

## ACL Laboratories Implements Changes to Specimen Collection Requirements for Women's Health SwabOne™ Panels (Test Order Codes: SWOPNL, SWOEXT, SWOBV, SWOCN, and SWOMU)

**Effective Wednesday, May 16, 2018**, ACL Laboratories Women's Health SwabOne™ panels will remove *ThinPrep*® vial as an acceptable sample type from Test Order Codes: SWOPNL, SWOEXT, SWOBV, SWOCN, and SWOMU. To meet turnaround time, ensure patient safety with timely results, and avoid missing any tests, ACL has determined that the SwabOne™ test panels, listed below, **can no longer be collected in a *ThinPrep*® vial. Please use Universal Transport Medium (UTM) or ESwab collection device for testing.**

ACL SwabOne™ menu is composed of **5** testing options/panels including:

ACL Test Order Code	Bacterial	Candida	Mycoplasma/ Ureaplasma	Trichomonas
<b>SWOPNL</b> SwabOne™ Vaginitis Panel	Atopobium vaginae BVAB2 Megasphaera 1	Candida albicans C. glabrata C. krusei		T. vaginalis
<b>SWOEXT</b> SwabOne™ Extended Vaginitis Panel	Atopobium vaginae BVAB2 Megasphaera 1	Candida albicans C. glabrata C. krusei	M. hominis/genitalium U. urealyticum/parvum	T. vaginalis
<b>SWOBV</b> SwabOne™ Bacterial Vaginosis Panel	Atopobium vaginae BVAB2 Megasphaera 1			
<b>SWOCN</b> SwabOne™ Candida Panel		Candida albicans C. glabrata C. krusei		
<b>SWOMU</b> SwabOne™ Mycoplasma Ureaplasma Panel			M. hominis/genitalium U. urealyticum/parvum	

For additional information regarding these tests, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

### Table of Contents

ACL Laboratories Implements Changes to Specimen Collection Requirements for Women's Health SwabOne™ Panels (Test Order Codes: SWOEXT, SWOPNL, SWOBV, SWOCN, and SWOMU) – 1

United Healthcare's Revision to Laboratory Services Policy – 2

Prostate Specific Antigen, Total with Reflex to Free PSA – 3

ACL Laboratories Announces a New Test Order Code for Celiac Disease – 3

ACL Offers Molecular Testing Option for Detection of Maternal Group B *Streptococcus* (GBS) – 4

ACL Announces Changes to Vasculitis Test Order Codes – 4

Drug Detection Panel, Umbilical Cord, Qualitative (Test Order Code UMBDRG) – 4

ACL Laboratories Announces a New Test Order Code for Calprotectin, Fecal – 5

Lead, Venous Hemoglobin and Erythrocyte Protoporphyrin (Test Order Code PBEPHV) – 5

Nicotine and Cotinine (Test Order Code NICOT) – 5

Inactivation of Synovial Fluid Culture (Test Order Code SYNCS) – 5

Extend hold Anaerobe/Aerobe Culture/Smear (Test Order Code SPROCS) Update – 6

Insulin-like Growth Factor – 1 (Test Order Code ILGF) Update – 6

Granulocyte Antibodies (Test Order Code NEUTR) – 7

Organic Acids, Plasma (Test Order Code ORGACS) – 8

Pregabalin (Test Order Code PBALIN) – 9

Pseudocholesterase (Test Order Code PCHEP) – 10

Histamine, Urine (Test Order Code UHISTA) – 11

Inactivated Tests with Recommended Alternative Tests – 12

Inactivated Tests – 13

## United Healthcare's Revision to Laboratory Services Policy

ACL Laboratories would like to follow-up on information United Healthcare is sharing with their providers. We want to make sure our clients are aware of United Healthcare's revision to their Laboratory Services Policy.

