

## iSTAT Creatinine, Addition of eGFR

**Effective Wednesday, May 24, 2017**, laboratory orders for creatinine that are performed on the iStat analyzer (either within the laboratory or as Point of Care) will include an estimated GFR (eGFR). The inclusion of eGFR will mimic the current reporting of creatinine results that are performed by laboratory chemistry analyzers. The calculated eGFR reporting will occur for single creatinine orders and also when creatinine is performed as part of an iStat panel.

The creatinine method on the iStat is traceable to isotope dilution mass spectrometry (IDMS) standards. Therefore, the same eGFR calculation recommended by the National Kidney Foundation Chronic Kidney Disease-Epidemiology (CKD-EPI) will be used for all eGFR reporting, whether performed by the chemistry analyzer or by the iStat. As with current reporting, the eGFR calculation is not reported for patients less than 18 years of age, and results for patients greater than 93 years old must be evaluated by the clinician for suitable interpretation.

Test order codes for iStat testing will change to accommodate the addition of eGFR. Reference ranges and appended comments will remain the same as the reference ranges currently in use for eGFR reporting by chemistry laboratory instrumentation.

In laboratory performed iStat creatinine testing:

| Current Test Order Code | New Test Order Code | New Test Order Code Components                                   |
|-------------------------|---------------------|--|
| ISCR                    | ISCRG               | Creatinine<br>eGFR African American<br>eGFR Non-African American |

Point of Care (POC) iStat creatinine testing:

| Current Test Order Code | New Test Order Code | New Test Order Code Components                                   |
|-------------------------|---------------------|--|
| 5CREA                   | 5CREAG              | Creatinine<br>eGFR African American<br>eGFR Non-African American |

For additional information, as well as specimen collection requirements, visit ACL Laboratories Directory of Services (<https://www.acllaboratories.com/test-catalog/>) or contact ACL Client Services at 1.800.877.7016.

## New Test Order Code for Glucose, Amniotic Fluid (GLAMFL)

**Effective Wednesday, May 24, 2017**, ACL Laboratories will implement a new test order code for Glucose, Amniotic Fluid (Test Order Code GLAMFL). The existing test order code for Glucose, Body Fluids, Test Order Code GLUFLD, is not specific and allows multiple fluid source choices, one of which is amniotic fluid. This new Test Order Code GLAMFL for amniotic fluid glucose will allow a specific reference range to be included in the laboratory results. See chart below.

| Current Test Order Code<br>(generic for multiple fluids) | New Test Order Code<br>(specific to amniotic fluid) | Reference Range |
|--|---|-----------------|
| GLUFLD   | GLAMFL  | ≥ 20 mg/dL      |

For additional information, as well as specimen collection requirements, visit ACL Laboratories Directory of Services (<https://www.acllaboratories.com/test-catalog/>) or contact ACL Client Services at 1.800.877.7016.

## ACL Laboratories Discontinues Prometheus Celiac Serology (CELSER) and Prometheus Celiac PLUS (CELPLS)

Effective Wednesday, May 24, 2017, the following tests will no longer be available to order:

- Prometheus Celiac Serology (Test Order Code CELSER)\*
- Prometheus Celiac PLUS (Test Order Code CELPLS)\*

These tests were previously performed by Prometheus Laboratories.

\*Please note that Celiac Genetics (Test Order Code CELGEN), performed at Prometheus labs will still be available as an orderable test for analyzing a patient’s genetic profile for diseases associated with celiac disease.

ACL Laboratories has implemented the following in-house screening panels for the work-up of celiac disease. Because of this, the former tests are now redundant.

| Test Order Code | Description  |
|-----------------|--|
| CELSCR          | Celiac Disease Screen Algorithm                              |
| CELSR2          | Celiac Disease Screen for patients less than 2 years of age. |

The screening algorithm consists of the following test components:

- Immunoglobulin A (QIGA)
- Tissue Transglutaminase Antibody, IgA (TTABAP)
- Tissue Transglutaminase Antibody, IgG (TTABGP)
- Deaminated Gliadin Peptide Antibody IgG (GLIGGP)

This test algorithm is based upon the recommendations of the American College of Gastroenterology and is aligned with current evidence-based and cost-effective best practices. More details about the test algorithms can be found in the December 2016 Test Bulletin.

In rare instances, Endomysial Ab, IgG (ENDIGG) may be indicated and is a separate orderable test.

For additional information regarding these tests, as well as specimen collection requirements, please contact ACL Client Services at 1.800.877.7016.

### H. pylori Serology Testing Update

The American Gastroenterological Association and the American College of Gastroenterology does not recommend antibody testing for H. pylori due to the following limitations:

- Poor positive predictive value
- Poor performance characteristics for sensitivity and specificity compared to alternative tests
- Inability to differentiate active from past infection
- Inability to assess successful eradication following treatment

The associations cited above have recommended the Fecal Antigen Test or the Urea Breath Test as the initial step in the evaluation of possible H. pylori infection. Current algorithms for the non-invasive assessment of patients for possible H. pylori infection no longer include serologic evaluation.

Other major laboratories no longer offer H. pylori serologic testing on their test menus and many insurance companies no longer cover patient’s costs for this testing.

