the reagent fail(s) to detect the TSH molecule" in these individuals. In the notice, Siemens underscores the importance of "co-interpretation of TSH results in conjunction with thyroxine and T3, patient history, and clinical signs and symptoms." Please contact Quest Diagnostics Client Services if you would like a copy of the notice.

The following month, Siemens and Kaiser Permanente jointly presented their findings of "Falsely Undetectable TSH in Four Commonly Used Immunoassays: A Possible Novel Human TSH Variant" at the 2013 Endocrine Society meeting. In the abstract [published in Endocrine Reviews June 2013, Vol. 34 (03_MeetingAbstracts): SAT-467], the authors write that "16 individuals (14 euthyroid and 2 hypothyroid), all but one of South Asian descent," "have been identified out of approximately two million Kaiser Permanente members in Northern California." The authors further advise that "health care providers should be aware that rare individuals may have falsely undetectable TSH results in some hyperselective TSH immunoassays." To read the entire abstract, go to www.endojournals.org and enter "Falsely Undetectable TSH" in the search bar.

Please note: Revision to the August Monthly Update

Quetiapine, Serum/Plasma	
Effective Date	**9/16/2013**
Test Code	**35299**
Transport Temperature	**Room temperature**
Specimen Stability	**Room temperature, Refrigerated, and Frozen: 21 days**
Performing Site	Quest Diagnostics Nichols Institute, Chantilly

New Test Offerings

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

Beta-lactamase Gene Detection, Enteric Bacteria	
Clinical Significance	This beta-lactamase assessment gene panel is designed for the rapid molecular detection of a wide range of clinically important beta-lactamase genes in gram-negative bacteria. Beta-lactamase genes detected by this test include TEM, SHV and CTX-M Extended Spectrum beta-lactamase (ESBL) genes, AmpC beta-lactamase genes CMY II, DHA, FOX, CMY I/MOX, ACC, ACT/MIR, the Klebsiella pneumoniae Carbapenemase gene (KPC) and the New Delhi Metallo-beta-lactamase gene (NDM-1). The test detects the presence of the various genes and at the same time provides information on beta-lactamase resistant genes yielding extra information for outbreak management.
Effective Date	**9/9/2013**
Test Code	**91334**
CPT Codes	**87999**
Specimen Requirements	**Pure culture of gram-negative enteric bacillus only, submitted on appropriate culture medium, safely contained.**
Instructions	**Sample must be isolated bacteria. Primary specimens are unacceptable. Organism cannot be frozen.** **Client needs to include organism identification.**
Transport Temperature	**Room temperature or refrigerated**
Specimen Stability	**Room temperature and Refrigerated: 72 hours** **Frozen: Unacceptable**

Set-up/Analytic Time	**Set up: Mon; Report available: 10 days**
Reference Range	**Not detected**
Always Message	**This test 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, Chantilly, VA. This test should not be used for diagnosis without confirmation by other medically established means.** **For more information on this test, go to http://education.questdiagnostics.com/faq/FAQ100**
Methodology	**Microarray**
Assay Category	**Research Use Only**
Performing Site	Quest Diagnostics Nichols Institute, Chantilly
CPU Mappings	

91334 Beta-lactamase Gene Detection,Enteric Bacteria	
Result Code	**Result Name**
86009854	**Organism ID:**
86009837	**Kleb pneumo carbama. (KPC)**
86009838	**New Delhi Met.-BL (NDM-1)**
86009839	**AmpC Cephalosp. CMYII**
86009840	**AmpC Cephalosp. DHA**
86009841	**AmpC Cephalosp. FOX**
86009842	**AmpC Cephalosp. ACC**
86009843	**AmpC Cephalosp. ACT/MIR**
86009844	**AmpC Cephalo. CMYI/MOX**
86009845	**ESBL CTX-M1**
86009846	**ESBL CTX-M2**
86009847	**ESBL CTX-M8**
86009848	**ESBL CTX-M9**
86009849	**ESBL CTX-M25**
86009850	**ESBL SHV G238S/A**
86009863	**ESBL SHV E240K**
86009851	**ESBL TEM E104K**
86009852	**ESBL TEM R164S/H/C**
86009853	**ESBL TEM G238S**

HPV Genotypes 16,18/45	
Effective Date	**10/7/2013**
Test Code	**91826**
CPT Codes	**87621 (x2)**