United Healthcare's (UHC) Laboratory Services Policy describes reimbursement rules for duplicate laboratory services by the same or multiple physicians or other health care professionals. Their current policy allows for either the referring physician/other health care professional or the reference laboratory to report laboratory services.

For dates of service on or after June 1, 2018, only reference laboratories reporting laboratory services appended with modifier 90 will be eligible for reimbursement. **Non-reference laboratory physicians or other health care professionals that report laboratory services with modifier 90 will no longer be reimbursed.** This policy enhancement will align with Centers for Medicare & Medicaid Services (CMS) guidelines that only allow reimbursement of laboratory services to the reference laboratory for referred laboratory services.

Reference laboratories may refer to another laboratory and will continue to be reimbursed when the reported laboratory services are appended with modifier 90. Physicians or other health care professionals who own lab equipment and perform laboratory testing will continue to be reimbursed, as modifier 90 would not be appended to the procedure code for the laboratory service. To help ensure appropriate claims adjudication, please confirm that your care provider information in the Network Data Base is accurate.

Any provider reporting laboratory services must follow CLIA certification requirements. Lab certification must support the lab code reported. Please refer to the Clinical Laboratory Improvement Amendment (CLIA) policy for claim submission guidelines.

This announcement pertains to reimbursement policies for services reported using the 1500 Health Insurance Claim Form (CMS-1500) or its electronic equivalent or its successor form.

If you have any questions or concerns related to this policy, please reach out to UHC.

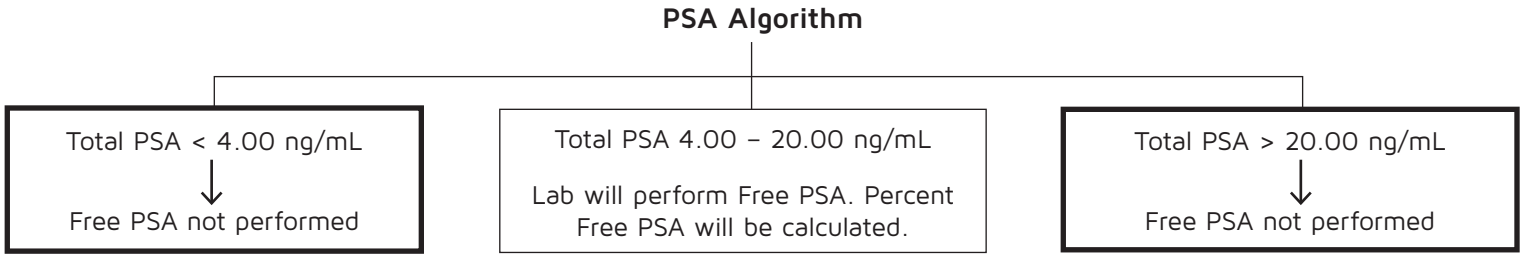
If you currently submit claims to UHC with modifier 90 and would like to transition the billing of UHC claims to ACL Laboratories, as with all of the third party billing requests, please mark the requisition directing ACL to bill the insurance and provide the appropriate billing information needed to process the claim.

**Prostate Specific Antigen, Total with Reflex to Free PSA**

**Effective Wednesday, May 16, 2018**, ACL Laboratories will replace the following test Prostate Specific Antigen, Free Percentage (Test Order Code FPSAR) with a new test, Prostate Specific Antigen, Total with Reflex to Free PSA, (Test Order Code PSAR). A Free PSA will only be performed when the Total PSA result is between 4.00 and 20.00 ng/mL.

When PSA levels are below 4.00 ng/mL, the probability of prostate cancer in asymptomatic men is low and Free PSA provides little additional information. In contrast, when Total PSA concentration is above 10.00 ng/mL, the probability of cancer is high and prostate biopsy is generally recommended, and Free PSA provides limited information.

The Total PSA range of 4.00 to 10.00 ng/mL has been described as a diagnostic “gray zone,” in which the Free PSA helps to determine the relative risk of prostate cancer and helps determine which men should undergo prostate biopsy.



