

Update Notes

Please Note: **Bold** type indicates test change.

Update Summary

New Test Activation	8/27/2019	BUPMS - "Buprenorphine and Metabolites, LC/MS/MS, Serum"
New Test Activation	8/27/2019	IGVHM - "IgVH Mutation, Cell-Based (CLL)"
New Test Activation	8/27/2019	LACPL - "Lactic Acid, Plasma"
Update Existing Test	8/27/2019	CMVM - "Cytomegalovirus (CMV) IgM Antibody"
Update Existing Test	8/27/2019	CRP - "C- Reactive Protein"
Update Existing Test	8/5/2019	EHIST - "Entamoeba Histolytica Antigen, EIA"
Update Existing Test	8/5/2019	FECFT - "Fecal Fat (Lipids), Qualitative"
Update Existing Test	8/19/2019	FXDNA - "Fragile X (FMR1) with Reflex to Methylation Analysis"
Update Existing Test	8/19/2019	HSP70 - "Heat Shock Protein 70, IgG by Immunoblot"
Update Existing Test	8/19/2019	IDHMA - "IDH1 and IDH2 Mutation Analysis, exon 4"
Update Existing Test	8/19/2019	IDHMF - "IDH1 and IDH2 Mutation Analysis, Exon 4, Formalin-Fixed, Pa"
Update Existing Test	8/26/2019	JCVQT - "JC Polyoma Virus, DNA, Quantitative PCR, Serum or Plasma"
Update Existing Test	8/19/2019	MBPCS - "Myelin Basic Protein"
Update Existing Test	8/5/2019	MINPR - "Mineral Profile, RBC's"
Update Existing Test	8/19/2019	MLH1 - "MLH1 Promoter Methylation, Paraffin"
Update Existing Test	8/19/2019	MYOCA - "Myocardial Antibodies-Serum"
Update Existing Test	8/19/2019	NEUOB - "Neutrophil Oxidative Burst Assay (DHR)"
Update Existing Test	8/22/2019	NKCF - "Natural Killer Cell Function"
Update Existing Test	7/25/2019	PLA2A - "Phospholipase A2 Receptor AB, S"
Update Existing Test	8/5/2019	RAGD - "Rotavirus Ag Detection"
Update Existing Test	8/5/2019	TITB - "Titanium, Blood"
Inactivate Test With Replacement	8/27/2019	FUNBA - "Fungitell (R) B-D-Glucan Assay, BAL" replaced by FNBAL - "Fungitell with Reflex to Titer (BAL)"
Inactivate Test With Replacement	8/27/2019	FUNBW - "Fungitell (R) B-D-Glucan Assay, Bronch Wash" replaced by FNBRW - "Fungitell with Reflex to Titer (Bronch Wash)"
Inactivate Test With Replacement	8/27/2019	FUNCS - "Fungitell (R) B-D-Glucan Assay, CSF" replaced by FNCSF - "Fungitell with Reflex to Titer (CSF)"
Inactivate Test With Replacement	8/27/2019	FUNGS - "Fungitell (R) B-D-Glucan Assay, Serum" replaced by FNSE - "Fungitell with Reflex to Titer (Serum)"

Inactivate Test With Replacement	8/19/2019	SPHPV - "Cytology, SurePath Liquid-Based Pap Test and HPV" replaced by CYSUP - "Cytology, SurePathLiquid-Based Pap Test and HPV"
Inactivate Test With Replacement	8/19/2019	ZKVES - "Zika Virus IgM Antibody Capture (MAC), by ELISA" replaced by IKVIE - "Zika Virus IgM Ab Capture (MAC), ELISA"

New Test Activation

Effective Date	8/27/2019
Name	Buprenorphine and Metabolites, LC/MS/MS, Serum
Code	BUPMS
CPT Code(s)	80348 (G0480)
Notes	

Specimen Requirements

Specimen Required	Draw blood in a red-top tube. Centrifuge, remove serum from cells and send 1.0 mL serum (0.5 mL minimum) refrigerated in a screw-capped plastic vial.
Alternate Specimen	
Rejection Criteria	Serum: SST
Stability	Room temperature: 7 days; Refrigerated: 14 days; Frozen: 30 days

