

**MOLECULAR/VIROLOGY UPDATE 2024** 

### **Update Notes**

This update contains minor changes with no set due date. Please make changes as your time permits.

Update Summary				
Update Existing Test	CFMPL - "Cystic Fibrosis Mutation Panel"			
Update Existing Test	CHC - "Chlamydia Culture"			
Update Existing Test	CHPCR - "Chlamydia Testing by PCR"			
Update Existing Test	CMVQA - "Cytomegalovirus DNA, Quantitative"			
Update Existing Test	COPCR - "Chlamydia and Neisseria Testing by PCR"			
Update Existing Test	CVP - "Comprehensive Virus Panel"			
Update Existing Test	CVPCR - "SAR-CoV-2 PCR"			
Update Existing Test	EBQL - "Epstein-Barr Virus DNA PCR, Qualitative"			
Update Existing Test	EBVQN - "Epstein-Barr Virus DNA PCR, Quantitative"			
Update Existing Test	F2PM - "Prothrombin 20210A Mutation Analysis"			
Update Existing Test	F5LM - "Factor V Leiden Mutation Analysis"			
Update Existing Test	FLPCR - "Influenza Virus A and B PCR"			
Update Existing Test	GCPCR - "Neisseria gonorrheae Testing by PCR"			
Update Existing Test	HBVQL - "Hepatitis B Virus (HBV) DNA, Qualitative"			
Update Existing Test	HBVQN - "Hepatitis B Virus (HBV) DNA, Quantitative"			
Update Existing Test	HCVQL - "Hepatitis C Virus (HCV) RNA, Qualitative"			
Update Existing Test	HIVUL - "HIV-1 RNA Ultraquant"			
Update Existing Test	HSVC - "Herpes Culture"			
Update Existing Test	RCVP - "Respiratory Comprehensive Virus Panel"			
Update Existing Test	TCVP - "Tissue Comprehensive Virus Panel"			
Update Existing Test	TVPCR - "Trichomonas vaginalis Testing by PCR"			
Update Existing Test	<u>VC - "Virus Culture"</u>			



Update Existing	Update Existing Test				
Name	Cystic Fibrosis Mutation Panel				
Code	CFMPL				
Interface Order Code	3070431				
Legacy Code	CFMPL				
Notes	Update to specimen requirements, rejection criteria, methodology, performed days, and example report on website.				
<b>Required Testing C</b>	hanges				
Specimen Required	Collect: Lavender top tube Specimen Preparation: Send 3.0 mL whole blood. Minimum Volume: 0.5 mL Transport Temperature: Refrigerated				
Rejection Criteria	Serum, plasma, heparinized whole blood, tissue, non-dedicated specimen				
Methodology	Multiplex Polymerase Chain Reaction (PCR); Luminex TA Sorting				
Performed Days	Tuesday, Friday				

Update Existing Test				
Name	Chlamydia Culture			
Code	СНС			
Interface Order Code	3093000			
Legacy Code	СНС			
Notes	Update to alternate specimen.			
Required Testing C	hanges			
Alternate Specimen	<ul> <li>Place 2.0 mL (1.0 mL minimum) cul-de-sac fluids undiluted in a sterile screw capped container.</li> <li>1) Nasal aspirates in vacuum trap, 1.0 mL (0.5 mL minimum)</li> <li>2) Nasal wash in an IATA-approved sterile screw-capped plastic container, 2.0 mL (1.0 mL minimum)</li> <li>3) Bronchoalveolar lavage/wash in an IATA-approved sterile, screw capped plastic container, 2.0 mL (1.0 mL minimum).</li> <li>4) Placental, fallopian and/or uterine tissue specimens in saline or viral transport medium (snap frozen -20°C)</li> <li>The Laboratory Director or Supervisor must approve testing of specimens other than those listed above.</li> </ul>			



EXAMPLE, REPORT

WX0000073111 F 02/15/1985 39 Y

			Molecul		40.50	<b>D</b> · · ·	00/04/0004	10.50
			-	1: 08/01/2024			08/01/2024	
<u>Test Name</u>			<u>Result</u>	Flag	Ref-Ranges	<u>i</u> <u>l</u>	<u>Units</u>	<u>Site</u>
Cystic Fibrosis Mu	Itation Panel							
Cystic Fibrosis Mutation A			See Below					WMRL
-	rmal Genotype							
This indiv mutations : for CF. The mutations. test varies	Interpretation: This individual is negative for the 39 Cystic Fibrosis (CF) mutations included in this assay, indicating a reduced risk for CF. These results do not exclude all pathogenic CFTR mutations. An individual's residual risk after a negative test varies by ancestry (see table below).							
Estimated of	carrier risk:							
	Rate		Risk Before Test	Residua Risk Afte Negative	er			
Ethnic grou Ashkenazi & European Ca African Ame Hispanic Ar Asian Amer	Jewish 9 aucasian 9 erican 6 merican 7	4% 1% 8% 4% 9%	1/24 1/25 1/61 1/58 1/94	1 in 400 1 in 263 1 in 187 1 in 221 1 in 184				
ethnic popu test is moo history of degree rela various eth accurate re analysis an	ulations. Resi dified by the CF (i.e., hav ative affected nnic groups. F isk assessment nd genetic cou	dual ca presenc ing a f with C or thes requir nseling		er a negat e family or third mixture c uations, yesian	live of			
mutation and to test for gene (GenBa mutations to Warde Labor (https://wa	halysis using the presence ank accession cested for by ratory website ardelab.com/re PL Cystic Fibr	the Lum of 39 number this as : sources	amplification ninex analyzer mutations with NM_00492). A f say can be fou (forms) tation Panel L	was perfor in the CF ull list o nd at the	rmed TR			
CF-causing	pathogenic va	riants.	ot include all The absence o ty of this ind	f a varian				