**Interpretive Information:**

In patients with Total PSA concentrations of 4.00 – 10.00 ng/mL, the probability of finding prostate cancer on needle biopsy by age in years is:			
% Free PSA	50 – 59 years	60 – 69 years	70 years and older
0 – 10 %	49%	58%	65%
11 – 18%	27%	34%	41%
19 – 25%	18%	24%	30%
>25%	9%	12%	16%

Testing will be performed daily and results will be available within 24 hours.

For additional information regarding this test, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

**ACL Laboratories Announces a New Test Order Code for Celiac Disease**

**Effective Wednesday, May 16, 2018**, ACL laboratories will offer a new test for Celiac Disease, HLA Celiac – Molecular (Test Order Code HLACEL). Testing, previously performed by ARUP, will now be performed by ACL Laboratories.

Test Name	Current Test Order Code	New Test Order Code
HLA Celiac – Molecular	CELHLA	HLACEL

HLACEL should also be ordered in place of HLA Disease Association (Test Order Code HLADAS) when testing for HLA Celiac DQ Antigens. The HLA Antigens results for DQ2, DQA1\*05, and DQ8 will be reported as POSITIVE or NEGATIVE.

Test Order Code HLADAS will remain available for requesting other HLA antigen testing.

For additional information regarding this test, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

### ACL Offers Molecular Testing Option for Detection of Maternal Group B *Streptococcus* (GBS)

**Effective Wednesday, May 16, 2018**, ACL Laboratories will offer a molecular testing option for detection of GBS. Maternal Group B *Streptococcus* (GBS) colonization screening from vaginal and /or rectal swab has traditionally been performed at ACL by culture following overnight incubation in enrichment broth. Recent advances, using molecular diagnostics, have increased the lab’s ability to detect GBS colonization in expecting mothers. These tests still require incubation in an enrichment broth, but identification is performed directly from the broth using a molecular test instead of additional sub culturing. Molecular detection of GBS with use of an enrichment broth has been shown to be 5-15% more sensitive than culture.

Test Order Code	Test Name	Comment
GBSPCR	Group B Strep by PCR	Specimen screened for Group B Strep by PCR. Sensitivity testing will only be performed upon request. If patient is allergic to penicillin, please order Group B Strep by PCR and Sensitivity (Test Order Code GBPCRS).
GBPCRS	Group B Strep by PCR with Sensitivities	Specimen screened for Group B Strep by PCR. If screening is positive, cultures will automatically be set up to isolate Group B Strep. Sensitivity testing will be performed if Group B Strep is isolated.

Culture, Strep Group B (Test Order Code STGEN) and Group B Strep Genital Culture and Sensitivity (Test Order Code GBSCS) will remain available for traditional culture orders.

For additional information regarding this test, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

### ACL Announces Changes to Vasculitis Test Order Codes

**Effective Wednesday, May 16, 2018**, all of the specific Vasculitis Antibody Assays will be individually orderable as outlined in the table below.

Test Order Code	Test Name	Component Codes	Component Names
VASSRN	Vasculitis Antibody Screen, IgG	MYAB, SP3, AGBM	Myeloperoxidase Antibody, Serine Protease 3 Glomerular Basement Membrane Antibody, IgG
MPR3R	MPO/PR-3 (ANCA) AB	MYAB, SP3	Myeloperoxidase Antibody, Serine Protease 3
AGBM	Glomerular Basement Membrane Antibody, IgG	AGBM	Glomerular Basement Membrane Antibody, IgG
<b>New</b> – MYAB	Myeloperoxidase Antibody, IgG	MYAB	Myeloperoxidase Antibody, IgG
<b>New</b> – SP3	Serine Protease 3	SP3	Serine Protease 3

### Drug Detection Panel, Umbilical Cord, Qualitative (Test Order Code UMBDRG)

**Effective immediately**, Drug Detection Panel, Umbilical Cord, Qualitative (Test Order Code UMBDRG) result for Marijuana Metabolite will be removed from the patient report. It was being reported as “Test component is no longer available” due to a test modification by ARUP Laboratories, the performing laboratory.

