



LABORATORY UPDATE

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Routine Testing

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The CPT Codes provided in this document are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payor being billed. Any Profile/panel component may be ordered separately. Reflex tests are performed at an additional charge.



**Quest Diagnostics Nichols Institute (San Juan Capistrano and Chantilly),
Focus Diagnostics, Inc. and Specialty Laboratories**

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DLO is pleased to inform you of the following new and updated laboratory testing information:

Test Changes

Anti-Streptolysin O	
Clinical Significance:	This test is a sensitive test for recent Streptococcal infection. A rise in ASO begins about one week after infection and peaks two to four weeks later. ASO levels do not rise with cutaneous infections. In the absence of complications or reinfection, the ASO level will fall to preinfection levels within 6 to 12 months. Over 80% of patients with acute Rheumatic Fever and 95% of patients with acute Glomerulonephritis have elevated levels of ASO.
Effective Date:	December 1, 2008
Test Code:	265
Specimen Requirements:	1 ml serum
CPT Codes:	86060
Transport Temperature:	Room Temperature
Specimen Stability:	Room Temperature: 3 days Refrigerated: 1 week Frozen: 1 month
Reference Ranges:	Adults: <or=200 IU/mL Pediatric (<or= 17 years): <150
Methodology:	Immunoturbimetric
Additional Information:	Update specimen stability, reference range, and methodology

C-Reactive Protein	
Clinical Significance:	Increased CRP levels are found in inflammatory conditions including: Bacterial Infection, Rheumatic Fever, Active Arthritis, Myocardial Infarction, Malignancies, and Post-Operative State. This test cannot detect the relatively small elevations of CRP that are associated with increased cardiovascular risk.
Effective Date:	December 1, 2008
Test Code:	4420
CPT Code(s):	86140
Specimen Requirements:	1 ml serum
Transport Temperature:	Room Temperature
Specimen Stability:	Room Temperature: 3 days Refrigerated: 3 days Frozen: 4 weeks
Methodology:	Immunoturbimetric
Reference Ranges:	<0.8 mg/dL
Additional Information:	Update clinical significance and specimen stability

Complement Component C3C	
Clinical Significance:	Decreased C3 may be associated with Acute Glomerulonephritis, Membranoproliferative Glomerulonephritis, immune complex disease, and active Systemic Lupus Erythematosus, and generalized autoimmune processes.
Effective Date:	December 1, 2008
Test Code:	351
CPT Code(s):	86160
Specimen Requirements:	1 ml frozen serum – avoid hemolysis
Transport Temperature:	Frozen
Specimen Stability:	Room Temperature: 3 days Refrigerated: 3 days Frozen: 3 months
Reference Ranges:	90-180 mg/dL
Methodology:	Immunoturbidimetric
Additional Information:	Update specimen stability, reference range, and methodology

Complement Component C4C	
Clinical Significance:	Decreased C4 level is associated with acute Systemic Lupus Erythematosus, Glomerulonephritis, immune complex disease, Cryoglobulinemia, and congenital C4 deficiency and generalized autoimmune disease.
Effective Date:	December 1, 2008
Test Code:	353
CPT Code(s):	86160
Specimen Requirements:	1 ml frozen serum
Transport Temperature:	Frozen
Specimen Stability:	Room Temperature: 3 days Refrigerated: 3 days Frozen: 3 months
Reference Ranges:	16-47 mg/dL
Methodology:	Immunoturbidimetric
Additional Information:	Update specimen stability, reference range, and methodology