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

B601001070	Orde
WX0000073111	WX0
Printed D&T: 08/01/24 13:54	



**EXAMPLE, REPORT** WX0000073111 F 02/15/1985 39 Y

	Molecula	r				
	Collected:	08/01/2024	13:53	Received:	08/01/202	4 13:53
<u>Test Name</u>	Result	Flag	Ref-Ranges	<u>U</u>	<u>nits</u>	<u>Site</u>
	a carrier of or affected with CF. The results should not be used as the sole means for clinic or patient management decisions.					
		Repo	rted Date:	08/01/2024	13:54	CFMPL

Performing Site: WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108



EXAMPLE, REPORT

WX0000072099 M 12/05/1988 35 Y

ystic Fibrosis Mutation Panel		Molecula	ar				
<pre>ystic Fibrosis Mutation Panel stic Fibrosis Mutation Analysis See Below AB Result: Heterozygous for I507del mutation Interpretation: This patient is a cystic fibrosis (CF) carrier. The DNA of this patient contains one gene with the I507 deletion (c.1519_1521del) in the cystic fibrosis transmembrane conductance regulator (CFTR) gene and one normal CFTR gene. CF carriers do not exhibit a CF phenotype but the patient has a 1 in 2 chance of transmitting the CF gene to their child. Genetic counseling is recommended. CF testing of the partner may be indicated. Methodology: Multiplex targeted amplification and direct mutation analysis using the Luminex analyzer was performed to test for the presence of 39 mutations within the CFTR gene (GenBank accession number NM_00492). A full list of mutations tested for by this assay can be found at the Warde Laboratory website: (https://wardelab.com/resources/forms) under "CFMPI Cystic Fibrosis Mutation Panel List of Variants Targeted". Limitations: This assay does not include all known CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.</pre>		Collected:	: 08/01/2024 13	3:57	Received:	08/01/202	24 13:5
<pre>Stic Fibrosis Mutation Analysis See Below AB " Result: Heterozygous for I507del mutation Interpretation: This patient is a cystic fibrosis (CF) carrier. The DNA of this patient contains one gene with the I507 deletion (c.1519_1521del) in the cystic fibrosis transmembrane conductance regulator (CFTR) gene and one normal CFTR gene. CF carriers do not exhibit a CF phenotype but the patient has a 1 in 2 chance of transmitting the CF gene to their child. Genetic counseling is recommended. CF testing of the partner may be indicated. Methodology: Multiplex targeted amplification and direct mutation analysis using the Luminex analyzer was performed to test for the presence of 39 mutations within the CFTR gene (GenBank accession number NM_00492). A full list of mutations tested for by this assay can be found at the Warde Laboratory website: (https://wardelab.com/resources/forms) under "CFPML Cystic Fibrosis Mutation Panel List of Variants Targeted". Limitations: This assay does not include all known CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.</pre>	est Name	Result	<u>Flag</u> Re	ef-Ranges	<u>U</u>	<u>nits</u>	<u>Sit</u>
<pre>Result: Heterozygous for I507del mutation Interpretation: This patient is a cystic fibrosis (CF) carrier. The DNA of this patient contains one gene with the I507 deletion (c.1519_1521del) in the cystic fibrosis transmembrane conductance regulator (CFTR) gene and one normal CFTR gene. CF carriers do not exhibit a CF phenotype but the patient has a 1 in 2 chance of transmitting the CF gene to their child. Genetic counseling is recommended. CF testing of the partner may be indicated. Methodology: Multiplex targeted amplification and direct mutation analysis using the Luminex analyzer was performed to test for the presence of 39 mutations within the CFTR gene (GenBank accession number NM_00492). A full list of mutations tested for by this assay can be found at the Warde Laboratory website: (https://wardelab.com/resources/forms) under "CFMPL Cystic Fibrosis Mutation Panel List of Variants Targeted". Limitations: This assay does not include all known CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.</pre>	ystic Fibrosis Mutation Pan	el					
<pre>Interpretation: This patient is a cystic fibrosis (CF) carrier. The DNA of this patient contains one gene with the I507 deletion (c.1519_1521del) in the cystic fibrosis transmembrane conductance regulator (CFTR) gene and one normal CFTR gene. CF carriers do not exhibit a CF phenotype but the patient has a 1 in 2 chance of transmitting the CF gene to their child. Genetic counseling is recommended. CF testing of the partner may be indicated. Methodology: Multiplex targeted amplification and direct mutation analysis using the Luminex analyzer was performed to test for the presence of 39 mutations within the CFTR gene (GenBank accession number NM_00492). A full list of mutations tested for by this assay can be found at the Warde Laboratory website: (https://wardelab.com/resources/forms) under "CFMPL Cystic Fibrosis Mutation Panel List of Variants Targeted". Limitations: This assay does not include all known CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.</pre>	ystic Fibrosis Mutation Analysis	See Below	AB				W
<pre>This patient is a cystic fibrosis (CF) carrier. The DNA of this patient contains one gene with the I507 deletion (c.1519_1521del) in the cystic fibrosis transmembrane conductance regulator (CFTR) gene and one normal CFTR gene. CF carriers do not exhibit a CF phenotype but the patient has a 1 in 2 chance of transmitting the CF gene to their child. Genetic counseling is recommended. CF testing of the partner may be indicated. Methodology: Multiplex targeted amplification and direct mutation analysis using the Luminex analyzer was performed to test for the presence of 39 mutations within the CFTR gene (GenBank accession number NM_00492). A full list of mutations tested for by this assay can be found at the Warde Laboratory website: (https://wardelab.com/resources/forms) under "CFMPL Cystic Fibrosis Mutation Panel List of Variants Targeted". Limitations: This assay does not include all known CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.</pre>	Result: Heterozygous :	for I507del mutation					
CF-causing pathogenic variants. The absence of a variant does not rule out the possibility of this individual being a carrier of or affected with CF. The results of this test should not be used as the sole means for clinical diagnosis or patient management decisions.	<pre>(c.1519_1521del) in th conductance regulator CF carriers do not exh has a 1 in 2 chance of child. Genetic counsed partner may be indicat Methodology: Multiples mutation analysis usin to test for the presen gene (GenBank accession mutations tested for h Warde Laboratory webs: (https://wardelab.com, under "CFMPL Cystic F: Variants Targeted".</pre>	he cystic fibrosis transm (CFTR) gene and one norm hibit a CF phenotype but f transmitting the CF ger ling is recommended. CF t ted. x targeted amplification ng the Luminex analyzer w nce of 39 mutations with on number NM_00492). A fu by this assay can be four ite: /resources/forms) ibrosis Mutation Panel Li	membrane mal CFTR gen the patient testing of t and direct was performe in the CFTR all list of nd at the ist of	: he			
Reported Date: 08/01/2024 13:58 CFMPL	CF-causing pathogenic does not rule out the a carrier of or affect should not be used as	variants. The absence of possibility of this indi ted with CF. The results the sole means for clini	f a variant ividual bein s of this te	est			
			Reported	d Date:	08/01/2024	13:58	CFMPL

WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108

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



Update Existing	g Test		
Name	Chlamydia Testing by PCR		
Code	CHPCR		
Interface Order Code	3000492		
Legacy Code	CHPCR		
Notes	Update to rejection criteria and specimen preparation.		
<b>Required Testing C</b>	hanges		
Specimen Required	Collect: Variable specimen types Specimen Preparation: Endocervical swab, first catch urine, rectal swab, oropharyngeal swab. Swab specimens must be collected using the Alinity m Multi-Collect Collection Kit. Urine specimens must be first catch and the swab can be discarded. <b>Patients should not have urinated</b> <b>less than 1 hour prior.</b> Minimum Volume: Determined by specimen type Transport Temperature: Specimen in Multi-Collect tubes should be shipped refrigerated.		
Rejection Criteria	Specimens submitted with the white cleaning swab or with two swabs. Swabs in any media (e.g., M4, UTM, or Aptima media) other than the Alinity m Multi-Collect Collection Kit. Urine specimens where the liquid level in the urine transport tube does not fall within the clear fill window of the transport tube label (do not overfill). <b>Urine specimens in sterile containers that have exceeded the 24 hour stability</b> . Specimens collected in liquid cytology containers or media will not be tested. Male urethral swab		

Update Existing Test			
Name	Cytomegalovirus DNA, Quantitative		
Code	CMVQA		
Interface Order Code	3092501		
Legacy Code	CMVQA		
Notes	Update to rejection criteria, methodology, reference range, and example report on website.		
<b>Required Testing Cl</b>	hanges		
<b>Rejection Criteria</b>	Whole Blood Specimens (plasma must be separated prior to receipt), shared specimens, specimens that do not meet the collection storage/handling conditions criteria above.		
Methodology	This test uses the polymerase chain reaction to amplify conserved regions of the cytomegalovirus (CMV) UL34 and UL80.5 genes. Real-time detection and quantification are used to determine the viral concentration. The analytical measurement range is 30-10 million IU/mL (1.0 to 7.0 log 10 IU/mL). The qualitative limit of detection is 30 IU/mL (1.49 log 10 IU/mL) compared to the WHO International Standard. Specimens reported as POSITIVE but <50 IU/mL contain detectable levels of CMV DNA but the viral load is below the limit of quantitation. A negative result does not rule out infection.		
Reference Range	Not Detected <30 IU/mL <1.48 log10 IU/mL		



EXAMPLE, REPORT

WX0000072099 M 12/05/1988 35 Y

	Molecular	r			
	Collected: (	08/01/2024	4 13:50	Received: 08/01/2024	13:50
<u>Test Name</u>	<u>Result</u>	Flag	Ref-Ranges	<u>Units</u>	<u>Site</u>
Cytomegalovirus DNA, Quantitative	)				
Cytomegalovirus DNA, Qualitative	Not detected		Not detected	1	WMRL
Cytomegalovirus DNA, Quantitative	<30		<30	IU/mL	WMRL
Log Cytomegalovirus	<1.48		<1.48	Log (10) IU/ml	WMRL
CMV DNA (cp/mL)	<76		<76	Copies/mL	WMRL
This test uses a polymerase chain reaction (PCR) assay from Abbott Molecular Inc. to amplify and detected conserved regions of the cytomegalovirus (CMV) genome that have been extracted from plasma. Real-time detection and quantification are used to determine the viral concentration. The analytical measurement range is 30 IU/mL to 10 million IU/mL (1.48 to 7.00 log10 IU/mL). The lower limit of detection is 30 IU/mL (1.48 log10 IU/mL). Specimens reported as DETECTED but <30 IU/mL contain detectable levels of CMV DNA but the viral load is less than the lower limit of quantitation (30 IU/mL). A negative					

result does not rule out infection.

