

**Revision Message!**

**Please note: The announcement to withdraw test 18899- Cutaneous Direct Immunofluorescence on 12/15/14 and the recommended alternative was test 14508- Cutaneous Immunofluorescence Antibodies (IgG), Serum. This change is being retracted, 18899 will remain active.**

**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 #
<a href="#">92141</a>	Alcohol Metabolites, Quantitative, Urine	11/3/2014	2
<a href="#">37581</a>	Multiple Sclerosis Panel 1	12/15/2014	2
<a href="#">36565</a>	Mumps Virus Antibody (IgM)	12/15/2014	4
<a href="#">973</a>	Urea Nitrogen, 24 Hour Urine without Creatinine	12/15/2014	4

**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 #
<a href="#">252</a>		Arginine Vasopressin (AVP, Antidiuretic Hormone, ADH)	12/15/2014	5
<a href="#">S52398</a>		DCP (Des-Gamma-Carboxy-Prothrombin)	12/15/2014	5
<a href="#">16529</a>	S50108	Leptospira Antibody Screen with Reflex to Titer, IHA	12/15/2014	5
<a href="#">A50078</a>		NOTCH 3 DNA Sequencing Test	12/15/2014	6
<a href="#">36637</a>	4937	Oxycarbazepine Metabolite	12/15/2014	6

**REDIRECTS**

**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 #
<a href="#">90379</a>	S52169	Glutathione	12/15/2014	7

**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 #
<a href="#">S50658</a>	TA90 Monitor	12/8/2014	8
<a href="#">9711</a>	Mumps IgG & IgM Abs	12/15/2014	8
<a href="#">9721</a>	Mumps IgM Abs	12/15/2014	9
<a href="#">S51503</a>	Urea Nitrogen, Urine 24 hr	12/15/2014	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 #
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S50970		Buprenorphine and Metabolite - Free (Unconjugated) Screen, Serum/Plasma	12/1/2014	9
92021		Fluphenazine, Serum/Plasma	12/1/2014	9

**New Test Offerings**

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

<b>Alcohol Metabolites, Quantitative, Urine</b>					
Clinical Significance	<p>Ethylglucuronide (EtG) and Ethylsulfate (EtS) are metabolites of ethanol. While EtG has been used as a long-term biomarker in urine testing for more than 7 years, EtS has more recently been incorporated into testing programs. Scientific literature indicates that EtG may be detectable for up to 80 hours and that EtS may be detectable for 24 hours or more after ethanol ingestion - depending on cutoff, metabolism, and usage patterns. Under certain conditions, <i>in-vitro</i> (outside of the body, in the specimen container) formation of EtG may also occur when certain bacteria and ethanol or ethanol-producing bacteria are both present in a urine specimen. No published reports of <i>in-vitro</i> synthesis of EtS exist, however, even under the same conditions in which EtG may be synthesized <i>in-vitro</i>.</p> <p>EtS is typically present in urine at a lower concentration than EtG, although the ratio of EtG to EtS varies significantly between individual donors. In order to be reported positive for EtG, Quest Diagnostics' clinical reporting criteria require that EtS be present in a specimen at a minimum concentration of 100 ng/mL whenever EtG is present at a concentration greater than or equal to 500 ng/mL.</p> <p>As with EtG, the presence of EtS in a urine specimen does not establish the source of the ethanol containing product and the possibility of "incidental exposure" and post-collection specimen changes needs to be considered when interpreting results. EtG and EtS testing, as with any controlled substance testing, measure only the presence and concentration of EtG (or EtS) in a given urine specimen. Quest Diagnostics recommends clinical correlation and/or healthcare provider review when interpreting EtG and EtS results.</p>				
Effective Date	11/3/2014				
Test Code	92141				
CPT Codes	83789				
Specimen Requirements	1 mL (0.5 mL minimum) urine collected in a plastic urine container				
Transport Temperature	Room temperature				
Specimen Stability	Room temperature and Refrigerated: 7 days Frozen: 30 days				
Set-up/Analytic Time	Set up: Tues-Sat; Report available: 1-3 days				
Reference Range	<table border="1"> <tr> <td>Ethyl Glucuronide</td> <td>&lt;500 ng/mL</td> </tr> <tr> <td>Ethyl Sulfate</td> <td>&lt;100 ng/mL</td> </tr> </table>	Ethyl Glucuronide	<500 ng/mL	Ethyl Sulfate	<100 ng/mL
Ethyl Glucuronide	<500 ng/mL				
Ethyl Sulfate	<100 ng/mL				
Always Message	<p>*These results are for medical treatment only*</p> <p>*Analysis was performed as non-forensic testing*</p> <p>For assistance with interpreting these drug results, please contact a Quest Diagnostics Toxicology Specialist: 1-877-40-RX TOX (1-877-407-9869), M-F 8am-6pm EST.</p>				
Methodology	Mass Spectrometry				
Performing Site	Quest Diagnostics Nichols Institute, Valencia				
Interface Mapping	<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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86010838	Ethyl Glucuronide
86010840	Ethyl Sulfate
82100625	Please note:

Multiple Sclerosis Panel 1																						
Clinical Significance	Patients with Multiple Sclerosis (MS) have multiple, scarred areas of the brain. Symptoms can initially be mild but typically lead to relapsing or progressive incapacitating neuromotor dysfunction.																					
Effective Date	12/15/2014																					
Test Code	37581																					
CPT Codes	83916; 82042; 82784; 82040; 82784																					
Specimen Requirements	2 mL (1 mL minimum) serum AND 3 mL (1.5 mL minimum) CSF collected in sterile screw cap container																					
Instructions	It is preferred that the collection date and time be the same for both CSF and serum; however, it is acceptable for them to be drawn within 48 hours of each other. NOTE: The client will be contacted when no serum is supplied to confirm the order. The IgG Synthesis requires both CSF and serum for testing, otherwise, this portion of the profile will be canceled. However, for Oligoclonal Banding test only, it is acceptable to send through CSF without serum, when client has indicated to "run with serum control". CSF must be crystal clear. (CSF collection tube #4 preferred)																					
Specimen Stability	Room temperature: 8 hours Refrigerated: 5 days Frozen: 14 days																					
Reference Range	<table border="1"> <tr> <td>Oligoclonal Bands, CSF</td> <td>No bands</td> <td></td> </tr> <tr> <td>Synthesis Rate IgG, CSF:</td> <td>-9.9 TO +3.3</td> <td>mg/24 h</td> </tr> <tr> <td>IgG Index, CSF:</td> <td>&lt; 0.66</td> <td></td> </tr> <tr> <td>Albumin, CSF:</td> <td>Adults: 8.0-42.0</td> <td>mg/dL</td> </tr> <tr> <td>IgG, CSF:</td> <td>Adults: 0.8-7.7</td> <td>mg/dL</td> </tr> <tr> <td>IgG, Serum:</td> <td>Cord Blood: 553-1360 1 Month: 213-765 2-5 Months: 170-595 6-9 Months: 187-765 10-12 Months: 247-910 1-3 Years: 533-1078 4-6 Years: 592-1723 7-9 Years: 673-1734 10-11 Years: 821-1835 12-13 Years: 893-1823 14-15 Years: 842-2013 ≥16 Years: 694-1618</td> <td>mg/dL</td> </tr> <tr> <td>Albumin, Serum:</td> <td>0-40 Years: 3.7-5.1 41-60 Years: 3.5-4.9 &gt;60 Years: 3.2-4.6</td> <td>g/dL</td> </tr> </table>	Oligoclonal Bands, CSF	No bands		Synthesis Rate IgG, CSF:	-9.9 TO +3.3	mg/24 h	IgG Index, CSF:	< 0.66		Albumin, CSF:	Adults: 8.0-42.0	mg/dL	IgG, CSF:	Adults: 0.8-7.7	mg/dL	IgG, Serum:	Cord Blood: 553-1360 1 Month: 213-765 2-5 Months: 170-595 6-9 Months: 187-765 10-12 Months: 247-910 1-3 Years: 533-1078 4-6 Years: 592-1723 7-9 Years: 673-1734 10-11 Years: 821-1835 12-13 Years: 893-1823 14-15 Years: 842-2013 ≥16 Years: 694-1618	mg/dL	Albumin, Serum:	0-40 Years: 3.7-5.1 41-60 Years: 3.5-4.9 >60 Years: 3.2-4.6	g/dL
Oligoclonal Bands, CSF	No bands																					
Synthesis Rate IgG, CSF:	-9.9 TO +3.3	mg/24 h																				
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Albumin, Serum:	0-40 Years: 3.7-5.1 41-60 Years: 3.5-4.9 >60 Years: 3.2-4.6	g/dL																				
Always Message	Oligoclonal bands are present in the CSF of more than 85% of patients with clinically definite multiple sclerosis (MS). To distinguish between oligoclonal bands in the CSF due to a peripheral gammopathy and oligoclonal bands due to local production in the CNS, serum and CSF should be tested simultaneously. Oligoclonal bands can however be observed in a variety of other diseases, e.g., subacute sclerosing panencephalitis, inflammatory polyneuropathy, CNS lupus, and brain tumors and infarctions. The clinical significance of a numerical band count, determined by isoelectric focusing, has not been definitively defined. The data should be interpreted in conjunction with all pertinent clinical and laboratory data for this patient.																					

