Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

| Update Summary | | |
|---|---|---|
| **New Test Activation** | 1/6/2026 | JAK2X - "JAK2 with reflex to NGS for ex12/CALR/MPL" |
| **New Test Activation** | 12/9/2025 | MITQN - "Drug Monitoring, Mitragynine (Kratom), Quant, Urine" |
| **New Test Activation** | 12/9/2025 | MVABM - "Mumps Virus Antibody IgM" |
| **New Test Activation** | 12/2/2025 | USBSP - "NPS Stimulants/Bath Salts Panel, Urine" |
| **Update Existing Test** | 12/2/2025 | BCAF - "Blood Culture, Acid-Fast Bacillus (AFB)" |
| **Update Existing Test** | 12/8/2025 | HPVRG - "HPV mRNA E6/E7, Rect w/Ref to Geno, 16, 18/45" |
| **Update Existing Test** | 12/2/2025 | KRBC - "Potassium - RBC" |
| **Update Existing Test** | 12/8/2025 | LACSF - "Lactic Acid, CSF" |
| **Update Existing Test** | 12/1/2025 | UPHEP - "Phenol Exposure, Urine" |
| **Inactivate Test With Replacement** | 1/6/2026 | MPNCP - "MPN Core Diagnostics Panel" replaced by FMPN - "Focused Myeloproliferative Neoplasm Panel" |

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

## New Test Activation

| | |
|---|---|
| **Effective Date** | 1/6/2026 |
| **Name** | JAK2 with reflex to NGS for ex12/CALR/MPL |
| **Code** | JAK2X |
| **CPT Code(s)** | 81270 |
| **Notes** | New York DOH Approval Status: No |

## Specimen Requirements

| | |
|---|---|
| **Specimen Required** | *Collect:* Whole Blood EDTA Lavender<br>*Specimen Preparation:* Send 1.0 mL whole blood in a screw capped plastic vial.<br>*Minimum Volume:* 0.50 mL<br>*Transport Temperature:* Refrigerated |
| **Alternate Specimen** | Bone Marrow |
| **Rejection Criteria** | Serum, plasma, tissue, buccal brush or swab, grossly hemolyzed specimens |
| **Stability** | Room temperature: 3 days<br>Refrigerated: 7 days<br>Frozen: 30 days |

## Performing Information

| | |
|---|---|
| **Methodology** | Targeted Next Generation Sequencing |
| **Reference Range** | See report |
| **Performed Days** | Monday - Friday |
| **Turnaround Time** | 7 - 14 days |
| **Performing Laboratory** | Warde Medical Laboratory |

## Interface Information

| | |
|---|---|
| **Legacy Code** | JAK2X |
| **Interface Order Code** | 3000924 |

| Result Code | Name | LOINC Code | AOE/Prompt |
|---|---|---|---|
| 3000926 | Specimen Source | 31208-2 | No |
| 3000927 | JAK2 V617F Mutation by PCR | 43399-5 | No |
| 3000928 | Percent of WBCs with V617F Mutation | 53761-3 | No |
| 3000929 | JAK2 V617F Mutation by NGS | 43399-5 | No |
| 3000931 | JAK2 Exon 12 Mutation | 55300-8 | No |
| 3000932 | CALR Exon 9 Mutation | 77174-1 | No |
| 3000933 | MPL Exon 10 Mutation | 62947-7 | No |
| 3000934 | CSF3R Mutation | 92674-1 | No |
| 3000936 | Variant 1 Information | 48005-3 | No |
| 3000937 | Variant 2 Information | 48005-3 | No |
| 3000938 | Interpretation | 50398-7 | No |
| 3000939 | Assay Info | 8266-9 | No |