Reported Date: 08/01/2024 13:50 CMVQA <u>Performing Site:</u> WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108



Update Existing Test				
Name	Chlamydia and Neisseria Testing by PCR			
Code	COPCR			
Interface Order Code	3000499			
Legacy Code	COPCR			
Notes	Update to specimen requirements.			
<b>Required Testing C</b>	hanges			
Specimen Required	Collect: Variable specimen types Specimen Preparation: Vaginal swab, endocervical swab, first catch urine, rectal swab, oropharyngeal swab. Swab specimens must be collected using the Alinity m Multi-Collect Collection Kit. Urine specimens must be first catch and the swab can be discarded. <b>Patients should not have urinated</b> <b>less than one hour prior to collection.</b> <i>Minimum Volume</i> : Determined by specimen type <i>Transport Temperature</i> : Varies, see stability			

Update Existing	Update Existing Test				
Name	Comprehensive Virus Panel				
Code	CVP				
Interface Order Code	3000846				
Legacy Code	CVP				
Notes	Update to stability and example report on website.				
<b>Required Testing C</b>	hanges				
Stability       Room temperature (18-25°C): 4 hours         Refrigerated (2-8°C): 7 days         Frozen (-20°C): 14 days         Frozen (-70°C): 3 months					



#### EXAMPLE, REPORT

WX0000072099 M 12/05/1988 35 Y

	Molecul	ar				
	Collected	1: 08/01/2024	13:43	Received:	08/01/2024	13:43
<u>Test Name</u>	Result	Flag	Ref-Ranges	<u>L</u>	<u> Inits</u>	<u>Site</u>
Comprehensive Virus Panel						
Client Source/ Not Reported	CSF					WMRL
Specimen Source	CSF					WMRL
Herpes simplex Type I	DETECTED	AB	Not detected	1		WMRL
Herpes simplex Type 2	DETECTED	AB	Not detected	1		WMRL
Varicella Zoster Virus	DETECTED	AB	Not detected	1		WMRL
Cytomegalovirus	DETECTED	AB	Not detected	1		WMRL
Adenovirus	DETECTED	AB	Not detected	1		WMRL
Enterovirus	DETECTED	AB	Not detected	1		WMRL
and are indicated in the r sensitivity for these assa HSV-2, and VZV; 150 copies copies/mL for adenovirus a	ays are 50 copies/mI s/mL for enterovirus	for HSV-1 ; 200				
CMV, and 100 copies/mL for	norovirus.					
This procedure utilizes mu reaction amplification and		-	chain			
"Not detected" result does						
This test uses commercial			that			
approved or cleared by the such clearance or approval performance characteristic	is not necessary. cs of this procedure	The				
approved or cleared by the such clearance or approval	is not necessary. cs of this procedure	The				WMRL
approved or cleared by the such clearance or approval performance characteristic determined by Warde Medica	is not necessary. cs of this procedure al Laboratory.	The				WMRL
approved or cleared by the such clearance or approval performance characteristic determined by Warde Medica Rhinovirus	is not necessary. cs of this procedure al Laboratory. NO BILL	The				

Performing Site:

WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108

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



Update Existing Test			
Name	SAR-CoV-2 PCR		
Code	CVPCR		
Interface Order Code	3000878		
Legacy Code	CVPCR		
Notes	Update to alternate specimen and example report on website.		
<b>Required Testing C</b>	hanges		
Alternate Specimen	<ul> <li>One oropharyngeal swab or NP/OP sent frozen in viral transport media.</li> <li>Nasal swab sent frozen in viral transport media.</li> <li>Our internal studies show that Phosphate Buffered Saline (PBS) and sterile saline do not interfere with the analytical performance of the COVID-19 assay. Liquid Amies buffer may decrease the analytical sensitivity of the assay and should be used only when other transport media are not available.</li> <li>Bronchoalveolar lavage/wash in sterile, leak-proof container.</li> </ul>		

Update Existing Test			
Name	Epstein-Barr Virus DNA PCR, Qualitative		
Code	EBQL		
Interface Order Code	3000075		
Legacy Code	EBQL		
Notes	Update to stability, rejection criteria, methodology, and example report on website.		
<b>Required Testing C</b>	hanges		
<b>Rejection Criteria</b>	Serum, heparinized plasma, whole blood, specimens submitted to repeated freeze-thaw cycles		
Stability	Room temperature: 24 hours Refrigerated: 5 days Frozen (-20°C): 30 days Frozen (-70°C): 6 months		
Methodology	This test uses the polymerase chain reaction to amplify regions of the Epstein Barr Virus BLLF1 gene. Real-time detection and quantification are used to determine the viral concentration. The qualitative limit of detection is 20 IU/mL (1.3 log (10) IU/mL). Specimens reported as "Detected" but <50 IU/mL, contain detectable levels of EB Virus DNA, but the viral load is below the limit of quantification. A "Not Detected" result does not rule out infection.		