Performing Information

Methodology	Liquid Chromatography/Tandem Mass Spectrometry (LC/MS/MS)
Reference Range	By report
Performed Days	Tuesday, Thursday, Saturday
Turnaround Time	3-6 days
Performing Laboratory	Quest Valencia

Interface Information

Legacy Code¹	BUPMS		
Interface Order Code	3700111		
Result Code	Name	LOINC Code	AOE/Prompt²
3700112	Buprenorphine	53846-2	No
3700113	Norbuprenorphine	53880-1	No
3700114	Buprenorphine Glucuronide	89321-4	No
3700115	Norbuprenorphine Glucuronide	89322-2	No

New Test Activation			
Effective Date	8/27/2019		
Name	IgVH Mutation, Cell-Based (CLL)		
Code	IGVHM		
CPT Code(s)	81263		
Notes			
Specimen Requirements			
Specimen Required	Draw blood in a lavender EDTA. Send 3.0 mL whole blood (1.0 mL minimum) refrigerated in original collection tube.		
Alternate Specimen	Whole blood: Sodium heparin, ACD A Bone marrow: EDTA, ACD A		
Rejection Criteria	Hemolysis, frozen samples, clotted samples		
Stability	Room temperature: 72 hours; Refrigerated: 72 hours; Frozen: Unacceptable		
Performing Information			
Methodology	Polymerase Chain Reaction (PCR)		
Reference Range	By report		
Performed Days	Sunday-Wednesday		
Turnaround Time	4-6 days		
Performing Laboratory	Quest SJC		
Interface Information			
Legacy Code ¹	IGVHM		
Interface Order Code	3400089		
Result Code	Name	LOINC Code	AOE/Prompt ²
3400189	IgVH Status	48670-4	No
3400190	Mutation Rate	Not available	No

New Test Activation			
Effective Date	8/27/2019		
Name	Lactic Acid, Plasma		
Code	LACPL		
CPT Code(s)	83605		
Notes			
Specimen Requirements			
Specimen Required	Patient should be fasting and at rest. Patient should not do any exercise of the arm or hand before or during collection. Draw the specimen without a tourniquet, or within 3 minutes of applying the tourniquet, but before releasing the tourniquet. Draw a gray sodium fluoride/potassium oxalate tube, and chill on ice immediately. Centrifuge specimen within 15 minutes of collection. Remove plasma and send 1.0 mL plasma (0.2 mL minimum) refrigerated in a screw-capped plastic vial.		
Alternate Specimen			
Rejection Criteria	Plasma from EDTA, citrate or iodoacetate anticoagulants		
Stability	Room temperature: Unacceptable; Refrigerated: 2 weeks; Frozen: 1 month		
Performing Information			
Methodology	Enzymatic		
Reference Range	0.5 - 2.2 mmol/L		
Performed Days	Sunday-Saturday		
Turnaround Time	3-5 days		
Performing Laboratory	ARUP Reference Laboratory		
Interface Information			
Legacy Code ¹	LACPL		
Interface Order Code	3600036		
Result Code	Name	LOINC Code	AOE/Prompt ²
3600036	Lactic Acid, Plasma	2524-7	No

Update Existing Test	
Effective Date	8/27/2019
Name	Cytomegalovirus (CMV) IgM Antibody
Code	CMVM
Interface Order Code	3007000
Legacy Code	CMVM
Notes	Change of test units from U/mL to AU/mL

Update Existing Test	
Effective Date	8/27/2019
Name	C- Reactive Protein
Code	CRP
Interface Order Code	3000260
Legacy Code	CRP
Notes	

Required Testing Changes			
Alternate Specimen	Plasma: EDTA		
Stability	Room temperature: 7 days; Refrigerated: 30 days; Frozen: 1 year		
Methodology	Immunoturbidometric		
Reference Range	<8.0 mg/L		
Performed Days	Monday-Saturday		
Turnaround Time	3-6 days		
Performing Laboratory	Quest SJC		
Result Code	Name	LOINC Code	AOE/Prompt ²
3000260	C- Reactive Protein	1988-5	No

Update Existing Test	
Effective Date	8/5/2019
Name	Entamoeba histolytica Detection
Code	EHIST
Interface Order Code	3724700
Legacy Code	EHIST
Notes	Please Note: The name of this test has been changed.
Required Testing Changes	
Name	Entamoeba Histolytica Antigen, EIA
Specimen Required	Collect random stool and send 2.0 g or 2.0 mL stool (1.0 g or 1.0 mL minimum) frozen in a sterile polypropylene screw-capped container.
Alternate Specimen	No alternate specimen
Performed Days	Monday, Wednesday, Friday
Turnaround Time	3-6 days