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000237 F 12/05/1988

Collected: 11/11/2025 14:18 Received: 11/11/2025 14:18

## JAK2 with reflex to NGS for ex12/CALR/MPL

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|
| Specimen Source | Whole Blood | | | | WMRL |
| JAK2 V617F Mutation by PCR | Not detected | | | | WMRL |
| Percent of WBCs with V617F Mutation | <0.1 | | <=0.1 | % | WMRL |
| JAK2 V617F Mutation by NGS | Not detected | | | | WMRL |
| JAK2 Exon 12 Mutation | Not detected | | | | WMRL |
| CALR Exon 9 Mutation | Not detected | | | | WMRL |
| MPL Exon 10 Mutation | Not detected | | | | WMRL |
| CSF3R Mutation | Not detected | | | | WMRL |
| Variant 1 Information | n/a | | | | WMRL |
| Variant 2 Information | n/a | | | | WMRL |
| Interpretation | SEEBELOW | | | | WMRL |

No mutations were detected in codon 617 or exon 12 of JAK2, exon 9 of CALR, exon 10 (codons 505 and 515) of MPL, or CSF3R (cytoplasmic tail truncations). Absence of mutations from these regions does not exclude the presence of a myeloproliferative neoplasm (MPN). Further evaluation for MPN could include BCR-ABL1 rearrangement or Myeloid NGS.

| | | | | | |
|---|---|---|---|---|---|
| Assay Info | SEEBELOW | | | | WMRL |

This assay utilizes quantitative polymerase chain reaction (qPCR) to detect and quantify the presence of JAK2 p.V617F mutation. If the sample is negative (or minimally positive) by PCR, Next Generation Sequencing (NGS) is performed to interrogate DNA from leukocytes for the presence of genomic alterations in exon 12 and exon 14 of JAK2, exon 9 of CALR, exon 10 of MPL (including codons 505 and 515), and exons 14 and 17 of CSF3R. The procedure targets specific loci through PCR enrichment, and the bioinformatics algorithm limits analysis to a discrete set of pathogenic mutations classified in the literature as definitional to diagnosis of myeloproliferative neoplasms. A complete list of variants reportable by this assay can be found on the Warde website (https://wardelab.com/resources/forms).

DNA was aligned to GRCh37 (hg19) for analysis. The transcripts IDs used as reference sequences are NM004972.3 (JAK2), NM_004343.3 (CALR). NM_005373.3 (MPL), and NM_000760.4 (CSF3R).

The lower limit for mutation detection in NGS is approximately 5% variant allele fraction by read proportion (VAF). JAK2 V617F qPCR sensitivity is 0.1%. Results of this assay should be correlated with morphology and other laboratory testing for final diagnosis and classification.

Performing Site:
WMRL: Warde Medical Laboratory 300 West Textile Road Ann Arbor MI 48108 (800)876-6522

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL,

Report Date: 11/18/2025 14:56

E311000011 Ordered By:CLIENT C CLIENT, MD WMB-25-3804

WX0000000237 WX00000000000511



Kajal V. Sitwala, MD, PhD - Medical Director

Printed D&T: 11/19/2025 8:01 AM

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000158 M 07/08/1968

Collected: 11/11/2025 14:17 Received: 11/11/2025 14:17

## JAK2 with reflex to NGS for ex12/CALR/MPL

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|
| Specimen Source | Whole Blood | | | | WMRL |
| JAK2 V617F Mutation by PCR | DETECTED | AB | | | WMRL |
| Percent of WBCs with V617F Mutation | 5.0 | AB | <=0.1 | % | WMRL |
| Variant 1 Information | JAK2 p.V617F | | | | WMRL |
| Interpretation | SEEBELOW | | | | WMRL |

A JAK2 p.V617F (c.1849G>T) mutation is detected by qPCR at the stated WBC%. JAK2 V617F mutation is associated with myeloproliferative neoplasms (MPNs), including polycythemia vera (PV), essential thrombocythemia (ET), and primary myelofibrosis (PMF). NGS testing was not performed on this specimen.

| | | | | | |
|---|---|---|---|---|---|
| Assay Info | SEEBELOW | | | | WMRL |

This assay utilizes quantitative polymerase chain reaction (qPCR) to detect and quantify the presence of JAK2 p.V617F mutation. If the sample is negative (or minimally positive) by PCR, Next Generation Sequencing (NGS) is performed to interrogate DNA from leukocytes for the presence of genomic alterations in exon 12 and exon 14 of JAK2, exon 9 of CALR, exon 10 of MPL (including codons 505 and 515), and exons 14 and 17 of CSF3R. The procedure targets specific loci through PCR enrichment, and the bioinformatics algorithm limits analysis to a discrete set of pathogenic mutations classified in the literature as definitional to diagnosis of myeloproliferative neoplasms. A complete list of variants reportable by this assay can be found on the Warde website (https://wardelab.com/resources/forms).

