

February/March, 2005

Dear Colleague:

The focus of this client letter is on collection and transport vial recommendations that help ensure proper and efficient testing for all patient samples received. We have also made some changes in specimen requirements in order to standardize stabilities for related assays and improve workflow.

SST Tubes

Some laboratories freeze patient samples in the original tube used for blood collection – such as, BD Vacutainer® SST™ and PST™ Plastic Tubes. A recent study conducted by BD (Becton, Dickinson and Company) indicates that “medically significant changes in the values for several analytes occur” when these tubes are stored at -20° C for 7 days. A copy of the study is posted on the *Specialty* website (www.specialtylabs.com) or may be obtained from Client Services 800-421-4449.

Effective March 15, 2005, *Specialty* will not accept frozen SST tubes (plastic or otherwise) for analytes other than antibody and autoantibody testing. For these assays we strongly recommend that specimens be refrigerated. Serum separator tubes (at any temperature) are unacceptable for assays used to determine therapeutic drug levels. *Specialty* continues to discourage the use of SST tubes for shipping any samples with the exception of serum for ionized calcium. We routinely conduct validation studies for specific analytes using various tubes at different temperatures and any changes in reference range or specimen requirements are communicated by client letter.

Ova and Parasite Transport

Environmental Protection Agency guidelines now recommend that stool samples being tested for ova and parasites be transported in a single SAF vial rather than the PVA and 10% formalin 2-vial set previously preferred. *Specialty* currently accepts SAF vials. Effective March 31, 2005, *Specialty* will not supply 10% formalin or PVA tubes for the following tests:

- 2960 Fecal Leukocytes
- 2363 Ova & Parasite: *Coccidia* Evaluation
- 2362 Ova & Parasite: Comprehensive Exam with *Coccidia* Evaluation
- 2361 Ova & Parasite: Routine Exam
- 2368 Ova & Parasite: Worm Identification

Please contact Client Supply 800-421-7110 ext 6690 or fax 661-799-5251 to request *Specialty Part # V10308, SAF Vial, a single vial system.*

Trace Metal Tubes

In previous specimen requirements, we have listed, for example, *Whole Blood EDTA TM* for trace metal tubes. This has created questions for some clients. We are changing the abbreviation to *WB EDTA Trace Metal* in order to make it easier for clients to recognize when they need to use the trace metal-free vials. For more information on collection and transport tubes and their use, contact Client Services at 800-421-4449.

Citrated Plasma for Coagulation Testing

It will expedite processing for coagulation testing if clients specify “citrated plasma” or “PCIT” when sending platelet-poor plasma. Complete instructions on collection and preparation of platelet-poor plasma specimens are available in Appendix C of the *Specialty Laboratories' Directory of Services.*

Specimen Sources and Types

It is helpful for all test orders if the source and type of specimen is clearly and completely identified. For example: the source of specimen is crucial for various types of *Chlamydia* testing. **Indicating serum or plasma and the type of additive** will make sure that specimens go directly to the clinical testing department without being detained in the Specimen Resolution Center for clarification. *Specialty* has pre-printed, colored labels for most serum and plasma types available from Client Supply to facilitate this process for clients.

Serum and CSF Required for Oligoclonal Bands Testing

Both serum and CSF are required and should be shipped at the same time for the following tests:

1557	Oligoclonal Bands (name change)
1055	Multiple Sclerosis Evaluation

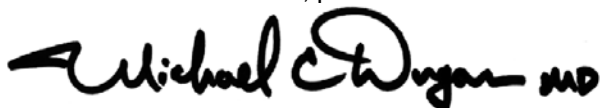
Allergen Panel Specimen Requirements

Allergen Panels with many components require additional specimen volume to avoid QNS. As a rule of thumb, we recommend 0.5 mL serum for the first allergen and 0.2 mL serum for each subsequent allergen. Thus, if 10 allergens are ordered, 2.3 mL serum would be requested. However, most requests for even up to 100 allergens can be performed on 10 mL serum.

Allergen Panel Units

Specialty reports allergen panels in kU/L or kilo units per liter. These units are comparable to kU_A/L (kilo units per liter for a specific allergen). A typographical error in our Units Abbreviation page in the Directory of Services inadvertently combined two different measures kU/L (kilo units per liter) and kronus U/mL (kronus units per milliliter) which is used for Insulin Autoantibody testing.

For additional information, please contact Client Services at 800-421-4449.



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Vice President and Co-Director of Laboratory

Coming in March from *Specialty*

AntiMullerian Hormone

Levels of AntiMullerian Hormone (AMH) or Mullerian Inhibiting Substance (MIS) may be used in the investigation of ovarian reserve and the perimenopausal transition in women; the detection and onset of puberty in the young; the differential diagnosis of intersex disorders; the diagnosis of cryptorchidism and anorchidism, and the evaluation of male gonadal function at all ages.