### ACL Laboratories Announces a New Test Order Code for Calprotectin, Fecal

**Effective Wednesday, May 16, 2018**, ACL Laboratories will offer a new test for Calprotectin, Fecal (Test Order Code CALPR). Testing, previously sent to Cleveland Clinic Laboratories, will now be performed by ACL Laboratories. All specimen requirements, reference range and turnaround times for the test will remain the same. Current send out Test Order Code CALPRO will be inactivated.

#### Current Sendout Testing Information

Test Order Code	Specimen	Testing Lab	Reference Range	Turnaround Time
CALPRO	5.0 g stool, refrigerated	Cleveland Clinic	≤ 50 ug/g	Within 5 days of receipt

#### New ACL Testing Information

Test Order Code	Specimen	Testing Lab	Reference Range	Turnaround Time
CALPR	5.0 g stool, refrigerated	WI – Central Lab	≤ 50 ug/g	Within 5 days of receipt

### Lead, Venous Hemoglobin and Erythrocyte Protoporphyrin (Test Order Code PBEPHV)

**Effective immediately**, ACL Laboratories has discontinued Lead, Venous Hemoglobin and Erythrocyte Protoporphyrin (Test Order Code PBEPHV). The individual component tests will **no longer be orderable** as a single panel. This test was used primarily by Industrial Toxicology clients. The individual tests are still orderable:

- Lead, Venous and Erythrocyte Protoporphyrin (Test Order Code PBEPV)
- Hemoglobin and Hematocrit (Test Order HH is for Hemoglobin and Hematocrit) **or** CBC without Differential (Test Order Code CBCNO)

For additional information regarding these tests, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

### Nicotine and Cotinine (Test Order Code NICOT)

**Effective immediately**, Nicotine and Cotinine (Test Order Code NICOT) results for Nicotine and Cotinine will be renamed Nornicotine in the patient report due to a test modification by Cleveland Clinic Laboratories, the performing laboratory.

### Inactivation of Synovial Fluid Culture (Test Order Code SYNCS)

**Effective Wednesday, May 16, 2018**, ACL Laboratories will inactivate Synovial Fluid Culture, Gram Stain (Test Order Code SYNCS) in an effort to consolidate test order codes. SYNCS was most appropriate for culture of synovial fluid specimens submitted from patients with suspected infection of NATIVE JOINTS. The pathogens most commonly associated with these infections are rapidly growing organisms that can routinely be detected within 24 – 48 hours. Instead of ordering SYNCS, providers should order Culture, Anaerobic/Aerobic with Smear (Test Order Code AANC) as is done with other sterile body fluids. Synovial fluid specimens submitted for AANC will be cultured in an identical manner as SYNCS specimens with the exception that specimens will be incubated for 4 days instead of 5 days. All other reporting will be identical to the current SYNCS test order code reporting format.

Prosthetic joints can be infected with the same rapidly growing organisms commonly found in native joint infections, but they may also be infected with slower growing organisms that often won't be recovered within 4 days of incubation. When synovial fluid (or tissue) from those patients with PROSTHETIC JOINTS is submitted for culture, providers should order Extend hold Anaerobe/Aerobe Culture/Smear (Test Order Code SPROCS). Specimens submitted for SPROCS will be incubated for 14 days and will include additional media to ensure isolation of slower growing pathogens commonly associated with prosthetic joint infection.