DNA (ds) Antibody							
Clinical Significance:	dsDNA Antibody is detected in patients with active Systemic Lupus Erythematosus (SLE) and approximately 20% of patients with Mixed Connective Tissue Disease						
Effective Date:	December 1, 2008						
Test Code:	255						
CPT Code(s):	86225						
Specimen Requirements:	1 mL serum						
Transport Temperature:	Room temperature						
Specimen Stability:	Room temperature: 4 days Refrigerated: 7 days Frozen: 30 days						
Units of Measure	IU/mL						
Reference Range:	<table border="1"> <tr> <td><or=4</td> <td>Negative</td> </tr> <tr> <td>5-9</td> <td>Indeterminate</td> </tr> <tr> <td>>or=10</td> <td>Positive</td> </tr> </table>	<or=4	Negative	5-9	Indeterminate	>or=10	Positive
<or=4	Negative						
5-9	Indeterminate						
>or=10	Positive						
Methodology:	Immunoassay						
Additional Information:	Update specimen stability, reference range, and methodology.						

Hemoglobin A1C	
Clinical Significance:	Assesses long term diabetic control. Diabetes mellitus
Effective Date:	December 1, 2008
Test Code:	496
CPT Code(s):	83036
Specimen Requirements:	1ml whole blood collected in a lavender-top (EDTA) tube
Transport Temperature:	Room Temperature
Specimen Stability:	Room Temperature: 7 days Refrigerated: 7 days Frozen: 6 months
Reference Ranges:	Non-Diabetic: <6.0% of total HgB
Methodology:	Immunoturbidimetric
Additional Information:	Update specimen stability, reference range, and methodology. Please note this test is included in the following group code: 8181 Hemoglobin A1C with MPG

Immunoglobulin A		
Clinical Significance:	Increased IgA is associated with monoclonal IgA myeloma, respiratory & gastrointestinal infections, and malabsorption; decreased IgA is found in Selective IgA Deficiency and Ataxia Telangiectasia.	
Effective Date:	December 1, 2008	
Test Code:	539	
CPT Code(s):	82784	
Specimen Requirements:	2 ml serum	
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 3 days Refrigerated: 1 week Frozen: 3 months	
Reference Ranges:	Cord Blood	1-3 mg/dL
	1 month	2-43 mg/dL
	2-5 months	3-66 mg/dL
	6-9 months	7-66 mg/dL
	10-12 months	12-75 mg/dL
	1-3 years	24-121 mg/dL
	4-6 years	33-235 mg/dL
	7-9 years	41-368 mg/dL
	10-11 years	64-246 mg/dL
	12-13 years	70-432 mg/dL
	14-15 years	57-300 mg/dL
	16 years and older	81-463 mg/dL
Methodology:	Immunoturbidimetric	
Additional Information:	Update specimen stability, reference range, and methodology. Please note this test is included in the following group code: 7083 Immunoglobulins	

Immunoglobulin G		
Clinical Significance:	Increased IgG is associated with acute and chronic inflammations, monoclonal IgG myeloma, autoimmune diseases; decreased IgG is found in selective IgG deficiency, Bruton's Disease, and Acquired Immune Deficiency.	
Effective Date:	December 1, 2008	
Test Code:	543	
CPT Code(s):	82784	
Specimen Requirements:	2 ml serum	
Transport Temperature:	Room Temperature	
Specimen Stability:	Room Temperature: 3 days Refrigerated: 1 week Frozen: 3 months	
Reference Ranges:	Cord Blood	553-1360 mg/dL
	1 month	213-765 mg/dL
	2-5 months	170-595 mg/dL
	6-9 months	187-765 mg/dL
	10-12 months	247-910 mg/dL
	1-3 years	533-1078 mg/dL
	4-6 years	592-1723 mg/dL
	7-9 years	673-1734 mg/dL
	10-11 years	821-1835 mg/dL
	12-13 years	893-1823 mg/dL
	14-15 years	842-2013 mg/dL
	16 years and older	694-1618 mg/dL
Methodology:	Immunoturbidimetric	
Additional Information:	Update specimen stability, reference range, and methodology. Please note this test is included in the following group code: 7083 Immunoglobulins	