DNA was aligned to GRCh37 (hg19) for analysis. The transcripts IDs used as reference sequences are NM004972.3 (JAK2), NM_004343.3 (CALR). NM_005373.3 (MPL), and NM_000760.4 (CSF3R).

The lower limit for mutation detection in NGS is approximately 5% variant allele fraction by read proportion (VAF). JAK2 V617F qPCR sensitivity is 0.1%. Results of this assay should be correlated with morphology and other laboratory testing for final diagnosis and classification.

Performing Site:
WMRL: Warde Medical Laboratory 300 West Textile Road Ann Arbor MI 48108 (800)876-6522

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL,

Report Date: 11/18/2025 14:56

E311000010 Ordered By:CLIENT C CLIENT, MD WMB-25-3803

WX0000000158 WX00000000000260



Kajal V. Sitwala, MD, PhD - Medical Director

Printed D&T: 11/19/2025 8:00 AM

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

## New Test Activation

| | |
|---|---|
| **Effective Date** | 12/9/2025 |
| **Name** | Drug Monitoring, Mitragynine (Kratom), Quant, Urine |
| **Code** | MITQN |
| **CPT Code(s)** | 80323 |
| **Notes** | New York DOH Approval Status: Yes |

## Specimen Requirements

| | |
|---|---|
| **Specimen Required** | *Collect:* Random urine<br>*Specimen Preparation:* Send 3.0 mL urine in a screw capped plastic urine cup.<br>*Minimum Volume:* 2.0 mL<br>*Transport Temperature:* Refrigerated |
| **Rejection Criteria** | Preserved urine |
| **Stability** | Room temperature: 7 days<br>Refrigerated: 21 days<br>Frozen: 30 days |

## Performing Information

| | |
|---|---|
| **Methodology** | Chromatography/Mass Spectrometry |
| **Reference Range** | <2 ng/mL |
| **Performed Days** | Tuesday, Thursday, Saturday |
| **Turnaround Time** | 4 - 7 days |
| **Performing Laboratory** | Quest |

## Interface Information

| | |
|---|---|
| **Legacy Code** | MITQN |
| **Interface Order Code** | 3700121 |

| Result Code | Name | LOINC Code | AOE/Prompt |
|---|---|---|---|
| 3700122 | Mitragynine | 96059-1 | No |
| 3700123 | medMATCH Mitragynine | 54247-2 | No |
| 3700124 | Mitragynine Comments | 54247-2 | No |

Warde Medical Laboratory

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000237 F 12/05/1988 36 Y

## Referral Testing

Collected: 11/18/2025 09:18 Received: 11/18/2025 09:18

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|
| **Drug Monitoring, Mitragynine (Kratom), Quant, Urine** | | | | | |
| Mitragynine | NEGATIVE | | <2 | ng/mL | QHRL |
| Mitragynine Comments | SEE BELOW | | | | QHRL |

See LDT message
Test Performed by Quest, Chantilly,
Quest Diagnostics Nichols Institute,
14225 Newbrook Drive, Chantilly, VA 20151
Patrick W Mason, M.D., Ph.D., Director of Laboratories
(703) 802-6900, CLIA 49D0221801

| | | | | | |
|---|---|---|---|---|---|
| medMATCH Comments | . | | | | QHRL |
| Notes and Comments | SEE BELOW | | | | QHRL |

This drug testing is for medical treatment only.
Analysis was performed as non-forensic testing and
these results should be used only by healthcare
providers to render diagnosis or treatment, or to
monitor progress of medical conditions.