For additional information regarding these tests, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

### Extend hold Anaerobe/Aerobe Culture/Smear (Test Order Code SPROCS) Update

Extend hold Anaerobe/Aerobe Culture/Smear (Test Order Code SPROCS) was initially designed for use with synovial fluid and tissue submitted from patients with suspected prosthetic joint infections. Based on updated best practice information, ACL Laboratories has extended the use of this culture to the following specimen types: brain specimens, invasive eye specimens (corneal scrapings, vitreous fluid, aqueous fluid, anterior chamber fluid, etc.), and intrauterine devices. Bacterial infections in these sources can often occur with slow growing pathogens that require an extended period of time to isolate in culture. These specimens should no longer be submitted for Culture, Anaerobic/Aerobic with Smear (Test Order Code AANC). Instead, providers should order Extend hold Anaerobe/Aerobe Culture/Smear (Test Order Code SPROCS) to ensure that the cultures are incubated for the appropriate duration. In addition, any specimen in which the provider specifically wishes to rule out *Propionibacterium acnes* or anaerobic *Actinomyces* should order SPROCS.

### Insulin-like Growth Factor – 1 (Test Order Code ILGF) Update

**Effective Wednesday, May 16, 2018**, ACL Laboratories will update the reference ranges and tanner stage ranges for Insulin-like Growth Factor – 1 (Test Order Code ILGF). This is due to a change made by the manufacturer to make ranges more consistent with expected physiological change in insulin-like growth factor levels.

The updated reference ranges and tanner stage ranges for Insulin-like Growth Factor – 1 are listed below. The test is performed on Monday, Wednesday and Friday. The final result is reported within 4 days.

#### Reference Range

Male		Female	
Age	Ranges	Age	Ranges
0-3	<15-129	0-3	18-172
4-6	22-208	4-6	35-232
7-9	40-255	7-9	57-277
10-11	69-316	10-11	118-448
12-13	143-506	12-13	170-527
14-15	177-507	14-15	191-496
16-18	173-414	16-18	190-429
19-21	117-323	19-21	117-323
22-24	99-289	22-24	99-289
25-29	84-259	25-29	84-259
30-34	71-234	30-34	71-234
35-39	63-223	35-39	63-223
40-44	58-219	40-44	58-219
45-49	53-215	45-49	53-215
50-54	48-209	50-54	48-209
55-59	45-210	55-59	45-210
60-64	43-220	60-64	43-220
65-69	40-225	65-69	40-225
70-79	35-216	70-79	35-216
80+	31-208	80+	31-208

#### Tanner Stage Range

Male-Tanner Stages		Female-Tanner Stages	
Male		Female	
Stage	Ranges	Stage	Ranges
1	63.2-271.0	1	71.4-394.0
2	114.0-411.0	2	122.0-508.0
3	166.0-510.0	3	164.0-545.0
4	170.0-456.0	4	174.0-480.0
5	161.0-384.0	5	169.0-400.0

For additional information regarding this test, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016 or visit our website at [www.acllaboratories.com/test-catalog/](http://www.acllaboratories.com/test-catalog/).

**Granulocyte Antibodies (Test Order Code NEUTR)**

**Effective June 6, 2018**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements and test performance for Granulocyte Antibodies (Test Order Code NEUTR).

Specimen collection requirements are as follows:

Granulocyte Antibodies (Test Order Code NEUTR)	Current Specimen Collection Requirements	Effective June 6, 2018 – New Specimen Collection Requirements
<b>Collect</b>	One plain red 4.0 mL	One plain red 6.0 mL (also acceptable: gold gel 5.0 mL)
<b>Transport</b>	2.0 mL (min: 0.3 mL) serum refrigerated	3.0 mL (min: 0.5 mL) serum frozen. <b>Critical: Specimen must be frozen.</b>
<b>Unacceptable Conditions</b>	Samples submitted in separator tubes and gels.	Unfrozen specimens.
<b>Stability</b>	Ambient: 1 Week Refrigerated: 1 Month Frozen: 1 Year	Ambient: <b>Unacceptable</b> Refrigerated: <b>Unacceptable</b> Frozen: 1 Month
<b>Performed</b>	Monday, Wednesday, Friday	Monday, Thursday
<b>Reporting Time</b>	Final within 17 Days	Final within 7 Days

**Organic Acids, Plasma (Test Order Code ORGACS)**

**Effective immediately**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements and test performance for Organic Acids, Plasma (Test Order Code ORGACS).