Specimen Requirements	**1 mL Liquid Cytology (PreservCyt®) Preservative (ThinPrep®)**
Instructions	**Labs performing cytology: Aliquot PreservCyt® solution before or after performance of liquid based cytology testing.** **PreservCyt®: Transfer 1 mL of PreservCyt® solution into Aptima® Vaginal Collection tube (orange label) or Aptima® Specimen Transfer tube (green label). Ship to lab.**
Transport Temperature	**Room temperature**
Specimen Stability	**Room temperature and Refrigerated: 60 days** **Frozen: 2 years**
Set-up/Analytic Time	**Set up: Mon, Wed, Fri; Report available: 3-6 days**
Reference Range	**Not Detected**
Always Message	**This test was performed using the APTIMA HPV 16, 18/45 genotype assay (Gen-Probe Inc.). The assay can differentiate HPV 16 from HPV 18 and/or HPV 45, but does not differentiate between HPV 18 and HPV 45.**
Methodology	**Transcription- Mediated Amplification (TMA)**
Performing Site	**In-house, Quest Diagnostics Nichols Institute, San Juan Capistrano**
CPU Mappings	**Result Code** / **Result Name** **86010019** / **HPV 16 RNA** **86010020** / **HPV 18/45 RNA**
Additional Information	**This new offering will replace the reflex to 19865 HPV Genotypes 16 and 18 in codes listed in the Test or Panels Affected Section below.**
Tests Affected	**Test Codes:** / **Name:** 90942 / HPV mRNA E6/E7 Reflex HPV 16,18/45

Platelet Antibody, Indirect (IgG), Flow Cytometry	
Message	*****This test is not available for New York patient testing*****
Clinical Significance	Circulating antibodies to platelets have been associated with immune and drug-induced thrombocytopenia. Circulating platelet antibodies may play a role in platelet destruction. Platelet antibodies may consist of a single isotype (IgG, IgM or IgA) or any combination of isotypes.
Effective Date	**10/28/2013**
Test Code	**91805**
CPT Codes	**86022**
Specimen Requirements	**2 mL (1 mL minimum) serum**
Reject Criteria	**Hemolysis; lipemia; icterus**
Instructions	**Collect 5 mL whole blood in a serum separator tube (red-top) and separate serum before submitting**
Transport Temperature	**Room temperature**
Specimen Stability	**Room temperature: 7 days** **Refrigerated: 14 days** **Frozen: 30 days**
Set-up/Analytic Time	**Set up: Mon-Fri; Report available: 2-5 days**

Reference Range	**Negative**
Always Message	**Circulating antibodies to platelets, detected by Flow Cytometry, are found in the sera of patients with immune mediated disorders. Platelet antibodies have been associated with ITP and drug-induced thrombocytopenia.** **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.**
Methodology	**Flow Cytometry**
Performing Site	**Quest Diagnostics Nichols Institute, San Juan Capistrano**
CPU Mappings	**Result Code** / **Result Name** **85969500** / **Platelet Ab,Indirect (IgG)**

Platelet Antibody, Indirect (IgM)	
Message	****This test is not available for New York patient testing****
Clinical Significance	Circulating antibodies to platelets have been associated with immune and drug-induced thrombocytopenia. Circulating platelet antibodies may play a role in platelet destruction. Platelet antibodies may consist of a single isotype (IgG, IgM or IgA) or any combination of isotypes.
Effective Date	**10/28/2013**
Test Code	**91806**
CPT Codes	**86022**
Specimen Requirements	**2 mL (1 mL minimum) serum**
Reject Criteria	**Hemolysis; lipemia; icterus**
Instructions	**Collect 5 mL whole blood in a serum separator tube (red-top) and separate serum before submitting**
Transport Temperature	**Room temperature**
Specimen Stability	**Room temperature: 7 days** **Refrigerated: 14 days** **Frozen: 30 days**
Set-up/Analytic Time	**Set up: Mon-Fri; Report available: 2-5 days**
Reference Range	**Negative**
Always Message	**Circulating antibodies to platelets, detected by Flow Cytometry, are found in the sera of patients with immune mediated disorders. Platelet antibodies have been associated with ITP and drug-induced thrombocytopenia.** **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.**
Methodology	**Flow Cytometry**
Performing Site	**Quest Diagnostics Nichols Institute, San Juan Capistrano**
CPU Mappings	**Result Code** / **Result Name** **85969510** / **Platelet Ab,Indirect (IgM)**

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*.