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	The IgG Synthesis rate, CSF and IgG index, CSF are two formulae for estimating the amount of IgG produced in the central nervous system. Evidence of increased synthesis of IgG provides support for the diagnosis of multiple sclerosis.																										
Methodology	Isoelectric Focusing, Fixed Rate Time Nephelometry																										
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano																										
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> <th>Unit of Measure</th> </tr> </thead> <tbody> <tr> <td>790</td> <td>Oligoclonal Bands, CSF</td> <td></td> </tr> <tr> <td>775</td> <td>Synthesis Rate IgG, CSF</td> <td>mg/24 h</td> </tr> <tr> <td>9663</td> <td>IgG Index, CSF</td> <td></td> </tr> <tr> <td>782</td> <td>Albumin, CSF</td> <td>mg/dL</td> </tr> <tr> <td>780</td> <td>IgG, CSF</td> <td>mg/dL</td> </tr> <tr> <td>7563</td> <td>IgG, Serum</td> <td>mg/dL</td> </tr> <tr> <td>25966</td> <td>Albumin, Serum</td> <td>g/dL</td> </tr> </tbody> </table>			Result Code	Result Name	Unit of Measure	790	Oligoclonal Bands, CSF		775	Synthesis Rate IgG, CSF	mg/24 h	9663	IgG Index, CSF		782	Albumin, CSF	mg/dL	780	IgG, CSF	mg/dL	7563	IgG, Serum	mg/dL	25966	Albumin, Serum	g/dL
Result Code	Result Name	Unit of Measure																									
790	Oligoclonal Bands, CSF																										
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Mumps Virus Antibody (IgM)					
Clinical Significance	Used in the diagnosis of acute mumps infection				
Effective Date	12/15/2014				
Test Code	36565				
CPT Codes	86735				
Specimen Requirements	1 mL (0.2 mL minimum) serum				
Reject Criteria	Gross hemolysis; gross lipemia				
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: 1-4 days				
Reference Range	< 1:20				
Always Message	<p><b>Interpretive Criteria:</b>                      &lt;1:20      Antibody not detected                      &gt; or = 1:20      Antibody detected</p> <p>The presence of IgM antibody to mumps typically indicates recent or current mumps infection; however, false positive results may occur due to antibody crossreactivity to parainfluenza virus.</p> <p>This assay 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>				
Methodology	Immunofluorescence Assay				
Performing Site	Focus Diagnostics, Inc.				
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Result Code	Result Name		
Result Code	Result Name				