Specimen collection requirements are as follows:

Organic Acids, Plasma (Test Order Code ORGACS)	Current Specimen Collection Requirements	New Specimen Collection Requirements
<b>Patient Preparation</b>		If the Biochemical Genetics Patient History Form has not been completed/presented up front, patient should not be collected and will be instructed to contact their ordering provider.
<b>Collect</b>	One light green (lithium heparin gel) 4.5 mL (also acceptable: green (lithium heparin no gel) 6.0 mL and green (sodium heparin no gel) 6.0 mL). Separate plasma from cells ASAP or within 2 hours of collection.	One light green (lithium heparin gel) 4.5 mL (also acceptable: green (lithium heparin no gel) 6.0 mL and green (sodium heparin no gel) 6.0 mL) <b>Separate plasma from cells within 1 hour of collection.</b>
<b>Transport</b>	3.0 mL (min: 2.0 mL) plasma frozen <b>CRITICAL: Specimen must be frozen.</b> Submit a separate aliquot for each test requiring a frozen specimen.	3.0 mL (min: 2.0 mL) plasma frozen <b>CRITICAL: Specimen must be frozen.</b> Submit a separate aliquot for each test requiring a frozen specimen.
<b>Unacceptable Conditions</b>	Refrigerated Ambient	Refrigerated Ambient Hemolyzed specimens
<b>Stability</b>	Frozen: 1 Month	Frozen: 1 Month
<b>Order Remarks</b>		Clinical information is needed for appropriate interpretation. Additional required information includes age, gender, diet (e.g. TPN therapy), drug therapy, and family history. <b>Biochemical Genetics Patient History Form.</b>
<b>Performed</b>	Tuesday	Tuesday
<b>Reporting Time</b>	Final within 17 Days	Final within 17 Days



**Pregabalin (Test Order Code PBALIN)**

**Effective immediately**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements and test performance for Pregabalin (Test Order Code PBALIN).

Specimen collection requirements are as follows:

Pregabalin (Test Order Code PBALIN)	Current Specimen Collection Requirements	Effective immediately – New Specimen Collection Requirements
<b>Collect</b>	One plain red 6.0 mL. Centrifuge within 2 hours of draw and transfer to CCL’s Sarstedt (primary), Non-Sterile Aliquot tube.	One plain red 6.0 mL (also acceptable: one EDTA lavender 3.0 mL). Centrifuge within 2 hours of draw and transfer to CCL’s Sarstedt (primary), Non-Sterile Aliquot tube.
<b>Transport</b>	1.0 mL (min: 0.5 mL) serum refrigerated	1.0 mL (min: 0.2 mL) serum or plasma refrigerated
<b>Unacceptable Conditions</b>	Samples collected in gel tubes	Samples collected in gel tubes Citrated plasma
<b>Stability</b>	Ambient: 28 Days Refrigerated: 28 Days Frozen: 28 Days	Ambient: 1 Month Refrigerated: 1 Month Frozen: 2 Months
<b>Order Remarks</b>	Trough levels are most reproducible.	Trough levels are most reproducible. Please indicate the following on the order: 1. Dose – List drug amount and include units of measure 2. Route – List the route of administration (IV, oral, etc.) 3. Frequency – How often the dose is administered (daily, weekly, as needed, etc.) 4. Type of Draw – Indicate the type of blood draw (Peak, Trough, Random, etc.)
<b>Performed</b>	Tuesday	Tuesday, Saturday
<b>Reporting Time</b>	Final within 13 Days	Final within 8 Days

**Pseudocholinesterase (Test Order Code PCHEP)**

**Effective immediately**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements for Pseudocholinesterase (Test Order Code PCHEP). In addition, the result for Pseudochol Phenotype will be removed from the patient report. It was being reported as “Test component is no longer available” due to a test modification by CCL.