Immunoglobulin M																									
Clinical Significance:	Increased IgM is associated with Waldenstrom's Macroglobulinemia, Infectious Mononucleosis, viral infections, Nephrotic Syndrome, & estrogen therapy; decreased IgM is found in selective IgM deficiency, Bruton's Disease, and Acquired Immune Deficiency.																								
Effective Date:	December 1, 2008																								
Test Code:	545																								
CPT Code(s):	82784																								
Specimen Requirements:	2 ml serum																								
Transport Temperature:	Room Temperature																								
Specimen Stability:	Room Temperature: 3 days Refrigerated: 1 week Frozen: 3 months																								
Reference Ranges:	<table border="1"> <tbody> <tr> <td>Cord Blood</td> <td><17 mg/dL</td> </tr> <tr> <td>1 month</td> <td>13-54 mg/dL</td> </tr> <tr> <td>2-5 months</td> <td>17-67 mg/dL</td> </tr> <tr> <td>6-9 months</td> <td>23-84 mg/dL</td> </tr> <tr> <td>10-12 months</td> <td>27-101 mg/dL</td> </tr> <tr> <td>1-3 years</td> <td>26-218 mg/dL</td> </tr> <tr> <td>4-6 years</td> <td>36-314 mg/dL</td> </tr> <tr> <td>7-9 years</td> <td>47-311 mg/dL</td> </tr> <tr> <td>10-11 years</td> <td>46-368 mg/dL</td> </tr> <tr> <td>12-13 years</td> <td>52-367 mg/dL</td> </tr> <tr> <td>14-15 years</td> <td>23-281 mg/dL</td> </tr> <tr> <td>16 years and older</td> <td>48-271 mg/dL</td> </tr> </tbody> </table>	Cord Blood	<17 mg/dL	1 month	13-54 mg/dL	2-5 months	17-67 mg/dL	6-9 months	23-84 mg/dL	10-12 months	27-101 mg/dL	1-3 years	26-218 mg/dL	4-6 years	36-314 mg/dL	7-9 years	47-311 mg/dL	10-11 years	46-368 mg/dL	12-13 years	52-367 mg/dL	14-15 years	23-281 mg/dL	16 years and older	48-271 mg/dL
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Methodology:	Immunoturbidimetric																								
Additional Information:	Update specimen stability, reference range, and methodology. Please note this test is included in the following group code: 7083 Immunoglobulins																								

Prolactin	
Clinical Significance:	During pregnancy and postpartum lactation, serum prolactin can increase 10 to 20 fold. Exercise, stress, and sleep also cause transient increases in prolactin levels. Consistently elevated serum prolactin levels greater than 30 ng/ml in the absence of pregnancy and postpartum lactation are indicative of hyperprolactinemia. Hypersecretion of prolactin can be caused by pituitary adenomas, hypothalamic disease, breast or chest wall stimulation, renal failure or hypothyroidism. A number of drugs, including many antidepressants, are also common causes of abnormally elevated prolactin levels.
Effective Date:	December 1, 2008
Test Code:	746
CPT Code(s):	84146
Specimen Stability:	Room temperature: 5 days Refrigerated: 7 days Frozen: 28 days
Additional Information:	Update specimen stability. Please note this test is included in the following group codes: 4688 – Prolactin, 2 specimens; 4690 – Prolactin, 3 specimens; 4692 – Prolactin, 4 specimens; 4699 – Prolactin, 5 specimens

Rheumatoid Factor	
Clinical Significance:	Elevated RF is found in collagen vascular diseases such as SLE, Rheumatoid Arthritis, Scleroderma, Sjogren's Syndrome, and in other conditions such as Leprosy, Tuberculosis, Syphilis, Malignancy, Thyroid Disease, and in a significant percentage of otherwise normal elderly patients.
Effective Date:	December 1, 2008
Test Code:	4418
CPT Code(s):	86431
Specimen Requirements:	1 ml serum
Transport Temperature:	<i>Room Temperature</i>
Specimen Stability:	Room Temperature: 3 days Refrigerated: 1 week Frozen: 3 months
Reference Ranges:	<14 IU/mL
Methodology:	Immunoturbidimetric
Additional Information:	Update specimen stability, reference range, and methodology