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	70056200	Mumps Virus Antibody IgM
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Urea Nitrogen, 24 Hour Urine without Creatinine													
Clinical Significance	About 80% of urinary nitrogen is in the form of urea which is the major end product of protein metabolism. Urea excreted in the urine is the primary method of nitrogen elimination; therefore, this test provides an approximate evaluation of nitrogen balance. Conditions associated with increased urine urea nitrogen are hyperthyroidism, high protein diets and post-operative states. Decreased levels are associated with convalescence, liver disease, toxemia and advanced renal disease.												
Effective Date	12/15/2014												
Test Code	973												
CPT Codes	84540												
Specimen Requirements	<b>Preferred:</b> 10 mL (2 mL minimum) 24-hour urine, no preservative collected in a plastic leak-proof container  <b>Acceptable:</b> 24-hour urine preserved with 6N HCL to maintain a pH of <6.0												
Instructions	10 mL urine aliquot from a well-mixed 24-hour collection. Do not include first morning specimen in 24-hour collection. Collect all subsequent voiding. The last sample collected should be the first specimen voided the following morning at the same time as the previous morning's first void. Record the total volume of urine and collection time on both the transport container and test requisition.  Also acceptable: Urine preserved with 6N HCL to maintain a pH of <6.0.												
Specimen Stability	<b>Room temperature: 24 hours</b> <b>Refrigerated: 7 days</b> <b>Frozen: 15 months</b>												
Set-up/Analytic Time	<b>Set up: Mon-Sat; Report available: 1-2 days</b>												
Reference Range	6-17 g/24 h												
Units Of Measure	g/24 h												
Methodology	Spectrophotometry												
Performing Site	Quest Diagnostics Nichols Institute, Valencia												
Interface Mapping	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Result Code</th> <th style="width: 25%;">Type</th> <th style="width: 40%;">Result Name</th> <th style="width: 10%;">Unit of Measure</th> </tr> </thead> <tbody> <tr> <td>25023700</td> <td></td> <td>Urea Nitrogen, 24 hr urine</td> <td>g/24 h</td> </tr> <tr> <td>85993218</td> <td>Prompt-Result</td> <td>Total Volume</td> <td></td> </tr> </tbody> </table>	Result Code	Type	Result Name	Unit of Measure	25023700		Urea Nitrogen, 24 hr urine	g/24 h	85993218	Prompt-Result	Total Volume	
Result Code	Type	Result Name	Unit of Measure										
25023700		Urea Nitrogen, 24 hr urine	g/24 h										
85993218	Prompt-Result	Total Volume											

### Test Changes

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

Arginine Vasopressin (AVP, Antidiuretic Hormone, ADH)	
Effective Date	12/15/2014
Test Code	252
Specimen Requirements	4 mL ( <b>2.5 mL minimum</b> ) plasma collected in an EDTA (lavender-top) tube

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Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano
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DCP (Des-Gamma-Carboxy-Prothrombin)	
Effective Date	12/15/2014
Test Code	S52398
Reference Range	<7.5 ng/mL
Performing Site	Quest Diagnostics Nichols Institute, San Juan Capistrano

