Warde Medical Laboratory

TEST DIRECTORY UPDATE

JULY 2022

Update Notes

Update Summary

Announcement	7/1/2022	Reagent Shortage Temporary Inactivation
Announcement	7/1/2022	Test Code Reactivated
Update Existing Test	7/18/2022	APHAG - "Anaplasma phagocytophilum DNA, Qualitative RT-PCR"
Update Existing Test	7/1/2022	CORTS - "Cortisol, Saliva, LC/MS/MS"
Update Existing Test	7/1/2022	HISPL - "Histamine, Plasma"
Update Existing Test	7/1/2022	JAK2Q - "JAK2 (V617F) Mutation, Quantitative (PCR)"
Update Existing Test	7/18/2022	LALA - "Limulus Amebocyte Lysate, Endotoxin"
Update Existing Test	7/1/2022	PMSCQ - "Anti-PM/Scl-100 Ab (RDL)"
Update Existing Test	7/18/2022	SLAA - "Soluble Liver Antigen Auto Abs"
Update Existing Test	7/11/2022	TIFLU - "Titanium, Fluid"
Update Existing Test	7/1/2022	VITD - "25-hydroxy Vitamin D"
Inactivate Test With Replacement	7/6/2022	HPVRA - "HPV RNA, Low and High Risk, ISH" replaced by HPVHL - "HPV High/Low Risk ISH"
Inactivate Test With Replacement	7/18/2022	LYMPB - "Lyme Disease (Borrelia spp) DNA, Qual, RT-PCR, Blood" replaced by BSDQL - "Borrelia Species DNA, Qual Real-Time PCR"

Announcement

Test RETRT - Reticulin Antibody (IgG) Screen with Reflex to Titer is temporarily non-orderable due to reagent shortage. The suggested replacement is TTGG - Tissue Transglutaminase Antibody, IgG.

Announcement

Test code PNEJ - Pneumocystis Jirovecii by DFA is now orderable.

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Update Existing Test	
Effective Date	7/18/2022
Name	Anaplasma phagocytophilum DNA, Qualitative RT-PCR
Code	APHAG
Interface Order Code	3429050
Legacy Code	APHAG
Notes	
Required Testing Changes	
Specimen Required	*Collect:* Lavender EDTA *Specimen Preparation:* Send 0.7 mL whole blood in **original container.** *Minimum Volume:* 0.3 mL *Transport Temperature:* Refrigerated

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Update Existing Test	
Effective Date	7/1/2022
Name	Cortisol, Saliva, LC/MS/MS
Code	CORTS
Interface Order Code	3511840
Legacy Code	CORTSAL
Notes	Updates to patient preparation, rejection criteria, acceptable specimens, stability and performed days.
Required Testing Changes	
Specimen Required	*Patient Preparation:* Do not eat, drink, smoke, **take oral medications**, or use oral hygiene products for at least **60 minutes** prior to collection and **10 minutes before beginning the collection process, rinse the mouth with water to avoid contamination.** *Collect:* **Salivette® Cortisol with blue screw cap** *Sample Preparation:* **Send 0.5 mL saliva collected in Salivette® Cortisol with blue screw cap** **Collection Instructions:** **1- Remove the swab from the Salivette®** **2- Place the swab in the mouth, e.g. in your cheek, where it should remain for 2 min without chewing. If an extremely small amount of saliva is produced, leave the swab in the mouth for longer.** **3- Return the swab with the absorbed saliva to the Salivette®.** **4- Replace the stopper.** **5- Refrigerate the Salivette® immediately.** *Minimum Volume:* 0.2 mL *Transport Temperature:* Refrigerated
Alternate Specimen	**Super SAL™** **Super SAL2™**
Rejection Criteria	Hemolysis, **white top Salivette® collection device**
Performed Days	**Sunday, Monday, Tuesday, Thursday, Friday**
Stability	**Room temperature: 7 days** **Refrigerated: 21 days** **Frozen: 180 days**

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Update Existing Test	
Effective Date	7/1/2022
Name	Histamine, Plasma
Code	HISPL
Interface Order Code	3680810
Legacy Code	HISTAPARP
Notes	Update to specimen preparation.
Required Testing Changes	
Specimen Required	*Specimen Preparation:* Centrifuge, separate the upper two-thirds of the plasma portion and send 1.0 mL plasma in a screw capped plastic vial. CRITICAL FROZEN. **Separate specimens must be submitted when multiple tests are ordered.**