LDT Message:
This test was developed and its analytical
performance characteristics have been determined
by Quest Diagnostics Nichols Institute Chantilly,
VA. It has not been cleared or approved by the U.S.
Food and Drug Administration. This assay has been
validated pursuant to the CLIA regulations and is
used for clinical purposes.

Healthcare Providers needing Interpretation assistance,
please contact us at 1.877.40.RXTOX (1.877.407.9869)
M-F, 8am to 10pm EST
Test Performed by Quest, Chantilly,
Quest Diagnostics Nichols Institute,
14225 Newbrook Drive, Chantilly, VA 20151
Patrick W Mason, M.D., Ph.D., Director of Laboratories
(703) 802-6900, CLIA 49D0221801

**Reported Date:** 11/18/2025 09:19 MITQN

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

E318000005
WX0000000237
Printed D&T: 11/18/25 09:19

Ordered By: CLIENT CLIENT
WX00000000000511

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

| New Test Activation | | | |
|---|---|---|---|
| **Effective Date** | 12/9/2025 | | |
| **Name** | Mumps Virus Antibody IgM | | |
| **Code** | MVABM | | |
| **CPT Code(s)** | 86735 | | |
| **Notes** | New York DOH Approval Status: Yes | | |
| **Specimen Requirements** | | | |
| **Specimen Required** | *Collect:* Serum separator tube (SST)<br>*Specimen Preparation:* Centrifuge, separate serum from cells and send 1.0 mL serum in a screw capped plastic vial.<br>*Minimum Volume:* 0.2 mL<br>*Transport Temperature:* Refrigerated | | |
| **Alternate Specimen** | Serum: Red top | | |
| **Rejection Criteria** | Gross hemolysis, grossly lipemic | | |
| **Stability** | Room temperature: 7 days<br>Refrigerated: 14 days<br>Frozen: 30 days | | |
| **Performing Information** | | | |
| **Methodology** | Immunofluorescence Assay (IFA) (CF), Anticomplement Immunofluorescence, Enzyme Immunoassay (EIA), Enzyme Linked Immunosorbent Assay (ELISA) | | |
| **Reference Range** | Titer Interpretation<br><1:20 Antibody not detected<br>≥1:20 Antibody detected | | |
| **Performed Days** | Monday, Tuesday, Thursday-Saturday | | |
| **Turnaround Time** | 3 - 5 days | | |
| **Performing Laboratory** | Quest | | |
| **Interface Information** | | | |
| **Legacy Code** | MVABM | | |
| **Interface Order Code** | 3401116 | | |
| **Result Code** | **Name** | **LOINC Code** | **AOE/Prompt** |
| 3401116 | Mumps Virus Antibody IgM | 6479-0 | No |