Redirects

Fondaparinux Sodium	
Effective Date:	December 1, 2008
Test Code:	16103
Specimen Stability:	Room temperature: 8 hours Refrigerated: 24 hours Frozen: 21 days
Reference Ranges:	<0.10 mcg/mL The therapeutic range for Fondaparinux is 0.46-1.26 mcg/mL measured 3 hours post dose. The prophylactic range for Fondaparinux is 0.14-0.50 mcg/mL measured 3 hours post dose. This test was developed and its performance characteristics have been determined by Quest Diagnostics Nichols Institute, Chantilly. 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:	Chromogenic
Performing Site:	This test previously performed at Quest Diagnostics Nichols Institute, San Juan Capistrano, will now be performed at Quest Diagnostics Nichols Institute, Chantilly.
Additional Information:	Update performing site, stability, method and always message.

Nuclear Matrix Proteins (NMP)			
Effective Date:	December 1, 2008		
Test Code :	34099		
Specimen Requirements:	10 mL stabilized random urine sample in Matritech NMP-22 urine collection kit (minimum: 5 mL) Collect a single void of urine between midnight and noon. Stabilize sample immediately. Stabilized urine collected with NMP22 Urine Collection Kit should be blue/green in color. Keep sample away from direct sunlight.		
Specimen Stability:	Room temperature: 96 hours Refrigerated: 7 days Frozen: 56 days		
Reference Ranges:	< or = 10 U/mL		
	NMP22, urine test for bladder cancer, is now approved for use as an aid in diagnosing patients at high risk for bladder cancer. The following table summarizes the diagnostic sensitivity of the NMP22 test compared to cytology, in patients with various stages and types of bladder cancer.		
	Tumor Size (mm)	NMP22(%)	Bladder Wash Cytology(%)
Test Sensitivity of NMP22 Versus Bladder Cytology	<=10	76	32
	11-20	67	37
	21-30	75	36
	>=31	93	85
Tumor Grade	1	73	8
	2	72	43
	3	81	77
Tumor Stage	Ta	69	23
	T1	81	64
	T2 or greater	91	73
	Adapted from: Boman H, Hedelin H, Jacobsson S and Holmang S. Newly Diagnosed Bladder Cancer: The Relationship of Initial Symptoms, Degree of Microhematuria and Tumor Marker Status. J Urol 168: 1955-1959, 2002 This test is performed on the Matritech NMP-22 Test Kit, which is an enzyme immunoassay (EIA) for the in vitro quantitative determination of the nuclear matrix protein NMP 22 in stabilized voided urine. Values obtained with different assay methods or kits cannot be used interchangeably. The NMP 22 result should not be interpreted as evidence of the presence or absence of malignant disease in the urinary tract without corroboration from other diagnostic procedures and should only be used in conjunction with other diagnostic information in the management of patients with transitional cell carcinoma of the urinary tract.		
Performing Site:	This test, previously performed at Quest Diagnostics Nichols Institute, will now be performed at Specialty Laboratories.		
Additional Information:	Update sample volume, collection instruction, stability, reference range, always message and performing site.		

Porphyrins, Fractionated, QN, 24 Hour Urine	
Effective Date:	December 1, 2008
Test Code:	729
Specimen Requirements:	2 mL 24-hour urine in 5 g sodium carbonate container or no preservative container 24-hour urine collected with 5 grams of sodium carbonate, refrigerated and protected from light during collection is preferred. Collection with no preservative is acceptable, if properly refrigerated and light protected. 24-hour total volume must be provided on the test request form.
Specimen Stability:	Room temperature: Unacceptable Refrigerated: 7 days Frozen: 30 days
Additional Information:	Update collection instruction and stability.