**EXAMPLE, REPORT** 

WX0000073111 F 02/15/1985 39 Y

	Molecula	ar			
	Collected	: 08/01/202	4 13:45 Red	eived: 08/01/2024	13:45
Test Name	Result	Flag	Ref-Ranges	<u>Units</u>	<u>Site</u>
SAR-CoV-2 PCR					
Specimen Source	Nasopharyngeal Sv	vab			WMRL
SAR-CoV-2	Not detected		Not detected		WMRL
This test utilizes a rea procedure to amplify and the N1 and N2 genes in t analytical sensitivity of A "Not detected" result This test uses commercia approved or cleared by t such clearance or approv performance characterist determined by Warde Medi	d detect conserved sequences of this assay is 500 conditioned on the sequence of this assay is 500 conditioned on the sequence of the sequences of the sequences of the sequence of the sequen	uences in The opies/mL. ection. not been etermined The			

 Reported Date:
 08/01/2024
 13:46
 CVPCR

 Performing Site:
 WMRL:
 WMRDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108



EXAMPLE, REPORT

WX0000073111 F 02/15/1985 39 Y

Molecula					
moreoure	Ir				
Collected:	08/01/2024	4 13:51	Received:	08/01/2024	13:51
<u>Result</u>	Flag	Ref-Ranges	<u>i</u> <u>L</u>	<u>Inits</u>	<u>Site</u>
DETECTED	AB	Not detecte	d		WMRL
s to amplify and d nome extracted fro ve limit of detect	detect reo om plasma zion is 2 esult doe	gions or 0 s not	08/01/2024		EBQL
	Result DETECTED ymerase chain read s to amplify and c nome extracted fro ye limit of detect	ResultFlagDETECTEDABymerase chain reaction (PC: s to amplify and detect re- nome extracted from plasma ve limit of detection is 2 "Not Detected" result doe		Result     Flag     Ref-Ranges     L       DETECTED     AB     Not detected       ymerase chain reaction (PCR)       s to amplify and detect regions       nome extracted from plasma or       ve limit of detection is 20       "Not Detected" result does not	Result     Flag     Ref-Ranges     Units       DETECTED     AB     Not detected       ymerase chain reaction (PCR)       s to amplify and detect regions       nome extracted from plasma or       ve limit of detection is 20       "Not Detected" result does not

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Update Existing	g Test	
Name	Epstein-Barr Virus DNA PCR, Quantitative	
Code	EBVQN	
Interface Order Code	3000071	
Legacy Code	EBVQN	
Notes	pdate to specimen stability, rejection criteria, methodology, reference range, and example eport on website.	
<b>Required Testing Cl</b>	hanges	
Rejection Criteria	Serum, heparinized plasma, whole blood, specimens submitted to repeated freeze-thaw cycles	
Stability	Room temperature: 24 hours Refrigerated: 5 days Frozen (-20°C): 30 days Frozen (-70°C): 6 months	
Methodology	Polymerase Chain Reaction (PCR) This test uses the polymerase chain reaction to amplify regions of the Epstein Barr Virus BLLF1 gene. Real-time detection and quantification are used to determine the viral concentration. The analytical measurement range is 50 to 200 million IU/mL (1.7 to 8.3 log (10) IU/mL). The qualitative limit of detection is 20 IU/mL (1.3 log (10) IU/mL). Specimens reported as "DETECTED" but <50 IU/mL, contain detectable levels of EB Virus DNA but the viral load is below the limit of quantification. A "NOT DETECTED" result does not rule out infection.	
Reference Range	EBV Qualitative: Not Detected EBV Quantitative: <50 IU/mL Log EBV: <1.7 log(10) IU/mL	

Update Existing Test			
Name	Prothrombin 20210A Mutation Analysis		
Code	F2PM		
Interface Order Code	3000308		
Legacy Code	F2PM		
Notes	Update to specimen requirements, rejection critiera, and performed days.		
<b>Required Testing C</b>	Required Testing Changes		
Specimen Required	Collect: Lavender EDTA Specimen Preparation: Send 5.0 mL whole blood Minimum Volume: 0.5 mL Transport Temperature: Refrigerated		
Rejection Criteria	Serum, plasma, heparinized whole blood, tissue, non-dedicated specimen		
Performed Days	Monday, Wednesday, Friday		



EXAMPLE, REPORT

WX0000072099 M 12/05/1988 35 Y

	Molecul	ar				
	Collected	l: 08/01/2024	4 13:52	Received:	08/01/20	)24 13:52
Test Name	Result	Flag	Ref-Ranges	<u>l</u>	<u>Units</u>	Site
Epstein-Barr Virus DNA PCR, Qua	ntitative					
Epstein-Barr Virus DNA, Qualitative	Not detected		Not detected	d		WMRL
Epstein-Barr Virus DNA, Quantitative	<50		<50	I	IU/mL	WMRL
Log Epstein-Barr Virus DNA	<1.70		<1.70	l	Log (10) IU	l/mL <sup>WMRL</sup>
This test uses real-time por from Abbott Molecular syste of the Epstein Barr Virus of CSF specimens. Real-time de used to determine the viral measurement range is 50 to log(10) IU/mL). The qualita IU/mL (1.3 log(10) IU/mL). Specimens reported as "DETH detectable levels of EB Vin below the limit of quantific does not rule out infection	ems to amplify and genome extracted fr etection and quanti L concentration. Th 200 million IU/mL ative limit of dete ECTED" but <50 IU/m rus DNA, but the vi ication. A "Not Det	detect reaction and fication an	gions or are cal .3 20 n is			
		Repo	orted Date:	08/01/2024	13:52	EBVQN