Warde Medical Laboratory

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000158 M 07/08/1968 57 Y

## Referral Testing

Collected: 11/18/2025 09:20 Received: 11/18/2025 09:20

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|
| Mumps Virus Antibody IgM | **1:40** | **H** | | | QCRL |

```
Titer    Interpretation
======= ======================
<1:20    Antibody not detected
>or=1:20 Antibody detected

The presence of IgM antibody to mumps typically
indicates recent or current mumps infection;
however, false positive results may occur due to
antibody cross reactivity to parainfluenza virus.

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.

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

**Reported Date:** 11/18/2025 09:20 MVABM

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

E318000006
WX0000000158
Printed D&T: 11/18/25 09:21

Ordered By: CLIENT CLIENT
WX00000000000260

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

| New Test Activation | |
|---|---|
| **Effective Date** | 12/2/2025 |
| **Name** | NPS Stimulants/Bath Salts Panel, Urine |
| **Code** | USBSP |
| **CPT Code(s)** | 80371 |
| **Notes** | New York DOH Approval Status: Yes |
| **Specimen Requirements** | |
| **Specimen Required** | *Collect:* Random urine<br>*Specimen Preparation:* Send 2.0 mL urine in a screw capped plastic vial.<br>*Minimum Volume:* 1.0 mL<br>*Transport Temperature:* Refrigerated |
| **Rejection Criteria** | Polymer gel separation tube (SST or PST) |
| **Stability** | Room temperature: 7 days<br>Refrigerated: 14 days<br>Frozen (-20°C): 14 days |
| **Performing Information** | |
| **Methodology** | Liquid Chromatography - Tandem Mass Spectrometry (LC/MS/MS) |
| **Reference Range** | See report |
| **Performed Days** | Varies |
| **Turnaround Time** | 6 - 10 days |
| **Performing Laboratory** | NMS Labs |
| **Interface Information** | |
| **Legacy Code** | USBSP |
| **Interface Order Code** | 3300393 |

| Result Code | Name | LOINC Code | AOE/Prompt |
|---|---|---|---|
| 3300394 | N,N-Dimethylpentylone | | No |
| 3300396 | Pentylone | | No |
| 3300397 | Ethylone | | No |
| 3300398 | Butylone | | No |
| 3300399 | N-ethyl Pentylone | | No |

Warde Medical Laboratory

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000237 F 12/05/1988 36 Y

## Referral Testing

Collected: 11/18/2025 09:22 Received: 11/18/2025 09:22

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|

### NPS Stimulants/Bath Salts Panel, Urine

| | | | | | |
|---|---|---|---|---|---|
| N,N-Dimethylpentylone | None Detected | | | ng/mL | NMRL |

Reporting Limit: 10 ng/mL
Synonym(s): Dipentylone; bk-DMBDP
N,N-Dimethylpentylone is a novel psychoactive stimulant.
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)

| | | | | | |
|---|---|---|---|---|---|
| Pentylone | None Detected | | | ng/mL | NMRL |

Reporting Limit: 10 ng/mL
Synonym(s): beta-keto-Methylbenzodioxolylpentanamine; bk-MBDP; bk-Methyl-K
Pentylone is a novel psychoactive stimulant.
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)

| | | | | | |
|---|---|---|---|---|---|
| Ethylone | None Detected | | | ng/mL | NMRL |

Reporting Limit: 10 ng/mL
Synonym(s): 3,4-Methylenedioxy-N-ethylcathinone; MDEC; bk-MDEA
Ethylone is a novel psychoactive stimulant.
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)

| | | | | | |
|---|---|---|---|---|---|
| Butylone | None Detected | | | ng/mL | NMRL |

Reporting Limit: 10 ng/mL
Synonym(s): bk-DMBDB
Butylone is a novel psychoactive stimulant.
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)

| | | | | | |
|---|---|---|---|---|---|
| N-ethyl Pentylone | None Detected | | | ng/mL | NMRL |

Reporting Limit: 10 ng/mL
Synonym(s): Ephylone; N-ethylpentylone; bK-EBDP; bk-Ethylbenzodioxolylpentanamine
N-ethyl Pentylone is a novel psychoactive stimulant.
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)