***Chlamydia trachomatis/Neisseria gonorrhoeae* RNA, TMA**	
Effective Date	**10/7/2013**
Former Test Name	*SureSwab® Chlamydia trachomatis/Neisseria gonorrhoeae RNA, TMA*
Test Code	11363
Specimen Requirements	**1 mL liquid cytology (PreservCyt®) preservative (ThinPrep®) collected in APTIMA® Specimen Transfer tube (green label) or APTIMA® Vaginal Collection Kit (orange label) or APTIMA® Unisex Swab Specimen Collection Kit.** **0.5 mL of SurePath® preservative fluid collected in APTIMA® Specimen Transfer tube (green label) or APTIMA® Vaginal Collection Kit (orange label).** Endocervical or urethral swabs in APTIMA® combo 2 assay unisex swab specimen collection kit. Vaginal swabs in the APTIMA® combo 2 assay vaginal swab collection kit. 2 mL urine using APTIMA® urine specimen collection kit.
Instructions	**Labs performing cytology: Aliquot PreservCyt® or SurePath® solution before performance of liquid based cytology testing.** **PreservCyt®: Transfer 1 mL of PreservCyt solution into APTIMA® Specimen Transfer tube (green label) or APTIMA® Vaginal Collection tube (orange label). Ship to lab.** **SurePath®: SurePath® fluid must be transferred to APTIMA® STM within 4 days of collection. Transfer 0.5 mL of SurePath® preservative fluid to APTIMA® Specimen Transfer tube (green label) or APTIMA® Vaginal Collection tube (orange label). Ship to lab.** Endocervical or urethral swabs: Follow instructions in the APTIMA® Combo 2 assay unisex swab specimen collection kit. In females, to insure collection of cells infected with *C. trachomatis*, columnar epithelial cells lining the endocervix should be obtained. To that effect, excess mucus should be removed prior to sampling. Vaginal swabs: Follow instructions in the APTIMA® combo 2 assay vaginal swab collection kit. Urine: Patient should not have urinated within one hour prior to collection. Female patients should not cleanse the labial area prior to providing the specimen. Direct patient to provide a first-catch urine (a maximum of 20-30 mL of the initial urine stream) into a urine collection cup free of any preservatives. 2 mL of urine specimen must be transferred into the APTIMA® specimen transport within 24 hours of collection and before being assayed. Use tube provided in the urine specimen collection kit for urine specimens. The fluid (urine plus transport media) level in the urine transport tube must fall within the clear pane on the tube label.
Specimen Stability	**Liquid cytology (PreservCyt® preservative (ThinPrep®)** **Room temperature: 14 days** **Refrigerated: 30 days** **Frozen: Not established** **SurePath® preservative fluid:** **Room temperature and Refrigerated 14 days** **Frozen: Not established** Urine in APTIMA® Transport medium: Room temperature and Refrigerated: 30 days Frozen: 1 year Cervical/Vaginal swabs in APTIMA® transport: Room temperature and Refrigerated: 60 days

	Frozen 1 year Urethral swabs in APTIMA® transport: Room temperature and Refrigerated: 60 days Frozen: 6 months
Performing Site	Quest Diagnostics Nichols Institute, Valencia

HPV mRNA E6/E7	
Effective Date	**10/7/2013**
Former Test Name	*HPV RNA, HR E6/E7, TMA*
Test Code	90887
Always Message	**This assay detects E6/E7 viral messenger RNA (mRNA) from 14 high-risk HPV types (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68).**
Performing Site	**Quest Diagnostics Nichols Institute, Valencia**
CPU Mappings	**Result Code** / **Result Name** 86008309 / **HPV mRNA E6/E7**

HPV mRNA E6/E7 Reflex to Genotypes 16,18/45	
Effective Date	**10/7/2013**
Former Test Name	*HPV RNA, HR E6/E7, TMA with Reflex to Genotypes 16,18*
Test Code	90942
Always Message	**This assay detects E6/E7 viral messenger RNA (mRNA) from 14 high-risk HPV types (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68).**
Performing Site	**Quest Diagnostics Nichols Institute, San Juan Capistrano**
CPU Mappings	90942-1-HPV RNA, High Risk, E6/E7, TMA **Result Code** / **Result Name** 86008309 / **HPV mRNA E6/E7** ***TR 91826-2 HPV Genotypes 16,18/45** **Result Code** / **Result Name** **86010019** / **HPV 16 RNA** **86010020** / **HPV 18/45 RNA** ***TR (True Reflex Flag)*** ***CPU interface clients: If you are set up to use our True Reflexing option, build the unit codes with the TR flag (indicated above) separately.***