Performing Site: WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108



			_
<b>b</b>	late	Existing	Tect
	ale	LAISUING	ICSU

Name	Factor V Leiden Mutation Analysis		
Code	F5LM		
Interface Order Code	3000306		
Legacy Code	F5LM		
Notes	Update to specimen requirements and performed days.		
<b>Required Testing C</b>	Required Testing Changes		
	<i>Collect</i> : Lavender EDTA		
Specimen Required	Specimen Preparation: Send 5.0 mL whole blood.		
Specifien Required	Minimum Volume: 0.5 mL		
	Transport Temperature: Refrigerated		
Performed Days	Monday, Wednesday, Friday		

Update Existing Test				
Name	Influenza Virus A and B PCR			
Code	FLPCR			
Interface Order Code	3091830			
Legacy Code	FLUPCR			
Notes	Update to specimen requirements.			
<b>Required Testing C</b>	hanges			
Specimen Required	<ul> <li>Collect: Variable specimen types</li> <li>Specimen Preparation: Specimen source is required.</li> <li>NP and Throat swabs in viral transport medium.</li> <li>Swabs in culturettes must be transferred to viral transport within 24 hours of collection.</li> <li>Bronchoalveolar lavage/wash in a sterile screw capped plastic container. Send 1.0 mL (0.5 mL minimum).</li> <li>Sputum undiluted in a sterile screw capped plastic container. Send 1.0 mL (0.5 mL minimum).</li> <li>Nasal aspirates in vacuum trap. 1.0 mL (0.5 mL minimum).</li> <li>Nasal washes in a sterile screw capped plastic container 1.0 mL (0.5 mL minimum).</li> <li>Nasal washes in a sterile screw capped plastic container 1.0 mL (0.5 mL minimum).</li> <li>Nasal washes in a sterile screw capped plastic container 1.0 mL (0.5 mL minimum).</li> <li>Minimum Volume: Determined by specimen type</li> <li>Transport Temperature: Varies by specimen type, tissues must be sent frozen</li> </ul>			



Update Existing Test				
Name	Neisseria gonorrheae Testing by PCR			
Code	GCPCR			
Interface Order Code	3000482			
Legacy Code	GCPCR			
Notes	Update to specimen requirements.			
<b>Required Testing C</b>	hanges			
Specimen Required	Collect: Variable specimen types Specimen Preparation: Endocervical swab, first catch urine, rectal swab, oropharyngeal swab specimens. Swab specimens must be collected using the Alinity m Multi-Collect Collection Kit. Urine specimens must be first catch and the swab can be discarded. Patients should not have urinated less than 1 hour prior to collection.			

Update Existing Test				
Name	Hepatitis B Virus (HBV) DNA, Qualitative			
Code	HBVQL			
Interface Order Code	3092000			
Legacy Code	HBVQUAL			
Notes	Update to specimen requirements.			
<b>Required Testing C</b>	Required Testing Changes			
Specimen Required	Collect: Lavender EDTA Specimen Preparation: Centrifuge and separate from cells within 6 hours of collection. Send 3.0 mL plasma in a screw capped plastic vial. Dedicated specimens are required. Specimens used in other assays will not be tested. Minimum Volume: 2.5 mL Transport Temperature: Frozen			

Update Existing	g Test	
Name	Hepatitis B Virus (HBV) DNA, Quantitative	
Code	HBVQN	
Interface Order Code	3041500	
Legacy Code	HBVQUANT	
Notes	Update to specimen requirements.	
Required Testing Changes		
Specimen Required	Collect: Lavender EDTA Specimen Preparation: Centrifuge and separate plasma from cells within 6 hours of collection. Send 3.0 mL plasma in a screw capped plastic vial. Dedicated specimens are required. Specimens used in other assays will not be tested. Minimum Volume: 2.5 mL Transport Temperature: Frozen	



Update Existing Test			
Name	Hepatitis C Virus (HCV) RNA, Qualitative		
Code	HCVQL		
Interface Order Code	3010550		
Legacy Code	HCVQUAL		
Notes	Update to performed days.		
Required Testing Changes			
Performed Days	Monday - Friday		

Update Existing Test		
Name	HIV-1 RNA Ultraquant	
Code	HIVUL	
Interface Order Code	3041700	
Legacy Code	HIVULTRA	
Notes	Update to example report on website.	

Update Existing	g Test		
Name	Herpes Culture		
Code	HSVC		
Interface Order Code	3093600		
Legacy Code	HSVC		
Notes	Update to specimen requirements, stability, and rejection criteria.		
<b>Required Testing Cl</b>	hanges		
	Collect: Variable specimen types		
	Specimen Preparation: Swab specimens in viral transport medium. 3.0 mL (1.0 mL minimum).		
Specimen Required	Biopsy/tissue specimens in saline or viral transport medium (Snap frozen -20°C).		
	Minimum Volume: 1.0 mL		
	Transport Temperature: Varies with specimen type, see stability		
	The following specimen types will not be tested: CSF or body fluids; CNS tissue; Urine; Stool;		
	Whole blood, plasma, or serum; Specimens in proprietary PCR transport media; Specimens in		
<b>Rejection Criteria</b>	bacterial transport media, Stewart medium (Culturette), gel, or charcoal transports; Specimens in		
	bacteriological blood culture media; Dry swabs, wooden swabs, calcium alginate swabs; Tissues		
	received in transport media that has not been frozen (-20°C); Frozen specimens (except tissues);		
	Specimens received in non-sterile or leaking containers.		
	Swab: Room temperature: 4 hours		
	Refrigerated: 7 days		
	Frozen: Do Not Freeze (except tissue specimens)		
Stability	Tissue and Biopsy:		
	Room temperature: 4 hours		
	Refrigerated: Unacceptable		
	Frozen (-20°C): 30 days		
	Frozen (-70°C): 3 months		