This test was developed and its performance characteristics determined by NMS Labs. It has not been cleared or approved by the US Food and Drug Administration.
Digital data review may have taken place remotely by qualified NMS staff utilizing a secure VPN connection for some or all of the reported results. This is in accordance with and follows CLIA regulations.

Testing performed at NMS Labs, Inc.

Warde Medical Laboratory

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000237 F 12/05/1988 36 Y

## Referral Testing

Collected: 11/18/2025 09:22 Received: 11/18/2025 09:22

| Test Name | Result | Flag | Ref-Ranges | Units | Site |
|---|---|---|---|---|---|

200 Welsh Road
Horsham, PA 19044-2208
Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director
CLIA 39D0197898

**Reported Date:** 11/18/2025 09:22 USBSP

Performing Site:
NMRL: NMS Labs 200 Welsh Road Horsham PA 19044

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

E318000007
WX0000000237
Printed D&T: 11/18/25 09:23

Ordered By: CLIENT CLIENT
WX00000000000511

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

| Update Existing Test | |
|---|---|
| **Effective Date** | 12/2/2025 |
| **Name** | Blood Culture, Acid-Fast Bacillus (AFB) |
| **Code** | BCAF |
| **Interface Order Code** | 3618400 |
| **Legacy Code** | BACF |
| **Notes** | Update to alternate specimen. |
| **Required Testing Changes** | |
| **Alternate Specimen** | **Bone marrow: Bactec® Myco/F Lytic bottle** |

| Update Existing Test | |
|---|---|
| **Effective Date** | 12/8/2025 |
| **Name** | HPV mRNA E6/E7, Rect w/Ref to Geno, 16, 18/45 |
| **Code** | HPVRG |
| **Interface Order Code** | 3400851 |
| **Legacy Code** | HPVRG |
| **Notes** | Update to specimen requirements and stability. |
| **Required Testing Changes** | |
| **Specimen Required** | *Collect:* Liquid cytology<br>*Specimen Preparation:* Collect an anal-rectal sample with a Dacron/Polyester swab. Send Dacron/Polyester swab collected in 3 mL Preservcyt® transport medium ThinPrep® vial or **Aptima® specimen transfer tube (green label).**<br>*Minimum Volume:* 1.5 mL<br>*Transport Temperature:* Room temperature |
| **Stability** | Room temperature: 30 days<br>**Refrigerated: 30 days**<br>**Frozen: Undetermined** |

| Update Existing Test | |
|---|---|
| **Effective Date** | 12/2/2025 |
| **Name** | Potassium - RBC |
| **Code** | KRBC |
| **Interface Order Code** | 3718600 |
| **Legacy Code** | POTR |
| **Notes** | Update to New York approval status. |
| **Required Testing Changes** | |
| **New York Approval** | **New York DOH Approval Status: Yes** |

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

| Update Existing Test | |
|---|---|
| **Effective Date** | 12/8/2025 |
| **Name** | Lactic Acid, CSF |
| **Code** | LACSF |
| **Interface Order Code** | 3401076 |
| **Legacy Code** | LACSF |
| **Notes** | Update to reference range. |
| **Required Testing Changes** | |
| **Reference Range** | Neonate 10-60 mg/dL<br>3-10 Days 10-40 mg/dL<br>11 Days-15 Years 10-25 mg/dL<br>**≥18 years** 10-22 mg/dL |

| Update Existing Test | |
|---|---|
| **Effective Date** | 12/1/2025 |
| **Name** | Phenol Exposure, Urine |
| **Code** | UPHEP |
| **Interface Order Code** | 3301475 |
| **Legacy Code** | UPHEP |
| **Notes** | Update to CPT code and methodology. |
| **Required Testing Changes** | |
| **CPT Code(s)** | **84600** |
| **Methodology** | **Gas Chromatography** |

Warde Medical Laboratory

# TEST DIRECTORY UPDATE

**DECEMBER 2025**

## Inactivate Test With Replacement

| | |
|---|---|
| **Effective Date** | 1/6/2026 |

### Inactivated Test

| | |
|---|---|
| **Name** | MPN Core Diagnostics Panel |
| **Code** | MPNCP |
| **Legacy Code** | MPNCP |
| **Interface Order Code** | 3400877 |

### Replacement Test

| | |
|---|---|
| **Name** | Focused Myeloproliferative Neoplasm Panel |
| **Code** | FMPN |
| **CPT Code(s)** | 81219, 81279, 81270, 81338, 81479 |
| **Notes** | New York DOH Approval Status: No |

### Specimen Requirements

| | |