Leptospira Antibody Screen with Reflex to Titer, IHA											
Effective Date	12/15/2014										
Former Test Code	S50108										
Test Code	16529										
Specimen Requirements	<p><b>Preferred:</b> 0.5 mL (0.2 mL minimum) serum</p> <p><b>Acceptable:</b> Plasma collected in a sodium heparin (green-top); EDTA (lavender-top); EDTA (royal blue-top); or PPT potassium EDTA (white-top) tube</p>										
Specimen Stability	<p>Room temperature: 7 days Refrigerated: 14 days Frozen: 30 days</p>										
Reference Range	<p><b>Leptospira Ab Screen: Negative</b></p> <p>Leptospira Ab Titer: &lt;1:50 <b>Interpretive Criteria:</b> &lt;1:50 Antibody not detected 1:50 Equivocal; submission of a second specimen (collected 1-2 weeks after initial specimen) suggested if clinically warranted. &gt; or = 1:100 Indicative of recent or current infection</p>										
Units Of Measure	Remove units of measure										
Always Message	The IHA procedure detects genus-specific antibody only. In patients with leptospirosis, antibody is detectable by IHA within 1-2 weeks after onset of symptoms and peaks at 2-4 weeks. Titers generally reach values greater than 1:200 before decreasing, and then fall below the level of detectability within 9-12 months.										
Performing Site	Focus Diagnostics, Inc.										
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86003369</td> <td>Leptospira Ab Screen</td> </tr> <tr> <td colspan="2"><i>This is a true reflex. Please build the unit code below separately. Non-Orderable Reflex: 16529-2 Leptospira Antibody Titer, IHA (Serum)</i></td> </tr> <tr> <th>Result Code</th> <th>Result Name</th> </tr> <tr> <td>86003370</td> <td>Leptospira Ab Titer</td> </tr> </tbody> </table>	Result Code	Result Name	86003369	Leptospira Ab Screen	<i>This is a true reflex. Please build the unit code below separately. Non-Orderable Reflex: 16529-2 Leptospira Antibody Titer, IHA (Serum)</i>		Result Code	Result Name	86003370	Leptospira Ab Titer
Result Code	Result Name										
86003369	Leptospira Ab Screen										
<i>This is a true reflex. Please build the unit code below separately. Non-Orderable Reflex: 16529-2 Leptospira Antibody Titer, IHA (Serum)</i>											
Result Code	Result Name										
86003370	Leptospira Ab Titer										
Additional Information	If screen is positive, then Leptospira Antibody Titer, IHA (Serum) will be performed at an additional charge (CPT code 86720).										

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NOTCH 3 DNA Sequencing Test													
Effective Date	12/15/2014												
Former Test Name	Cadasil Evaluation												
Test Code	A50078												
Instructions	Ship within 24 hours.												
Methodology	Polymerase Chain Reaction, Next Generation Sequencing												
Performing Site	Athena Diagnostics, Inc.												
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> </tr> </thead> <tbody> <tr> <td>86011684</td> <td>Interpretation</td> </tr> <tr> <td>86011685</td> <td>Technical Results</td> </tr> <tr> <td>86011686</td> <td>Methods</td> </tr> <tr> <td>86011687</td> <td>Comments</td> </tr> <tr> <td>86011688</td> <td>References</td> </tr> </tbody> </table>	Result Code	Result Name	86011684	Interpretation	86011685	Technical Results	86011686	Methods	86011687	Comments	86011688	References
Result Code	Result Name												
86011684	Interpretation												
86011685	Technical Results												
86011686	Methods												
86011687	Comments												
86011688	References												