Babesia Organism Detection	
Effective Date	**10/8/2013**
Test Code	2146

Specimen Requirements	5.0 mL (3.0 mL) whole blood EDTA (lavender-top), **3 thin blood smears, and 3 thick blood smears**
Instructions	**1. Prepare thick and thin smears within 1 hour of collection.** **2. Send all three specimen types (whole blood EDTA, thin smears, and thick smears).** **3. Prepare thin smears using the blood differential method. Air dry for 10 minutes. Fix with methanol for 5 seconds.** **4. For thick smears, add 1 drop of the EDTA blood onto a clean microscopic slide. Spread the blood into a dime-sized area. Dry for 30 minutes. Do no fix with methanol.** **5. Submit thin and thick slides in cardboard slide holder. These slides and the EDTA specimen should be submitted to the laboratory within 24 hours of collection.**
Transport Temperature	**Room temperature**
Specimen Stability	**Room temperature: 24 hours** **Refrigerated: Unacceptable** Frozen: Unacceptable
Additional Information	**Provide travel history of the patient.**

Neutrophil Function, Oxidative Burst	
Message	****This test is not available for New York patient testing****
Effective Date	**10/28/2013**
Former Test Code	*A52339*
Test Code	**37523**
Specimen Requirements	7 mL **(4 mL minimum)** whole blood collected in a sodium heparin (green-top) tube
Reject Criteria	**Hemolysis; lipemia; icterus; clotted specimens; refrigerated and frozen specimens**
Instructions	**Specimen must arrive at the referral laboratory within 72 hours of collection in order to meet sample stability requirements. Specimens are accepted <72 hours post collection. No other preservatives are acceptable.** **Specify time of day specimen was collected.** **Clients may send 7 mL whole blood in sodium heparin from a healthy donor unrelated to the patient, drawn at the same time as the patient sample to run in parallel with the patient's specimen. The outermost label of the tube must be clearly labeled as "Transport Control". If the draw date is not indicated on the specimen, the client must be called and this information obtained.**
Specimen Stability	Room temperature: 72 hours **Refrigerated and Frozen: Unacceptable**
Set-up/Analytic Time	**Set up: Daily; Report available: 2-3 days**
Reference Range	**%Oxidation Pos Neutrophils**: **24 hours: > or = 93%**; **48 hours: > or = 83%**; **72 hours: > or = 82%**
Always Message	**This assay measures the capability of neutrophils (PMN) to undergo oxidative metabolism to produce superoxide anion and hydrogen peroxide, as detected by oxidation of dihydrorhodamine (DHR). Patients with Chronic Granulomatous Disease (CGD) are unable to oxidize DHR due to defects in oxidative metabolism. The proportion of neutrophils with intact oxidative capacity slowly decreases as the specimen age (hours post-collection) increases. It is thus important that the reference range value appropriate for the specimen age be utilized when assessing the reported results.** **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	**This test previously performed at Focus Diagnostics, Inc. will now be performed at Quest Diagnostics**

	Nichols Institute, San Juan Capistrano.
CPU Mappings	

Result Code	Type	Result Name
85992637		%Oxidation Pos Neutrophils
85992638	**Prompt-Result**	Specimen Age

Discontinued Tests

Niacin	
Effective Date	**9/17/2013**
Test Code	S41930
Additional Information	Recommended alternative is: 91029 Vitamin B3

Phagocytic Index, FC	
Effective Date	**10/28/2013**
Test Code	S48877
Additional Information	There is no recommended alternative.

Test Send Outs (Referrals)

Due to these assays being performed by outside vendors, we are unable to use our normal method of communication. Some of the changes listed in this document may be effective in less than 30 days. Please note the individual effective dates below, as these changes may require **IMMEDIATE ACTION.**

Prostate Cancer Gene 3 (PCA3)	
Clinical Significance	**Prostate cancer gene (PCA3) is strongly expressed in 95% of primary prostate cancer specimens. The PCA3 test is indicated for use in conjunction with other patient information to aid in the decision for repeat biopsy in men age 50 or older who have had one or more previous negative prostate biopsies and for whom a repeat biopsy would be recommended by a urologist based on current standard of care. The PCA3 result provides a risk assessment of a positive biopsy.** **This assay should not be used for men with atypical small acinar proliferation (ASAP) on their most recent biopsy. Men with ASAP on their most recent biopsy should be treated in accordance with current medical guidelines.**
Effective Date	**9/24/2013**
Test Code	S52276
Specimen Requirements	**2.5 mL** (2.0 mL) **Urine**
Reject Criteria	**Specimen volume <2 mL; incorrect collection kit; unfrozen specimen received after five days**
Instructions	****TEST REQUIRES SPECIAL KIT**** **(Stock Clerk order number 167792)** **Before collection, the patient should undergo an attentive digital rectal exam (three strokes per lobe).** **1. Collect a first-catch (approximately 20 to 30 mL of the initial stream) urine sample in a urine collection cup after DRE has been performed. Urine sample should be processed immediately following steps 2 and 3.**