|---|---|
| **Specimen Required** | *Collect:* Whole Blood EDTA Lavender<br>*Specimen Preparation:* Send 1.0 mL whole blood in a screw capped plastic vial.<br>*Minimum Volume:* 0.50 mL<br>*Transport Temperature:* Refrigerated |
| **Alternate Specimen** | Bone Marrow |
| **Rejection Criteria** | Serum, plasma, tissue, buccal brush or swab, grossly hemolyzed specimens |
| **Stability** | Room temperature: 3 days<br>Refrigerated: 7 days<br>Frozen: 30 days |

### Performing Information

| | |
|---|---|
| **Methodology** | Targeted Next Generation Sequencing |
| **Reference Range** | See report |
| **Performed Days** | Monday - Friday |
| **Turnaround Time** | 7 - 14 days |
| **Performing Laboratory** | Warde Medical Laboratory |

### Interface Information

| | |
|---|---|
| **Legacy Code** | FMPN |
| **Interface Order Code** | 3000911 |

| Result Code | Name | LOINC Code | AOE/Prompt |
|---|---|---|---|
| 3000912 | Specimen Source | 31208-2 | No |
| 3000913 | JAK2 V617F Mutation by NGS | 43399-5 | No |
| 3000914 | JAK2 Exon 12 Mutation | 55300-8 | No |
| 3000916 | CALR Exon 9 Mutation | 77174-1 | No |
| 3000917 | MPL Exon 10 Mutation | 62947-7 | No |
| 3000918 | CSF3R Mutation | 92674-1 | No |
| 3000921 | Variant 1 Information | 48005-3 | No |
| 3000921 | Variant 2 Information | 48005-3 | No |
| 3000922 | Interpretation | 50398-7 | No |
| 3000923 | Assay Info | 8266-9 | No |

# LABORATORY REPORT

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

**EXAMPLE, REPORT**
WX0000000237 F 12/05/1988

Collected: 11/11/2025 14:17 Received: 11/11/2025 14:17

## Focused Myeloproliferative Neoplasm Pnl

| Test Name | Result | Flag | Site |
|---|---|---|---|
| Specimen Source | Whole Blood | | WMRL |
| JAK2 V617F Mutation by NGS | Not detected | | WMRL |
| JAK2 Exon 12 Mutation | Not detected | | WMRL |
| CALR Exon 9 Mutation | Not detected | | WMRL |
| MPL Exon 10 Mutation | Not detected | | WMRL |
| CSF3R Mutation | Not detected | | WMRL |
| Variant 1 Information | n/a | | WMRL |
| Variant 2 Information | n/a | | WMRL |
| Interpretation | SEEBELOW | | WMRL |

No mutations were detected in codon 617 or exon 12 of JAK2, exon 9 of CALR, exon 10 (codons 505 and 515) of MPL, or CSF3R (cytoplasmic tail truncations). Absence of mutations from these regions does not exclude the presence of a myeloproliferative neoplasm (MPN). Further evaluation for MPN could include BCR-ABL1 rearrangement or Myeloid NGS.

| | | | |
|---|---|---|---|
| Assay Info | SEEBELOW | | WMRL |

This assay utilizes Next Generation Sequencing (NGS) to interrogate DNA from leukocytes for the presence of genomic alterations in exon 12 and exon 14 of JAK2 (including codon 617), exon 9 of CALR, exon 10 of MPL (including codons 505 and 515), and exons 14 and 17 of CSF3R. The procedure targets specific loci through PCR enrichment, and the bioinformatics algorithm limits analysis to a discrete set of pathogenic mutations classified in the literature as definitional to diagnosis of myeloproliferative neoplasms. A complete list of variants reportable by this assay can be found on the Warde website (https://wardelab.com/resources/forms).

DNA was aligned to GRCh37 (hg19) for analysis. The transcripts IDs used as reference sequences are NM004972.3 (JAK2), NM_004343.3 (CALR). NM_005373.3 (MPL), and NM_000760.4 (CSF3R).

The lower limit for mutation detection is approximately 5% variant allele fraction by read proportion (VAF). Results of this assay should be correlated with morphology and other laboratory testing for final diagnosis and classification.

Performing Site:

WMRL: Warde Medical Laboratory 300 West Textile Road Ann Arbor MI 48108 (800)876-6522

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL,

Report Date: 11/18/2025 14:55

E311000009 Ordered By:CLIENT C CLIENT, MD WMB-25-3802

WX0000000237 WX00000000000511



Kajal V. Sitwala, MD, PhD - Medical Director

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