Oxcarbazepine Metabolite	
Clinical Significance	<p>Oxcarbazepine (trileptal) is an anti-convulsant used for treating generalized tonic-clonic and partial seizures. It can be administered alone or as an adjunct to other anti-convulsants. Clinically significant effects of oxcarbazepine are observed when plasma levels of its active metabolite, 10-OH-carbazepine, are between 15 and 35 ug/mL. Toxic symptoms may occur when plasma levels exceed 35 ug/mL. The therapeutic monitoring of oxcarbazepine and its active metabolite are important for achieving proper serum/plasma concentration to inhibit epileptic seizures and avoid adverse effects. The precise mechanism of the action by which oxcarbazepine and its active metabolite exert their antiseizure effect is unknown. However, in vitro electrophysiological studies indicate that they produce blockade of voltage-sensitive sodium channels, resulting in the stabilization of hyperexcited neural membranes, inhibition of repetitive neuronal firing, and diminution of propagation of synaptic impulses. These are important in prevention of seizure spread in the brain. In addition, the increased potassium conduction and calcium channel activities may contribute to the antiseizure effects. After oral administration, oxcarbazepine is readily absorbed in the body, followed by rapid and almost complete metabolization to 10-OH-carbazepine, active metabolite. The half-life of oxcarbazepine is only 1 to 2.5 hours, while that of 10-OH-carbazepine is 11 to 15 hours. The protein binding of oxcarbazepine is about 67%, whereas that of the metabolite is about 38%. The clearance of oxcarbazepine and its active metabolite from the body is mainly through ketone reduction and O-site conjugation with glucuronic acid rather than oxidative processes via cytochrome P450 system. More than 95% of the treatment dosage is excreted by the kidneys. Fecal excretion only accounts for less than 4%.</p>
Effective Date	12/15/2014
Former Test Name	Oxcarbazepine (Trileptal)
Former Test Code	4937
Test Code	36637
CPT Codes	80299
Specimen Requirements	<p><b>Preferred:</b> 1 mL (0.25 mL minimum) serum collected in a no additive (red-top) tube</p> <p><b>Acceptable:</b> 1 mL (0.25 mL minimum) plasma collected in an EDTA (lavender-top) tube</p>
Reject Criteria	Serum separator tubes

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Specimen Stability	Room temperature: 72 Hours Refrigerated: 14 Days Frozen: 60 Days								
Reference Range	8.0-35.0 mcg/mL								
Units Of Measure	mcg/mL								
Methodology	Liquid Chromatography Tandem Mass Spectrometry (LC/MS/MS)								
Performing Site	Quest Diagnostics Nichols Institute, Valencia								
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> <th>Unit of Measure</th> </tr> </thead> <tbody> <tr> <td>85998764</td> <td>10-Hydroxycarbazepine</td> <td>mcg/mL</td> </tr> </tbody> </table>			Result Code	Result Name	Unit of Measure	85998764	10-Hydroxycarbazepine	mcg/mL
Result Code	Result Name	Unit of Measure							
85998764	10-Hydroxycarbazepine	mcg/mL							

Redirects

Glutathione	
Message	<b>**This test is not available for New York patient testing**</b>
Clinical Significance	Glutathione is a tripeptide formed by a peptide linkage between the amine group of cysteine linked to glycine and the carboxyl group of the glutamate side-chain. It is an abundant cellular reducing agent, whose major biological function is mitigating oxidative damage to biological macromolecules. Glutathione is also important in the metabolism and excretion of xenobiotic compounds. Glutathione is consumed to maintain cells in a reduced condition. Consequently, glutathione levels in patient samples are expected to be diminished in disease states where oxygen reactive species are involved, such as rheumatoid arthritis and atherosclerosis. Low glutathione levels have been linked to reduced dopamine production in neurons, which suggests a relationship to dopamine based neurological disorders such as Parkinson's disease. High levels of glutathione have been linked to chemotherapy resistance in cancer treatments.
Effective Date	12/15/2014
Former Test Name	Glutathione (GSH)
Former Test Code	S52169
Test Code	90379
CPT Codes	82978
Specimen Requirements	10 mL (1 mL minimum) whole blood collected in ACD (yellow-top) tube
Reject Criteria	Hemolysis
Instructions	Send whole blood. Do not centrifuge.
Transport Temperature	Refrigerated
Specimen Stability	Room temperature: Not established Refrigerated: 21 days Frozen: Unacceptable
Set-up/Analytic Time	Set up: Fri; Report available: 3-11 days
Reference Range	544-1228 uM
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. Research use only not to be used for patient diagnostics.