#### **EXAMPLE, REPORT**

WX0000073111 F 02/15/1985 39 Y

	Molecul	ar			
	Collected	d: 08/01/2024	4 13:59	Received: 08/01/2024	13:59
<u>Test Name</u>	<u>Result</u>	Flag	Ref-Ranges	<u>Units</u>	<u>Site</u>
HIV-1 RNA Ultraquant					
HIV-1 RNA Qualitative	DETECTED	AB	Not detected	Ł	WMRL
HIV-1 RNA Quantitative	56	н	<20	Copies/mL	WMRL
LOG HIV RNA	1.75	н	<1.30	Log (10) Copies/mL	WMRL
HIV-1 Date Received	8/1/24				WMRL
HIV-1 Date Completed	8/1/24				WMRL

This test utilizes a real-time reverse-transcriptase polymerase chain reaction (RT-PCR) assay from Abbott Molecular Systems to amplify and detect HIV-1 RNA genomic sequences that have been extracted from plasma or serum specimens. This test is intended for use alongside clinical presentation and other laboratory markers as an indicator of disease prognosis. This test may also aid in assessing the viral response to antiretroviral treatment as measured by changes in plasma or serum HIV-1 RNA levels. This test should not be used to establish a diagnosis of HIV-1 infection. The limit of detection and the lower limit of quantitation are 20 copies/mL (1.30 log copies/mL). The upper limit of quantitation is 10,000,000 copies/mL (7.00 log copies/mL).

Specimens reported as DETECTED but <20 copies/mL contain detectable level of HIV-1 RNA but the viral load is below the limit of quantitation. A "Not detected" result does not rule out infection.

Reported Date: 08/01/2024 14:00 HIVUL

Performing Site: WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108

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



Update Existing Test			
Name	Respiratory Comprehensive Virus Panel		
Code	RCVP		
Interface Order Code	3000859		
Legacy Code	RCVP		
Notes	Update to stability and example report on website.		
<b>Required Testing Cl</b>	Required Testing Changes		
Stability	Room temperature: 4 Hours Refrigerated (2-8°C): 7 Days Frozen (-20°C): 14 days Frozen (-70°C): 3 months		

Update Existing Test		
Name	Tissue Comprehensive Virus Panel	
Code	TCVP	
Interface Order Code	3000827	
Legacy Code	TCVP	
Notes	Update to example report on website.	

Update Existing Test			
Name	Trichomonas vaginalis Testing by PCR		
Code	TVPCR		
Interface Order Code	3000471		
Legacy Code	TVPCR		
Notes	Update to specimen requirements.		
<b>Required Testing C</b>	hanges		
Specimen Required	Collect: Variable specimen types Specimen Preparation: Endocervical swab, first catch urine. Swab specimens must be collected using the Alinity m Multi-Collect Collection Kit. Urine specimens must be first catch and the swab can be discarded. <b>Patients should not have urinated</b> <b>less than 1 hour prior to collection.</b> Minimum Volume: Determined by specimen type Transport Temperature: Specimens in Multi-Collect tubes should be shipped refrigerated.		



EXAMPLE, REPORT

WX0000073111 F 02/15/1985 39 Y

	Molecular					
	Collected: 08	8/01/2024	13:48	Received:	08/01/2024	13:48
Test Name	Result	<u>Flag</u>	Ref-Ranges		<u>Units</u>	<u>Site</u>
Respiratory Comprehensive Virus Pa	inel					
Specimen Source	Respiratory - Lower					WMRL
Herpes simplex Type I	Not detected		Not detected	d		WMRL
Herpes simplex Type 2	Not detected		Not detected	d		WMRL
Cytomegalovirus	Not detected		Not detected	d		WMRL
Adenovirus	Not detected		Not detected	d		WMRL
Enterovirus	Not detected		Not detected	d		WMRL
Influenza A	DETECTED	AB	Not detected	d		WMRL
Influenza B	Not detected		Not detected	d		WMRL
Respiratory Syncytial Virus	Not detected		Not detected	d		WMRL
Rhinovirus	Not detected		Not detected	d		WMRL
Parainfluenza 1	Not detected		Not detected	d		WMRL
Parainfluenza 2	Not detected		Not detected	d		WMRL
Parainfluenza 3	Not detected		Not detected	d		WMRL
SAR-CoV-2	Not detected		Not detected	d		WMRL

This specimen was tested for multiple viruses by individual PCR reactions. The nucleic acid targets include the glycoprotein G gene of HSV-1, the glycoprotein G/J junction of HSV-2, the CMV DNA polymerase gene, the adenovirus hexon gene, the 5' non-translated region of the enterovirus genome; the matrix gene from influenza A virus, the NS1 gene from influenza B, the HN gene of parainfluenza 1,2, and 3, the RSV RNA polymerase gene, the N1 and N2 genes of SARS-CoV-2, and the 5' untranslated region of rhinovirus.

The analytical sensitivity of these assays are 50 copies/mL for HSV-1, HSV-2; 100 copies/mL for influenza A and B and RSV; 150 copies/mL for enterovirus; 200 copies/mL for adenovirus, rhinovirus and parainfluenza 1,2, and 3; 600 copies/mL for CMV and 500 copies/mL for SARS-CoV2.