Update Existing Test	
Effective Date	8/5/2019
Name	Fecal Fat (Lipids), Qualitative
Code	FECFT
Interface Order Code	3700525
Legacy Code	FECFATQL
Notes	
Required Testing Changes	
Performed Days	Monday-Saturday

Update Existing Test	
Effective Date	8/19/2019
Name	Fragile X (FMR1) with Reflex to Methylation Analysis
Code	FXDNA
Interface Order Code	3671860
Legacy Code	FXDNAARP
Notes	
Required Testing Changes	
Specimen Required	Draw blood in a lavender EDTA tube. Send 5.0 mL whole blood (1.5 mL minimum) refrigerated.
Stability	Room temperature: 1 week; Refrigerated: 1 month; Frozen: 6 months

Update Existing Test	
Effective Date	8/19/2019
Name	Heat Shock Protein 70, IgG by Immunoblot
Code	HSP70
Interface Order Code	3685925
Legacy Code	HSP70
Notes	
Required Testing Changes	
Performed Days	Thursday
Turnaround Time	3-10 days

Update Existing Test	
Effective Date	8/19/2019
Name	IDH1 and IDH2 Mutation Analysis, exon 4
Code	IDHMA
Interface Order Code	3600099
Legacy Code	IDHMA
Notes	
Required Testing Changes	
Alternate Specimen	Bone marrow: EDTA (lavender), 3.0 mL DNA extracted by a CLIA certified lab. Call Client Services for specimen requirements.
Rejection Criteria	Serum or plasma, anticoagulants other than EDTA or sodium heparin, clotted or grossly hemolyzed specimens, FFPE tissue blocks/slides, frozen tissue, DNA extracted by a non-CLIA certified lab.
Stability	Blood/Bone Marrow: Room temperature: 24 hours; Refrigerated: 5 days; Frozen: Unacceptable Extracted DNA: Room temperature: 1 month; Refrigerated: Indefinitely; Frozen: Unacceptable

Update Existing Test	
Effective Date	8/19/2019
Name	IDH1 and IDH2 Mutation Analysis, Exon 4, Formalin-Fixed, Pa
Code	IDHMF
Interface Order Code	3600097
Legacy Code	IDHMF
Notes	
Required Testing Changes	
Specimen Required	Send formalin fixed, paraffin embedded tissue. Send tissue block or 4 unstained 5-micron slides at room temperature. Tissue block will be returned after testing. Please include pathology report.
Alternate Specimen	DNA extracted by a CLIA certified lab with corresponding client-circled H & E slide. Call Client Services for specimen requirements.
Rejection Criteria	Fixative other than formalin, decalcified specimens, less than 25% tumor, DNA extracted by a non-CLIA lab, DNA extracted without a corresponding circled H & E slide.
Stability	Tissue Block: Room temperature: Indefinitely; Refrigerated: Indefinitely; Frozen: Unacceptable Extracted DNA: Room temperature: 1 month; Refrigerated: Indefinitely; Frozen: Indefinitely

Update Existing Test	
Effective Date	8/26/2019
Name	JC Polyoma Virus DNA, Quant
Code	JCVQT
Interface Order Code	3426340
Legacy Code	JCPVQNTQ
Notes	Please Note: the name of this test has changed.
Required Testing Changes	
Name	JC Polyoma Virus, DNA, Quantitative PCR, Serum or Plasma
Alternate Specimen	Plasma: ACD A Serum: SST, Red-top

Update Existing Test

Effective Date	8/19/2019
Name	Myelin Basic Protein
Code	MBPCS
Interface Order Code	3701310
Legacy Code	CSFMBPSP
Notes	

Required Testing Changes

Specimen Required	Send 1.2 mL CSF (0.5 mL minimum) refrigerated in a screw-capped plastic vial. Do not centrifuge CSF. CSF must be clear. Submitting 4th lumbar puncture collection tube minimizes blood contamination. Blood contamination and hemolysis may interfere with results. CSF MUST BE CLEAR.
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Update Existing Test

Effective Date	8/5/2019
Name	Mineral Profile, RBC's
Code	MINPR
Interface Order Code	3302000
Legacy Code	MINPR
Notes	

Required Testing Changes

Specimen Required	Draw blood in two dark blue EDTA trace metal tubes. Centrifuge and remove plasma within 2 hours of collection , leaving RBC's in the original collection container, and secure stopper. Send 5.0 mL RBC's (1.8 mL minimum) refrigerated.
Rejection Criteria	Specimens received room temperature or frozen. Tubes containing heparin-based anticoagulants are not acceptable. ACD, sodium citrate, sodium fluoride, lavender EDTA also not acceptable.