Specimen collection requirements are as follows:

Pseudocholinesterase (Test Order Code PCHEP)	Current Specimen Collection Requirements	New Specimen Collection Requirements
<b>Collect</b>	One gold gel 3.5 mL (also acceptable: lavender (EDTA) 3.0 mL and green (sodium heparin) 4.0 mL and green (lithium heparin) 3.0 mL)	One gold gel 3.5 mL (also acceptable: lavender (EDTA) 3.0 mL and green (sodium heparin) 4.0 mL and green (lithium heparin) 3.0 mL)
<b>Transport</b>	1.0 mL (min: 0.3 mL) serum or plasma refrigerated	1.0 mL (min: 0.3 mL) serum or plasma refrigerated
<b>Unacceptable Conditions</b>		Sodium citrated (light blue) or gray (oxalate/fluoride) tubes. Whole blood.
<b>Stability</b>	Ambient: 4 Hours Refrigerated: 1 Week Frozen: 3 Months	Ambient: 4 Hours Refrigerated: 1 Week Frozen: 3 Months
<b>Order Remarks</b>	Specimen must be drawn prior to surgery or at least >2 days post surgery. Specimens should be collected 48 hours after the administration of succinylcholine.	Specimen must be drawn prior to surgery or at least >2 days post surgery. Do <b>not</b> draw in recovery room. Specimens should be collected 48 hours after the administration of succinylcholine.
<b>Performed</b>	Weekdays	Weekdays
<b>Reporting Time</b>	Final within 7 Days	Final within 7 Days

### Histamine, Urine (Test Order Code UHISTA)

**Effective immediately**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements for Histamine, Urine (Test Order Code UHISTA).

Specimen collection requirements are as follows:

Histamine, Urine (Test Order Code UHISTA)	Current Specimen Collection Requirements	New Specimen Collection Requirements
<b>Collect</b>	24 hour urine. (Also acceptable, Random Urine) 24 hour sample must be refrigerated during collection. Aliquot and freeze ASAP.	24 hour urine. (Also acceptable, Random Urine) 24 hour sample must be refrigerated during collection. Aliquot and freeze ASAP.
<b>Transport</b>	5.0 mL (min: 1.0 mL) urine frozen <b>CRITICAL: Specimen must be frozen.</b> Separate samples must be submitted when multiple tests are ordered.	4.0 mL (min: 1.0 mL) urine frozen <b>CRITICAL: Specimen must be frozen.</b> Separate samples must be submitted when multiple tests are ordered.
<b>Unacceptable Conditions</b>	Ambient	Ambient Refrigerated
<b>Stability</b>	Ambient: Unacceptable Refrigerated: 1 Day Frozen: 6 Months	Frozen: 6 Months
<b>Order Remarks</b>	If a 24-hour urine is submitted, the excretion will be calculated. If a random urine is submitted, the result will be reported as 'Not applicable'.	If a 24-hour urine is submitted, the excretion will be calculated. If a random urine is submitted, the result will be reported as 'Not applicable'.
<b>Performed</b>	Tuesday, Saturday	Tuesday, Saturday
<b>Reporting Time</b>	Final within 8 Days	Final within 8 Days