This procedure utilizes multiple real-time polymerase chain reaction amplification and detection tests. A "Not detected" result does not rule out infection. This test uses commercial reagents that have not been approved or cleared by the FDA. The FDA has determined that such clearance or approval is not necessary. The performance characteristics of this procedure were determined by Warde Medical Laboratory.

Reported Date: 08/01/2024 13:49 RCVP

Performing Site: WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108

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

Ordered By: CLIENT CLIENT WX0000000409391 Kajal V. Sitwala, MD, PhD - Medical Director Form: MM RL1 PAGE 1 OF 1



#### EXAMPLE, REPORT

WX0000072099 M 12/05/1988 35 Y

	Molecula	r				
	Collected:	08/01/2024	13:47	Received	08/01/202	24 13:47
Test Name	<u>Result</u>	Flag	Ref-Ranges	5	<u>Units</u>	Site
Tissue Comprehensive Virus Panel						
Client Source/ Not Reported	Lung Tissue					WMRL
Specimen Source	Lung Tissue					WMRL
Herpes simplex Type 1	Not detected		Not detecte	d		WMRL
Herpes simplex Type 2	Not detected		Not detecte	d		WMRL
Varicella Zoster Virus	NO BILL					WMRL
Cytomegalovirus	Not detected		Not detecte	d		WMRL
Adenovirus	Not detected		Not detecte	d		WMRL
Enterovirus	Not detected		Not detecte	d		WMRL
Influenza A	Not detected		Not detecte	d		WMRL
Influenza B	Not detected		Not detecte	d		WMRL
Respiratory Syncytial Virus	Not detected		Not detecte	d		WMRL
Rhinovirus	Not detected		Not detecte	d		WMRL
Parainfluenza 1	Not detected		Not detecte	d		WMRL
Parainfluenza 2	Not detected		Not detecte	d		WMRL
Parainfluenza 3	Not detected		Not detecte	d		WMRL
This specimen was tested for m PCR reactions. The nucleic aci glycoprotein G gene of HSV-1, of HSV-2, the VZV open reading hexon gene, the 5' non-transla genome, the matrix gene from i gene from influenza B, the HN and 3, the RSV RNA polymerase region of rhinovirus. The specific viruses tested de and are indicated in the resul sensitivity of theses assays a HSV-2 and VZV; 100 copies/mL for and RSV; 150 copies/mL for ent for adenovirus, rhinovirus, ar This procedure utilizes multip reaction amplification and det "Not detected" result does not	d targets includ the glycoprotein g frame 62, the a ated region of th influenza A virus gene of parainfl gene, and the 5' epend on the spec t field. The ana are 50 copies/mL for Influenza A, terovirus; and 20 d parainfluenza ble real-time pol tection tests. A	e the G/J junc denovirus e enterow , the NS1 uenza 1, untrans1 imen sour lytical for HSV-1 Influenza 0 copies/ 1, 2, and ymerase c	cce , mL a.a.ted			
This test uses commercial read approved or cleared by the FDA such clearance or approval is performance characteristics of determined by Warde Medical La	A. The FDA has de not necessary. T this procedure	termined he	that			
		Repo	rted Date:	08/01/2024	13:47	TCVP

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



#### LABORATORY REPORT

Example Client, XYZ123 1234 Warde Road Ann Arbor MI 48108

#### EXAMPLE, REPORT WX0000072099 M 12/05/1988 35 Y

Performing Site: WMRL: WARDE MEDICAL LABORATORY 300 West Textile Road Ann Arbor MI 48108



Update Existing Test				
Name	Virus Culture			
Code	VC			
Interface Order Code	3093100			
Legacy Code	VC			
Notes	Update to specimen requirements, rejection criteria, and methodology.			
<b>Required Testing Cl</b>	hanges			
	Collect: Variable specimen types			
	Specimen Preparation: Specimen source required.			
	Swab specimens in viral transport medium.			
Specimen Required	Biopsy/tissue specimens in saline or viral transport medium. (snap frozen -20°C).			
	Body fluids undiluted in sterile leak-proof container. 2.0 mL (1.0 mL minimum).			
	Minimum Volume: Determined by specimen type			
	Transport Temperature: Varies with specimen type, see stability			
	CSF - Please reorder as Comprehensive Virus Detection (CVD).			
	Urine, stool, whole blood, or serum - Please reorder as CVD.			
	Specimens in Amplicor, EIA, Gen-Probe, or ProbeTec transport media.			
	Specimens in bacterial transport media, Stewart medium (Culturette) and specimens in			
	bacteriological blood culture media.			
	Dry swabs, wooden swabs, calcium alginate swabs, and swabs in gel transports.			
<b>Rejection Criteria</b>	Tissues received in transport media that has not been frozen (-20°C).			
	Any specimen other than tissues frozen at temperatures warmer than -70°C.			
	Specimens received in non-sterile or leaking containers.			
	Swab specimens (respiratory) in viral transport medium			
	Nasal washes (respiratory) in sterile, leak proof plastic container			
	Nasal aspirates (respiratory) in vacuum trap			
	Bronchoalveolar lavage/wash (respiratory) in sterile leak-proof container			
Methodology	Standard tube cultures and monoclonal antibody staining. Viruses that can be isolated include			
wethodology	most Adenoviruses, most Enteroviruses, and Herpes Simplex Virus.			