Update Existing Test

Effective Date	8/19/2019
Name	MLH1 Promoter Methylation, Paraffin
Code	MLH1
Interface Order Code	3624180
Legacy Code	MLH1
Notes	

Required Testing Changes

Alternate Specimen	DNA extracted by CLIA certified lab with corresponding client-circled H&E slide. Call Client Services for specimen requirements.
Rejection Criteria	Specimens fixed in alcohol or heavy metal fixative, decalcified specimens, less than 25% tumor, DNA extracted by a non-CLIA lab, DNA extracted without a corresponding-circled H & E slide.

Update Existing Test

Effective Date	8/19/2019
Name	Myocardial Antibodies-Serum
Code	MYOCA
Interface Order Code	3505260
Legacy Code	MYOCAR
Notes	

Required Testing Changes

Performed Days	Thursday
Turnaround Time	3-10 days

Update Existing Test

Effective Date	8/19/2019
Name	Neutrophil Oxidative Burst Assay (DHR)
Code	NEUOB
Interface Order Code	3688700
Legacy Code	NEUTROBARP
Notes	

Required Testing Changes

Specimen Required	Draw blood in a green sodium or lithium heparin tube. Also draw blood at approximately the same time from a healthy unrelated individual in a green sodium or lithium heparin tube, to be used as a normal control. Send both tubes containing 3.0 mL whole blood at room temperature. Minimum volume 1.0 mL for patient sample and 1.0 mL for control sample. Collect samples Monday-Friday only. Samples must be transported the day of collection. CRITICAL ROOM TEMPERATURE, LIVE NEUTROPHILS REQUIRED.
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Update Existing Test

Effective Date	8/22/2019
Name	Natural Killer Cell Function
Code	NKCF
Interface Order Code	3508000
Legacy Code	NKCF
Notes	

Required Testing Changes

Specimen Required	Draw blood in a green sodium heparin tube. Send 10.0 mL whole blood (5.0 mL minimum) room temperature. Submit Monday-Wednesday only. Do not draw the day prior to a holiday. TESTING MUST BE PREARRANGED.
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Update Existing Test

Effective Date	7/25/2019
Name	Phospholipase A2 Receptor AB, S
Code	PLA2A
Interface Order Code	3800041
Legacy Code	PLA2A
Notes	

Required Testing Changes

CPT Code(s)	86255 (IFA), 83520 (ELISA)
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Update Existing Test

Effective Date	8/5/2019
Name	Rotavirus Ag Detection
Code	RAGD
Interface Order Code	3716440
Legacy Code	RAGDSP
Notes	

Required Testing Changes

Performed Days	Monday, Tuesday, Thursday, Friday
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Update Existing Test	
Effective Date	8/5/2019
Name	Titanium, Blood
Code	TITB
Interface Order Code	3300520
Legacy Code	TITB
Notes	
Required Testing Changes	
Rejection Criteria	Blood: Heparin anticoagulants Clotted specimens

Inactivate Test With Replacement			
Effective Date	8/27/2019		
Inactivated Test			
Name	Fungitell (R) B-D-Glucan Assay, BAL		
Code	FUNBA		
Legacy Code¹	FUNBA		
Interface Order Code	3351480		
Notes			
Replacement Test			
Name	Fungitell with Reflex to Titer (BAL)		
Code	FNBAL		
CPT Code(s)	87449, plus 87449 if reflexed to titer, at additional cost		
Notes			
Specimen Requirements			
Specimen Required	Send 3.0 mL BAL (0.5 mL minimum) frozen in a sterile, screw-capped plastic (polypropylene) container.		
Alternate Specimen			
Rejection Criteria	Room temperature specimens, patients <6 months of age.		
Stability	Room temperature: Unacceptable; Refrigerated: 5 days; Frozen: 1 month		
Performing Information			
Methodology	Limulus Amebocyte Lysate (LAL) pathway		
Reference Range	Negative: <60 pg/mL Indeterminate: 60-79 pg/mL Positive: ≥80 pg/mL		
Performed Days	Monday-Saturday		
Turnaround Time	3-5 days		
Performing Laboratory	Viracor Eurofins		
Interface Information			
Legacy Code¹	FNBAL		
Interface Order Code	3300141		
Result Code	Name	LOINC Code	AOE/Prompt²
3300142	Fungitell (BAL)	88923-8	No
3300143	Fungitell Titer (BAL)	Not available	No