**Inactivated Tests with Recommended Alternative Tests**

Inactivated Test Order Code	Inactivated Test Name	Recommended Alternate Test Order Code	Recommended Alternate Test Name/ Reference Laboratory & Test Number
NPM1	NPM1 Mutation by PCR and Fragment Analysis	REF782	Nucleophosmin (NPM1) Mutation Analysis / Mayo Medical Laboratories (NPM1)
FABCSF	Fungal Antibodies by CF, CSF	REF785	Fungal Antibodies with Reflex to <i>Blastomyces dermatitidis</i> Antibodies by Immunodiffusion, CSF / Cleveland Clinic Laboratories (FANCSF)
MSSSFR	Maternal, First Trimester Screen	REF787	Maternal Serum Screen First Trimester / ARUP Laboratories (3000145)
MSSS1R	Maternal Sequential Specimen 1	REF788	Maternal Screening, Sequential, Specimen #1 / ARUP Laboratories (3000146)
MSSS2R	Maternal Sequential Specimen 2	REF789	Maternal Screening, Sequential, Specimen #2 / ARUP Laboratories (3000148)
FNMOA4	NMO Aquaporin 4 IgG, CSF	REF792	Aquaporin-4 Receptor Antibody, IgG by IFA, CSF with Reflex to Titer / Cleveland Clinic Laboratories (AQPCSF)
IBDSGI	IBD sgi Diagnostic	IBDPNL	Inflammatory Bowel Disease Panel
CROHNS	Crohn's Prognostic	CRODIS	Crohn Disease Prognostic Panel
STRPTO	Streptozyme with Reflex to Titer	DASEAB ASO	DNase-B Antibody ASO Titer
FLT3MD	FLT3 Mutation Detection by PCR	FLT	FLT3 Mutation Analysis
SSDNA	ssDNA Antibody, IgG	DBSDNA	DNA, Double Stranded Antibody

**Inactivated Tests**

Inactivated Test Order Codes	Inactivated Test Name	Comments
CAFF	Caffeine	This order code will no longer be available. Please use a Miscellaneous test order.
INFLAB	Influenza A and B Virus Antibodies	Influenza serology requires acute and convalescent serum for appropriate interpretation and will not provide timely results that will help with clinical decision making. These tests are no longer recommended by the CDC for use in clinical diagnostics.
INFLAM	Influenza A Antibody, IgM	Influenza serology requires acute and convalescent serum for appropriate interpretation and will not provide timely results that will help with clinical decision making. These tests are no longer recommended by the CDC for use in clinical diagnostics.
INFLUA	Influenza A Virus Antibody IgG	Influenza serology requires acute and convalescent serum for appropriate interpretation and will not provide timely results that will help with clinical decision making. These tests are no longer recommended by the CDC for use in clinical diagnostics.
INFLBM	Influenza B Antibody, IgM	Influenza serology requires acute and convalescent serum for appropriate interpretation and will not provide timely results that will help with clinical decision making. These tests are no longer recommended by the CDC for use in clinical diagnostics.
INFLUB	Influenza B Virus Antibody IgG	Influenza serology requires acute and convalescent serum for appropriate interpretation and will not provide timely results that will help with clinical decision making. These tests are no longer recommended by the CDC for use in clinical diagnostics.
MAPRO	Maprotiline	This order code will no longer be available. Please use a Miscellaneous test order.
NMOA4	NMO Aquaporin 4 IgG, Serum	<p>Cleveland Clinic Laboratories (CCL), the performing laboratory, has discontinued this testing. The Aquaporin-4 Receptor Antibody, IgG by IFA with Reflex to Titer, Serum, performed by Cleveland Clinic Laboratories is a suitable replacement test. This test, however, is currently not available as an orderable test and will need to be ordered as a Miscellaneous Test until an orderable code is announced.</p> <p>Aquaporin-4 Receptor Antibody, IgG by IFA with Reflex to Titer, Serum is useful for initial evaluation of neuromyelitis optica (NMO) spectrum disorders. Diagnosis of NMO requires the presence of longitudinally extensive acute myelitis (lesions extending over three or more vertebral segments) and optic neuritis. Approximately 75% of patients with NMO express antibodies to the aquaporin-4 (AQP4) receptor. While the absence of AQP4 receptor antibodies does not rule out a diagnosis of NMO, presence of this antibody is diagnostic for NMO.</p>