Porphyrins, Fractionated, Quant., Random Urine	
Effective Date:	December 1, 2008
Test Code:	36592
Specimen Requirements:	2 mL random urine in 5 g sodium carbonate container or no preservative container Random urine collected with 5 grams of sodium carbonate, refrigerated and protected from light during collection is preferred. Collection with no preservative is acceptable, if properly refrigerated and light protected.
Specimen Stability:	Room temperature: Unacceptable Refrigerated: 7 days Frozen: 30 days
Additional Information:	Update collection instruction and stability.

Watermelon (Rf329) IgE**					
Effective Date:	December 1, 2008				
<i>Former Test Name:</i>	<i>Allergen (IgE), ImmunoCAP- Watermelon*(BU remove before sending)</i>				
Test Code:	30755				
Specimen Requirements:	1 mL serum (minimum: 0.3 mL)				
Specimen Stability:	Room temperature and refrigerated: 14 days Frozen: 30 days				
Reference Ranges:	Watermelon (Rf329) IgE: < 0.35 ku/L				
	Class:	Class 0	<0.35	kU/L	Absent/undetectable
		Class 1	0.35-0.70	kU/L	Low Level
		Class 2	0.71-3.50	kU/L	Moderate Level
		Class 3	3.51-17.5	kU/L	High Level
		Class 4	17.6-50	kU/L	Very High Level
		Class 5	51-100	kU/L	Very High Level
		Class 6	>100	kU/L	Very High Level
	<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>				
Methodology:	Immunoassay				
Performing Site:	This test previously performed at IBT Reference Laboratory, will now be performed at Quest Diagnostics Nichols Institute.				
Additional Information:	Update test and result name, specimen requirements, stability, reference range, always message, and methodology.				

Aluminum Whole Blood	
Effective Date:	December 8, 2008
Test Code :	6021
CPT Code(s):	82108
Transport Temperature:	Room temperature
Reference Ranges:	<20.0 mcg/L
Assay Category:	Laboratory Developed Test
Additional Information:	This test, previously performed at NMS Labs, will now be performed at Specialty Laboratories.

Manganese RBC	
Effective Date:	December 8, 2008
Test Code :	3095
Specimen Requirements:	1 mL EDTA Trace Metal whole blood (minimum 0.5 mL)
Transport Temperature:	Refrigerated
Specimen Stability:	Room temperature and Refrigerated: 72 hours Frozen: Unacceptable
Reference Ranges:	Manganese RBC: 12-26 mcg/L
Performing Site:	This test, previously performed at NMS Labs, will now be performed at Specialty Laboratories.
Additional Information:	Update performing site, stability, sample volume, and reference range.

Selenium Whole Blood	
Effective Date:	December 8, 2008
Test Code :	6296
CPT Code(s):	84255
Transport Temperature:	Room temperature
Assay Category:	Laboratory Developed Test
Additional Information:	This test, previously performed at NMS Labs, will now be performed at Specialty Laboratories.

QUEST DIAGNOSTICS NICHOLS INSTITUTE, San Juan Capistrano & Chantilly, Focus Diagnostics, Inc. and Specialty Laboratories