Inactivate Test With Replacement			
Effective Date	8/27/2019		
Inactivated Test			
Name	Fungitell (R) B-D-Glucan Assay, Bronch Wash		
Code	FUNBW		
Legacy Code¹	FUNBW		
Interface Order Code	3351490		
Notes			
Replacement Test			
Name	Fungitell with Reflex to Titer (Bronch Wash)		
Code	FNBRW		
CPT Code(s)	87449, plus 87449 if reflexed to titer, at additional cost		
Notes			
Specimen Requirements			
Specimen Required	Send 3.0 mL bronch wash (0.5 mL minimum) frozen in a sterile, screw-capped plastic (polypropylene) container.		
Alternate Specimen			
Rejection Criteria	Room temperature specimen, patients <6 months of age.		
Stability	Room temperature: Unacceptable; Refrigerated: 5 days; Frozen: 1 month		
Performing Information			
Methodology	Limulus Amebocyte Lysate (LAL) pathway		
Reference Range	Negative: <60 pg/mL Indeterminate: 60-79 pg/mL Positive: ≥80 pg/mL		
Performed Days	Monday-Saturday		
Turnaround Time	3-5 days		
Performing Laboratory	Viracor Eurofins		
Interface Information			
Legacy Code¹	FNBRW		
Interface Order Code	3300144		
Result Code	Name	LOINC Code	AOE/Prompt²
3300145	Fungitell (Bronch Wash)	88923-8	No
3300146	Fungitell Titer (Bronch Wash)	Not available	No

Inactivate Test With Replacement			
Effective Date	8/27/2019		
Inactivated Test			
Name	Fungitell (R) B-D-Glucan Assay, CSF		
Code	FUNCS		
Legacy Code¹	FUNCS		
Interface Order Code	3351500		
Notes			
Replacement Test			
Name	Fungitell with Reflex to Titer (CSF)		
Code	FNCSF		
CPT Code(s)	87449, plus 87449 if reflexed to titer, at additional cost		
Notes			
Specimen Requirements			
Specimen Required	Send 2.0 mL CSF (0.5 mL minimum) frozen in a sterile, screw-capped plastic (polpropylene) container.		
Alternate Specimen			
Rejection Criteria	Room temperature specimen, patients <6 months of age		
Stability	Room temperature: Unacceptable; Refrigerated: 5 days; Frozen: 1 month		
Performing Information			
Methodology	Limulus Amebocyte Lysate (LAL) pathway		
Reference Range	Negative: <60 pg/mL Indeterminate: 60-79 pg/mL Positive: ≥80 pg/mL		
Performed Days	Monday-Saturday		
Turnaround Time	3-5 days		
Performing Laboratory	Viracor Eurofins		
Interface Information			
Legacy Code¹	FNCSF		
Interface Order Code	3300147		
Result Code	Name	LOINC Code	AOE/Prompt²
3300148	Fungitell (CSF)	62468-4	No
3300149	Fungitell Titer (CSF)	Not available	No