For more information on test availability, please contact Client Services at 800-421-4449 or visit our Web site www.specialtylabs.com.

Test Changes

Test Code	Effective Date	Test Name	Specific Change	Also Affected
8226C	01/20/05	Arbovirus IgM Antibodies CSF [IFA]	<u>Specimen Requirement</u> - reduced 1.0 (0.4) mL CSF	
2922	02/10/05	<i>Chlamydia pneumoniae</i> DNA DetectR™	<u>Alternate Specimen</u> 2.0 mL CSF; Ambient 4d, Refrigerated 4d, Frozen 2 months	
3454	02/22/05	Cholesterol Evaluation	<u>Stability</u> Ambient 24h; Refrigerated 72h; Frozen 2 months	5316 Electrolyte Panel
4950	02/09/05	Fluoxetine & Norfluoxetine	<u>Specimen Requirement</u> - reduced 1.0 (0.5) mL Serum or Plasma	
1398	02/22/05	Glucose-6 Phosphate Dehydrogenase (G-6-PDH)	<u>Stability</u> Refrigerated 4 days (was 7 days)	
1245	02/22/05	IgE	<u>Units</u> IU/mL	3703 Allergn Pnl Food +IgE 3705 Allergn Pnl Molds + IgE 3719 Allergn Pnl NEast + IgE 3701 Allergn Pnl Ped Food +IgE 3721 Allergn Pnl SEast + IgE 1148 Humoral Immune Status Survey (Pneumo 14) 1148P HISS Pneumo 14 pre/post 1149 HISS Pneumo 23 1149P HISS Pneumo 23 pre/post 1147 HISS Penumo 7 1147P HISS Penumo 7 pre/post
2920	02/10/05	<i>Legionella pneumophila</i> DNA DetectR™	<u>Alternate Specimen</u> 2.0 mL CSF; Ambient 4d, Refrigerated 4d, Frozen 2 months	
2924	02/10/05	<i>Mycoplasma pneumoniae</i> DNA DetectR™	<u>Alternate Specimen</u> 2.0 mL CSF; Ambient 4d, Refrigerated 4d, Frozen 2 months	
1056	01/20/05	Myelin Basic Protein (MBP) Autoantibodies	<u>Stability</u> Ambient 72h; Refrigerated 14d; Frozen 2 months	1056C Myelin Basic Protein (MBP) Autoantibodies CSF
1056C	01/20/05	Myelin Basic Protein (MBP) Autoantibodies CSF	<u>Specimen Requirement?</u> 2.0 (0.5) mL CSF	
1557	02/22/05	Oligoclonal Bands in CSF	<u>Name</u> Oligoclonal Bands (note both CSF and Serum are required for testing, but results are reported for CSF only. The name change is intended to avoid confusion and prevent receipt of CSF samples without the corresponding serum.	
5174	02/22/05	Reticulocyte Cell Count	<u>Stability</u> Refrigerated 72h; ambient is not acceptable	5172 Reticulocyte Cell Count and Hemoglobin
4960	02/009/05	Trazodone	<u>Specimen Requirement</u> - reduced 1.0 (0.5) mL Serum or Plasma	

Sendout Changes

Effective **February 28, 2005**, the tests listed below will be performed by LabOne to bring you significant cost savings and some improved turnaround times. The key changes for sample requirements and reference range are noted. Please call Client Services at 800-421-4449 for more information.

Test Name	Old Code	New Code	Sample Requirement Changes	Reference Range Changes
ABO Group & Rh	S48475	S50758	Also accept plain red top; no ACD	none
Allergen-Birch Tree IgE	S44249	S50771	Plasma not accepted	<0.35 kU/L
Ammonia Plasma	S40495	S50759	No significant changes	Males: 16-60 umol/L; Females 11-51 umol/L
<i>Chlamydia trachomatis</i> PCR	S48587	S50760	Also accept M-4, Cytorich; ship urine frozen	No changes
Coombs Direct	S48844	S50761	Also accept plain red top; ship refrigerated	No changes
Cotinine Urine [3153]	S43345	S50762	Minimum is 3 mLs	None
Creatine Kinase MB & Total	S49936	S50763	Plasma not accepted; refrig stability of 4 days	Age- and sex-specific ranges; Call Client Services
Digoxin [90080]	S49803	S50764	No significant changes	None
Glucose 24hr Urine	S50427	S50765	No significant changes	Reports in g/24 hrs
Glucose, Urine Random	none	S50769	N/A	N/A
Theophylline	S49690	S50768	Ambient stability 1 day; send refrigerated or frozen	5 - 20 ug/mL
Urea Clearance	S41060	S50766	Refrig stability 4 days	Age- and sex-specific ranges; Call Client Services
Urea Nitrogen 24hr Urine	S42225	S50767	Refrig stability 4 days	12 - 20 g/24 hrs
Urea Nitrogen, Urine Random	none	S50770	N/A	N/A