Update Existing Test	
Effective Date	7/1/2022
Name	JAK2 (V617F) Mutation, Quantitative (PCR)
Code	JAK2Q
Interface Order Code	3096210
Legacy Code	JAK2
Notes	Updates to stability and rejection criteria.
Required Testing Changes	
Rejection Criteria	Serum, plasma, **bone marrow**, heparinized whole blood, tissue specimens
Stability	Room temperature: 24 hours **Refrigerated: 14 days** Frozen: Unacceptable

Update Existing Test			
Effective Date	7/18/2022		
Name	Limulus amebocyte Lysate Assay		
Code	LALA		
Interface Order Code	3422360		
Legacy Code	LALQ		
Notes	Update to LOINC and name change.		
Required Testing Changes			
Name	Limulus Amebocyte Lysate, **Endotoxin**		
Result Code	**Name**	**LOINC Code**	**AOE/Prompt²**
3422360	Limulus amebocyte Lysate Assay	**33643-8**	No
3422370	Source	31208-2	**Yes**

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Update Existing Test	
Effective Date	7/1/2022
Name	Anti-PM/Scl-100 Ab (RDL)
Code	PMSCQ
Interface Order Code	3423685
Legacy Code	PMSCQ
Notes	Updates to specimen requirements, minimum volume, stability, rejection criteria
Required Testing Changes	
Specimen Required	*Collect:* Serum separator tube (SST) *Specimen Preparation:* Centrifuge, separate **serum from cells within 1 hour of collection and send 1.0 mL serum** in a screw capped plastic vial. *Minimum Volume:* **0.3 mL** *Transport Temperature:* Refrigerated
Alternate Specimen	Serum: Red top
Rejection Criteria	**Gross hemolysis, bacterial contamination, lipemic, icteric, non-serum specimen types**
Stability	Room temperature: **7 days** Refrigerated: 14 days Frozen: 60 days
Turnaround Time	**14 – 24 days**
Performed	**Varies**

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Update Existing Test	
Effective Date	7/18/2022
Name	Soluble Liver Antigen Auto Abs
Code	SLAA
Interface Order Code	3711250
Legacy Code	SLAAABSP
Notes	Updates to reference range, performed days and performing location.
Required Testing Changes	
Reference Range	**<20.1 U Negative** **20.1 - 24.9 U Equivocal** **≥25.0 U Positive**
Performed Days	**Wednesday**
Performing Location	**Quest SJC**

Update Existing Test	
Effective Date	7/11/2022
Name	Titanium, Fluid
Code	TIFLU
Interface Order Code	3300138
Legacy Code	TIFLU
Notes	
Required Testing Changes	
Specimen Required	*Specimen Preparation:* Send **4.0 mL** fluid in a plastic container (Acid washed or trace metal-free).

Update Existing Test	
Effective Date	7/1/2022
Name	25-hydroxy Vitamin D
Code	VITD
Interface Order Code	1007180
Legacy Code	VITD25H
Notes	Update to performing location – correction from June 2022 update.
Required Testing Changes	
Performing Laboratory	**Quest Valencia**

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Inactivate Test With Replacement	
Effective Date	7/6/2022
Inactivated Test	
Name	HPV RNA, Low and High Risk, ISH
Code	HPVRA
Legacy Code[1]	HPVRA
Interface Order Code	3400161
Notes	
Replacement Test	
Name	HPV High/Low Risk ISH
Code	HPVHL
CPT Code(s)	88365, 88364
Notes	
Specimen Requirements	
Specimen Required	*Patient Preparation:* A pathology/diagnostic report and a brief history are required. *Collect:* Formalin-fixed, paraffin-embedded tissue block and slides *Specimen Preparation:* Send entire formalin-fixed, paraffin-embedded tissue block and 6 unstained glass, positively charged slides with 5(+ or -1)-microns formalin-fixed, paraffin-embedded tissue. *Transport temperature:* Room temperature *New York DOH Approved:* Yes
Rejection Criteria	Wet/frozen tissue, cytology smears, nonformalin fixed tissue, nonparaffin embedded tissue, noncharged slides, ProbeOn slides
Stability	Room temperature: Undetermined Refrigerated: Undetermined Frozen: Unacceptable
Performing Information	
Methodology	In-Situ Hydridization
Reference Range	See report
Performed Days	Monday - Friday
Turnaround Time	7 - 9 days