	2. Invert the sample five times to resuspend the cells. Transfer 2.5 mL of urine (fill until the fluid level is between the black lines) into the urine specimen transport tube using the disposable pipette provided. **3. Recap the urine specimen transport tube tightly and invert five times to mix.** **Processed urine specimens must be shipped at 30 degrees C or below (may be frozen) and should be received by the test facility within five days of collection.** **FREEZE sample and ship frozen if specimen storage will be greater than five days.**
Transport Temperature	**Frozen**
Specimen Stability	Room temperature: Unacceptable **Refrigerated: 5 days** **Frozen: Indefinite**
Reference Range	**Result (PCA3 Score):** **< 25 is negative; >/25 is positive**
Assay Category	**FDA Approved**
Performing Site	Dianon Systems

Bicarbonate, Urine	
Effective Date	**10/7/2013**
Test Code	S46515
Specimen Requirements	1 mL **(0.3 mL minimum) urine collected in a plastic, preservative-free urine container**
Set-up/Analytic Time	**Set up: Mon, Thurs; Report available: 1 day**

Bromide, Serum/Plasma	
Effective Date	**10/7/2013**
Former Test Name	*Bromide*
Former Test Code	*S43160*
Test Code	**30540**
Specimen Requirements	**Preferred:** 1 mL **(0.3 mL minimum) serum collected in a red-top tube (no gel)** **Acceptable:** **Plasma collected in a Sodium fluoride/Potassium oxalate (gray-top) tube or Sodium heparin (green-top) tube**
Reject Criteria	Serum separator tube; polymer gel separation tube; **EDTA (lavender-top) tube**
Instructions	**Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved guidelines.**
Specimen Stability	**Room temperature, Refrigerated and Frozen: 30 days**
Set-up/Analytic Time	**Set up: Mon, Thurs; Report available: 2 days**
Reference Range	**The general range of normal levels is 0.3 – 1.2 mg/dL with an average of approximately 0.5 mg/dL. Background concentrations are diet dependent. Workers exposed to methyl bromide with blood bromide concentrations greater than 1.2 mg/dL have shown 3.5 times higher risk of electroencephalogram disturbances than compared to those with normal levels. The bromide concentration may be elevated beyond normal levels if the individual is using bromides therapeutically. The antiepileptic effects of bromides are generally associated with plasma levels ranging from 75 - 150 mg/dL. The ratio of blood to plasma concentrations is 0.7 - 0.8.**

CPU Mappings	

Result Code	Result Name
85847800	**Bromide, Serum/Plasma**

Glutethimide, Serum/Plasma	
Effective Date	**10/7/2013**
Test Code	S43900
Reject Criteria	**Polymer gel separation tube** (serum separator tube **or PST)**
Instructions	**Promptly centrifuge and separate serum or plasma into a plastic, screw-capped, preservative free vial using approved guidelines.**
Transport Temperature	**Refrigerated**
Set-up/Analytic Time	**Set up: Mon;** Report available: 5 days
Reference Range	Usual sedative-hypnotic range: 2 - 6 mcg/mL. **Hexobarbital interferes with glutethimide in this analysis.** **The presence of hexobarbital will adversely affect the quantitation of glutethimide. If an individual has taken hexobarbital call the laboratory for alternate quantitative procedures.**

Methyl Bromide as Metabolite, Blood	
Effective Date	**10/7/2013**
Test Code	S52174
Specimen Requirements	**1 mL (0.3 mL minimum) blood collected in a Sodium fluoride/Potassium oxalate (gray-top) tube or Sodium heparin (green-top) tube.**
Reject Criteria	**EDTA (lavender-top) tube**
Specimen Stability	**Room temperature, Refrigerated and Frozen: 30 days**
Set-up/Analytic Time	**Set up: Mon, Thurs; Report available: 2 days**
Reference Range	**The general range of normal levels is 0.3 – 1.2 mg/dL with an average of approximately 0.5 mg/dL. Background concentrations are diet dependent. Workers exposed to methyl bromide with blood bromide concentrations greater than 1.2 mg/dL have shown 3.5 times higher risk of electroencephalogram disturbances than compared to those with normal levels.**