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Methodology	<b>Kinetic</b>								
Assay Category	<b>Research Use Only</b>								
Performing Site	<b>This test previously performed at Genova Diagnostics will now be performed at Cambridge Biomedical Research Group</b>								
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> <th>Unit of Measure</th> </tr> </thead> <tbody> <tr> <td>86007516</td> <td>Glutathione</td> <td>uM</td> </tr> </tbody> </table>			Result Code	Result Name	Unit of Measure	86007516	Glutathione	uM
Result Code	Result Name	Unit of Measure							
86007516	Glutathione	uM							

**Discontinued Tests**

<b>TA90 Monitor</b>	
Effective Date	12/8/2014
Test Code	S50658
Additional Information	Reagents are no longer available. There is no recommended alternative.

<b>Mumps IgG &amp; IgM Abs</b>					
Effective Date	12/15/2014				
Test Code	9711				
Additional Information	<p>The recommended alternatives are:</p> <ul style="list-style-type: none"> <li>• 36565-Mumps Virus Antibody (IgM) performed at Focus Diagnostics, Inc. in the New Test Offering section</li> <li>• 9716-Mumps IgG Abs</li> </ul>				
Tests Affected	<table border="1"> <thead> <tr> <th>Test Codes:</th> <th>Name:</th> </tr> </thead> <tbody> <tr> <td>P44513P</td> <td>Custom Duncan Mumps Titer- Employee</td> </tr> </tbody> </table>	Test Codes:	Name:	P44513P	Custom Duncan Mumps Titer- Employee
Test Codes:	Name:				
P44513P	Custom Duncan Mumps Titer- Employee				

<b>Mumps IgM Abs</b>	
Effective Date	12/15/2014
Test Code	9721
Additional Information	The recommended alternative is test code 36565-Mumps Virus Antibody (IgM) performed at Focus Diagnostics, Inc. in the New Test Offering section.

<b>Urea Nitrogen, Urine 24 hr</b>	
Effective Date	12/15/2014
Test Code	S51503
Additional Information	The recommended alternative is test code 973- Urea Nitrogen, 24 hour Urine (w/o creatinine)

**Test Send Out (Referrals)**

November 2014 - Monthly Update, Quest Diagnostics Nichols Institute, Valencia

<b>Buprenorphine and Metabolite - Free (Unconjugated) Screen, Serum/Plasma</b>								
Effective Date	12/1/2014							
Test Code	S50970							
Specimen Requirements	3 mL (1.3 mL minimum) serum collected in a red-top tube (no-gel)							
Specimen Stability	Room temperature, Refrigerated and Frozen: 29 days							
Set-up/Analytic Time	Set up: Mon, Wed, Fri; Report available: 1 day							
Reference Range	<b>Buprenorphine/Metabolite - Maximum plasma buprenorphine concentrations in patients maintained on varying buprenorphine doses were:</b> 2 mg/day: 0.3 +/- 0.1 ng/mL 16 mg/day: 6.3 +/- 0.9 ng/mL 32 mg/day: 13 +/- 4.2 ng/mL							
Methodology	Enzyme Linked Immunosorbent Assay							
Interface Mapping	<table border="1"> <thead> <tr> <th>Result Code</th> <th>Result Name</th> <th>Unit of Measure</th> </tr> </thead> <tbody> <tr> <td>86011633</td> <td>Buprenorphine Metabolite</td> <td>ng/mL</td> </tr> </tbody> </table>		Result Code	Result Name	Unit of Measure	86011633	Buprenorphine Metabolite	ng/mL
Result Code	Result Name	Unit of Measure						
86011633	Buprenorphine Metabolite	ng/mL						
Additional Information	Remove Buprenorphine Free and Norbuprenorphine Free from report format							

<b>Fluphenazine, Serum/Plasma</b>	
Effective Date	12/1/2014
Test Code	92021
Specimen Stability	Room temperature: 24 hours Refrigerated: 10 days Frozen: 90 days