Performing Laboratory	Mayo Clinic Laboratories		
Interface Information			
Legacy Code[1]	HPVHL		
Interface Order Code	3800281		
Result Code	**Name**	**LOINC Code**	**AOE/Prompt[2]**
3800282	Interpretation	50595-8	No
3800283	Participated in the Interpretation	Not available	No
3800284	Material Received	81178-6	No
3800285	Disclaimer	62364-5	No
3800286	Case Number	80398-1	No
3800287	Report electronically signed by	19135-5	No

Warde Medical Laboratory

LABORATORY REPORT

QC ACCOUNT (WARDE)
300 W. TEXTILE
ANN ARBOR MI 48108

EXAMPLE, REPORT
WX0000003481 F 12/08/1988 33 Y

Referral Testing

Collected: 06/28/2022 14:25 Received: 07/01/2022 08:01

Test Name	Result	Flag	Ref-Ranges	Units	Site
HPV High/Low Risk ISH					
Interpretation	SEE BELOW				MMRL

Source, specimen for Human Papilloma Virus (HPV) In Situ Hybridization (ISH) studies performed on paraffin-embedded tissue sections (SP15-1234-A1):

HPV (family 6) ISH is negative for types 6 and 11.

HPV (family 16) ISH is negative for types 16, 18, 31, 33, and 51.

Participated in the Interpretation	.TNP				MMRL
Material Received	SEE BELOW				MMRL

A. SP15-1234: Source
1 block

Disclaimer	SEE BELOW				MMRL

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Case Number	CR-22-50538				MMRL

Test Performed by:
Mayo Clinic Laboratories - Rochester Main Campus
200 First Street SW, Rochester, MN 55905
Lab Director: William G. Morice M.D. Ph.D.; CLIA# 24D0404292

Report electronically signed by	MICHELE DECKER				MMRL

Performing Site:
MMRL: MAYO MEDICAL REFERENCE LAB 3050 Superior Drive NW Rochester MN 55901

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

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Inactivate Test With Replacement	
Effective Date	7/18/2022
Inactivated Test	
Name	Lyme Disease (Borrelia spp) DNA, Qual, RT-PCR, Blood
Code	LYMPB
Legacy Code[1]	LYMPB
Interface Order Code	3435320
Notes	
Replacement Test	
Name	Borrelia Species DNA, Qual Real-Time PCR
Code	BSDQL
CPT Code(s)	87801
Notes	
Specimen Requirements	
Specimen Required	*Collect:* Lavender EDTA *Specimen Preparation:* Send 1.0 mL whole blood in original tube or in a screw capped plastic vial. *Minimum Volume* 0.5 mL *Transport Temperature:* Refrigerated
Alternate Specimen	Whole blood: Yellow ACD solution A CSF, synovial fluid
Stability	Room temperature: 48 hours Refrigerated: 7 days Frozen: Unacceptable
Performing Information	
Methodology	Real-Time Polymerase Chain Reaction (PCR)
Reference Range	Not detected
Performed Days	Monday - Saturday
Turnaround Time	2 - 5 days
Performing Laboratory	Quest SJC

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Interface Information			
Legacy Code[1]	BSDQL		
Interface Order Code	3400641		
Result Code	**Name**	**LOINC Code**	**AOE/Prompt[2]**
3400642	SOURCE	Not available	**Yes**
3400643	BORRELIA spp DNA, QL, Misc	32667-8	No

Warde Medical Laboratory

LABORATORY REPORT

Example Client, XYZ123
1234 Warde Road
Ann Arbor MI 48108

EXAMPLE, REPORT
WX0000003039 M 12/05/1988 33 Y

Referral Testing

Collected: 07/01/2022 11:05 Received: 07/01/2022 11:05

Test Name	Result	Flag	Ref-Ranges	Units	Site
Borrelia Species DNA, Qual Real-Time PCR					
SOURCE	Blood				QCRL
BORRELIA spp DNA, QL, Misc	NOT DETECTED				QCRL

REFERENCE RANGE: NOT DETECTED

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

For additional information, please refer to https://education.questdiagnostics.com/faq/faq224 (This link is being provided for informational/ educational purposes only.)

Test Performed at:
Quest Diagnostics Nichols Institute
33608 Ortega Highway
San Juan Capistrano, CA 92675-2042 I Maramica MD, PhD

Performing Site:
QCRL: QUEST DIAGNOSTICS REFERENCE LAB CAPISTRANO 33608 Ortega Highway San Juan Capistrano CA 92675

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

D901000002
WX0000003039
Printed D&T: 07/01/22 11:06

Ordered By: CLIENT CLIENT
WX00000000001595

William G. Finn, M.D. - Medical Director
Form: MM RL1