New Tests

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

19911A>G Mutation Analysis	
Clinical Significance:	This test can be used to detect the 19911A>G polymorphism in the prothrombin (Factor II) gene which may modulate the risk of deep vein thrombosis in patients with the G20210A mutation.
Effective Date:	December 8, 2008
Test Code:	16533
CPT Code(s):	83891, 83898, 83892 (x2), 83909, 83914, 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and refrigerated: 8 days Frozen: Do Not Freeze
Reference Ranges:	With report
Methodology:	Polymerase Chain Reaction Amplification, Single Nucleotide Extension, Capillary Electrophoresis, Fluorescence Detection
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Biotinidase Deficiency Mutation Analysis	
Clinical Significance:	Biotinidase deficiency (BD) is an inborn error of metabolism affecting the metabolism of the vitamin biotin. This test will confirm carrier detection by enzyme testing and provide prenatal diagnosis for families with an affected individuals.
Effective Date:	December 8, 2008
Test Code:	16526
CPT Code(s):	83891, 83892 (x7), 83894 (x7), 83898 (x7), 83904 (x7), 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and Refrigerated: 8 days Frozen: Unacceptable
Reference Ranges:	By Report
Methodology:	Polymerase Chain Reaction Amplification, Cycle sequencing
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Biotinidase Activity with Reflex to Mutation Analysis			
Clinical Significance:	This test can confirm biotinidase deficiency in infants identified by newborn screening. Individuals with low enzyme activity will be reflexed to DNA sequencing to identify causative mutations.		
Effective Date:	December 8, 2008		
Test Code:	16537		
CPT Code(s):	82261		
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood AND 2 mL SST (red-top/plastic) serum Both serum and whole blood are required.		
Transport Temperature:	Ship serum frozen / Ship whole blood room temperature		
Specimen Stability:		Serum	Whole blood
	Room temperature:	Unacceptable	8 days
	Refrigerated:	Unacceptable	8 days
	Frozen:	30 days	Unacceptable
	-70 degrees:	90 days	Unacceptable
Reference Ranges:	Biotinidase: 5.1-11.9 nmol/mL/min		
Methodology:	Enzymatic, Colorimetric (Reflex: Polymerase Chain Reaction Amplification, Cycle sequencing)		
Assay Category:	Laboratory Developed Test		
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano		
Additional Information:	If Biotinidase activity is < 5.5, then Biotinidase Deficiency Mutation Analysis will be performed at an additional charge (CPT codes(s): 83891, 83892 (x7), 83894 (x7), 83898 (x7), 83904 (x7), 83912)		

Beta2-Adrenergic Receptor Mutations	
Clinical Significance:	This test detects two polymorphisms in the beta-2 adrenergic receptor (ADRB2) gene: Gly16Arg and Gln27Glu, which have been shown to correlate with the phenotype of bronchodilator responsiveness in asthma.
Effective Date:	December 8, 2008
Test Code:	16176
CPT Code(s):	83891, 83898, 83892 (x2), 83909, 83914, 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and refrigerated: 8 days Frozen: Do Not Freeze
Reference Ranges:	With report
Methodology:	Polymerase Chain Reaction, Single Nucleotide Primer Extension
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Beta-fibrinogen-455G>A Mutation	
Clinical Significance:	This test detects a polymorphism in the promoter region of the fibrinogen gene, -455G>A, which is associated with elevated plasma fibrinogen level, an independent predictor of coronary heart disease.
Effective Date:	December 8, 2008
Test Code:	16182
CPT Code(s):	83891, 83898, 83892(x2), 83909, 83914, 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and refrigerated: 8 days Frozen: Do Not Freeze
Reference Ranges:	With report
Methodology:	Polymerase Chain Reaction, Single Nucleotide Primer Extension
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Factor VII R353Q Mutation Analysis	
Clinical Significance:	This test detects a polymorphism in the Factor VII gene, R353Q, which may confer protection against thrombosis.
Effective Date:	December 8, 2008
Test Code:	16180
CPT Code(s):	83891, 83898, 83892 (x2), 83909, 83914, 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and refrigerated: 8 days Frozen: Do Not Freeze
Reference Ranges:	With report
Methodology:	Polymerase Chain Reaction, Single Nucleotide Primer Extension
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Factor XIII V34L Mutation Analysis	
Clinical Significance:	This test detects a polymorphism in the Factor XIII (FXIII) gene, Val34Leu, which has a small, but significant protective effect against venous thrombosis. It has also been associated with lower risk for stroke and myocardial infarction.
Effective Date:	December 8, 2008
Test Code:	16178
CPT Code(s):	83891, 83898, 83892 (x2), 83909, 83914, 83912
Specimen Requirements:	5 mL EDTA (lavender-top) whole blood
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and refrigerated: 8 days Frozen: Do Not Freeze
Reference Ranges:	With report
Methodology:	Polymerase Chain Reaction, Single Nucleotide Primer Extension
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano

Test Changes

The following test changes will be effective on the dates indicated below. Please note that only the fields listed in bold type are being changed; former test names and test codes have been italicized. Additional information, regarding the change, will be provided where applicable.