Inactivate Test With Replacement			
Effective Date	8/27/2019		
Inactivated Test			
Name	Fungitell (R) B-D-Glucan Assay, Serum		
Code	FUNGS		
Legacy Code¹	FUNGS		
Interface Order Code	3806580		
Notes			
Replacement Test			
Name	Fungitell with Reflex to Titer (Serum)		
Code	FNSER		
CPT Code(s)	87449, plus 87449 if reflexed to titer, at additional cost		
Notes			
Specimen Requirements			
Specimen Required	Draw blood in a SST. Centrifuge, remove serum from cells and send 1.0 mL serum (0.3 mL minimum) frozen in a screw-capped plastic vial.		
Alternate Specimen	Serum: Red-top		
Rejection Criteria	Grossly hemolyzed or lipemic specimens, heel or fingerstick samples, room temperature specimens, patients <6 months of age.		
Stability	Room temperature: Unacceptable; Refrigerated: 48 hours; Frozen: 1 month		
Performing Information			
Methodology	Limulus Amebocyte Lysate (LAL) pathway		
Reference Range	Negative: Less than 60 pg/mL Indeterminate: 60-79 pg/mL Positive: Greater than or equal to 80 pg/mL		
Performed Days	Monday-Saturday		
Turnaround Time	3-5 days		
Performing Laboratory	Viracor Eurofins		
Interface Information			
Legacy Code¹	FNSER		
Interface Order Code	3300150		
Result Code	Name	LOINC Code	AOE/Prompt²
3300151	Fungitell (Serum)	42176-8	No
3300152	Fungitell Titer (Serum)	Not available	No

Inactivate Test With Replacement			
Effective Date	8/19/2019		
Inactivated Test			
Name	Cytology, SurePath Liquid-Based Pap Test and HPV		
Code	SHPV		
Legacy Code¹	SHPV		
Interface Order Code	3662300		
Notes			
Replacement Test			
Name	Cytology, SurePathLiquid-Based Pap Test and HPV		
Code	CYSUP		
CPT Code(s)	88142, add 88141 if reviewed by pathologist, add 87624 if reflexed to HPV		
Notes			
Specimen Requirements			
Specimen Required	Cervical specimen in a SurePath collection kit, Rovers Cervex-Brush Kit, PAP Perfect Plastic Spatula and Cytobrush Plus GT Collection Kit, or Rovers Cervex-Brush Combi Collection Kit. Transport cervical specimen in the original collection kit. Room temperature.		
Alternate Specimen			
Rejection Criteria	Specimens not collected in a SurePath collection kit. Expired preservative vials or vials received without collection devices.		
Stability	Room temperature: 1 month Refrigerated: 6 months Frozen: Unacceptable		
Performing Information			
Methodology	Microscopy/Qualitative Polymerase Chain Reaction		
Reference Range	By report		
Performed Days	Sunday-Saturday		
Turnaround Time	3-10 days		
Performing Laboratory	ARUP Reference Laboratory		
Interface Information			
Legacy Code¹	CYSUP		
Interface Order Code	3600037		
Result Code	Name	LOINC Code	AOE/Prompt²
3600037	Cytology, SurePathLiquid-Based Pap Test and HPV	Not available	No

Inactivate Test With Replacement			
Effective Date	8/19/2019		
Inactivated Test			
Name	Zika Virus IgM Antibody Capture (MAC), by ELISA		
Code	ZKVES		
Legacy Code¹	ZKVES		
Interface Order Code	3600074		
Notes			
Replacement Test			
Name	Zika Virus IgM Ab Capture (MAC), ELISA		
Code	IKVIE		
CPT Code(s)	86794		
Notes			
Specimen Requirements			
Specimen Required	Draw blood in a SST. Centrifuge and separate serum from cell within 2 hours of collection. Send 2.0 mL serum (1.0 mL minimum) refrigerated in a screw-capped plastic vial.		
Alternate Specimen	Serum: Red-top		
Rejection Criteria	Hemolysis, gross lipemia, heat-inactivated specimens		
Stability	Room temperature: 48 hours; Refrigerated: 14 days; Frozen: 1 year		
Performing Information			
Methodology	Semi-quantitative Enzyme-Linked Immunosorbent Assay		
Reference Range	Negative		
Performed Days	Monday, Wednesday, Friday		
Turnaround Time	3-9 days		
Performing Laboratory	ARUP Reference Laboratory		
Interface Information			
Legacy Code¹	IKVIE		
Interface Order Code	3600580		
Result Code	Name	LOINC Code	AOE/Prompt²
3600581	Pregnant?	77996-7	Yes
3600582	Relevant Zika virus Exposure?	55752-0	Yes
3600583	Symptoms consistent with Zika virus?	75325-1	Yes
3600584	Zika Virus IgM Ab Capture (MAC), ELISA	80824-6	No
3600585	Zika IgM Ab Capture (MAC) Confirmation	80619-0	No