Alpha-Thalassemia DNA Mutation Analysis	
Clinical Significance:	This test detects 7 common deletions of the alpha globin gene leading to alpha thalassemia: --SEA, --MED, --PIL, --THAI, -alpha3.7, -alpha4.2, and -(alpha)20.5. It can be used to identify alpha thalassemia mutations in carriers and affected individuals.
Effective Date:	December 8, 2008
Test Code:	11175
Reference Ranges:	With Report
Additional Information:	Update reference range.

37233-Citric Acid, Serum 11315-Citric Acid, 24-Hour Urine (w/o Creatinine) 4616-Citric Acid, 24-Hour Urine (with Creatinine) 11004-Citric Acid, Random Urine	
Clinical Significance:	Citrate binds to calcium and inhibits kidney stone formation. Thus, low concentrations of citrate may lead to kidney stone formation. This is the most important risk factor for kidney stone formation in children. The treatment of calcium stones involves increasing urinary citrate excretion.
Effective Date :	December 8, 2008
Assay Category:	Research Use Only
Performing Site:	Quest Diagnostics Nichols Institute
Additional Information:	Update assay category and add RUO always message.

Legionella Antigen, DFA	
Clinical Significance:	Legionnaire's disease is associated with pneumonia and other illnesses. Antigen detection by DFA is often used in conjunction with culture. Antigen detection provides a more rapid result; however, antigen detection has lower sensitivity and specificity than culture.
Effective Date:	December 8, 2008
<i>Former Test Name:</i>	<i>Legionella Antigen Detection, DFA</i>
Test Code:	34475
Specimen Requirements:	Bronchial washings or sputum in sterile screw cap container, lung tissue or fresh (unfixed) tissue Fixed tissue or tissue in neutral buffered formalin are not acceptable specimen.
Specimen Stability:	Room temperature: 2 hours Refrigerated: 7 days Frozen: Unacceptable
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano
Additional Information:	Update acceptable specimen types and stability.

Norovirus Antigen	
Clinical Significance:	Norovirus is the major cause of nonbacterial gastroenteritis associated with outbreaks and sporadic cases in humans. Norovirus affects all age groups, with an incubation period of 24 to 48 hours and typically last up to 3 days with symptoms of nausea, vomiting, diarrhea, abdominal cramps, headache and fever. Detection of viral antigen in stool helps confirm individual cases and define outbreaks.
Effective Date:	December 15, 2008
Test Code:	15544
Specimen Stability:	Room temperature: Unacceptable Refrigerated: 72 hours Frozen: 21 days
Always Message:	A Positive result indicates the presence of Norovirus antigen, but does not differentiate genotype 1 and 2. Other potential gastrointestinal pathogens may still be present. A Negative result does not fully exclude the presence of Norovirus or infection. Results should always be interpreted in combination with the full clinical picture.
Performing Site:	Focus Diagnostics, Inc.
Additional Information	Update specimen stability and always message.

Pyrazinamide Level, SP	
Effective Date:	December 15, 2008
Test Code:	30308
Specimen Requirements:	4 mL (2 mL min.) serum SST tubes are unacceptable
Performing Site:	Focus Diagnostics, Inc
Additional Information:	Update sample volume.

Discontinued Tests

Cyanide Screen, Blood	
Effective Date:	December 8, 2008
Test Code :	10158
Performing Site:	NMS Labs
Additional Information:	This test will be discontinued. The recommended alternative is 400-Cyanide, Blood performed at Quest Diagnostics Nichols Institute, Chantilly.

AM=6am-12pm, PM=12pm-6pm, E=6pm-12am, Next Day=12am-6am Pacific Time