**On April 12, 2017, the serological test for Helicobacter pylori Antibody IgM (HPYLM) was discontinued.**

ACL Laboratories will continue to offer the following recommended non-invasive tests for H. pylori:

- Helicobacter pylori Breath (Test Order Code HBRTH)
- Helicobacter pylori Stool Antigen (Test Order Code HPSA)

For additional information, as well as specimen collection requirements, visit ACL Laboratories Directory of Services (<https://www.acllaboratories.com/test-catalog/>) or contact ACL Client Services at 1.800.877.7016.

**New Referral Testing Order Codes**

| Test Description                              | Current Test Order Code    | New Test Order Code | Specimen Type | Preferred Volume | Tube Type              | Temperature to Transport | Note/Comments  |
|---|----------------------------|---------------------|---------------|------------------|------------------------|--------------------------|--|
| Nabferon AB                                   | REF139                     | NABFAB              | Serum         | 1.0 mL           | Gold Gel               | Refrigerated             | Nabferon AB (NABFAB) requires specimens to be collected before interferon beta treatment, or more than 48 hours following the most recent dose. Patient should not be on steroid therapy in excess of 10 mg Prednisolone (or equivalent) daily. High endogenous levels of interferon beta, alpha or gamma may interfere with this assay. |
| Buprenorphine and Metabolites, Quantitative   | SBUP                       | BPREN               | Serum         | 2.0 mL           | Plain Red              | Refrigerated             |  |
| Cytomegalovirus Antiviral Drug Resistance     | CMVAVR                     | CYTOSQ              | Plasma        | 1.0 mL           | Lavender (EDTA)        | Frozen                   |  |
| Ehrlichia Anaplasma, Molecular Detection, PCR | REF661                     | EHRL                | Whole Blood   | 1.0 mL           | Lavender (EDTA)        | Refrigerated             |  |
| Amino Acids, Quantitative, Plasma             | AAQTPL<br>REF704           | AMINPL              | Plasma        | 0.5 mL           | Green (Sodium Heparin) | Frozen                   | Amino Acids, Quantitative, Plasma (AMINPL) requires patient to be fasting 4 hours minimum, overnight fasting is preferred. Infants should be drawn just before next feeding (2-3 hours without TPN if possible).   |
| Amino Acids, Quantitative, Urine              | AAQTUR<br>REF541<br>REF705 | AMINO               | Urine         | 2.0 mL           | Random Urine           | Frozen                   |  |
| Acylcarnitines, Quatitative, Plasma           | ACYLPL                     | ACRNT               | Plasma        | 0.1 mL           | Green (Sodium Heparin) | Frozen                   |  |

| Test Description  | Current Test Order Code | New Test Order Code | Specimen Type  | Preferred Volume | Tube Type    | Temperature to Transport | Note/Comments  |
|---|-------------------------|---------------------|----------------|------------------|--------------|--------------------------|--|
| Organic Acids Screen, Urine                                 | UORA                    | ORGUR               | Urine          | 10 mL            | Random Urine | Frozen                   | Organic Acids Screen, Urine (ORGUR) requires that a random urine specimen be collected without preservative. If insufficient collection volume for pediatric samples, submit as much specimen as possible in a single container and the laboratory will determine if volume is sufficient for testing. |
| Periprosthetic Joint Infection (PJI) Detection (Synovasure) | No Code                 | SYNPJI              | Synovial Fluid | 1.0 mL           | Plain Red    | Refrigerated             |  |
| Ethylene Glycol (Illinois Sites only)                       | QETHYL                  | QETHL               | Serum          | 2.0 mL           | Plain Red    | Refrigerated             |  |

**Referral Testing Order Code Modification**

**Drug Screen Panel with Reflex (Test Order Code DRUGSP)**

**Effective Wednesday, May 24, 2017**, Drug Screen Panel with Reflex (DRUGSP) will be removing Propoxyphene S/P (result code PROPSP) and Buprenorphine S/P (result code BUPRSP) will now be available and no longer reported under “See Comment”. If BUPRSP is positive, Buprenorphine and Metabolites Quantitative (BPREN) test will be added with an additional charge.

**Referral Testing Order Code Inactivation**

**Effective Wednesday, May 24, 2017**, Malaria Antibody, IgG (Test Order Code MALAB) has been discontinued by Cleveland Clinic Laboratories. The blood smear technique (MALSM) is still considered the gold standard, and with advances, PCR technology can be utilized to confirm speciation. Serology testing does not achieve this goal. MALAB will be inactivated.

For additional information, as well as specimen collection requirements, visit ACL Laboratories Directory of Services (<https://www.acllaboratories.com/test-catalog/>) or contact ACL Client Services at 1.800.877.7016.

**Now... patients can check Wisconsin Patient Service Center (PSC) locations for current wait times!**

ACL Laboratories has added the convenience of knowing when a patient’s lab visit in Wisconsin will best fit into their personal schedule. By simply looking at the PSC site’s current wait time available online at <http://www.acllaboratories.com/locations/service-centers/>, patients can determine if the wait time is too long, and they can pursue going to a different site or waiting until later that day. No one likes to get a surprise of a long wait time at a lab—this added feature in Wisconsin will prevent that from happening! Tracking this information is currently underway at Wisconsin’s Aurora’s West Allis Medical Center PSC and Aurora’s St. Luke’s PSC and will expand to additional Wisconsin PSC locations in the near future. Please watch for future communications for additional ACL access points where this functionality will be implemented.

Several Illinois PSC locations have had this feature in place for a while. Please visit <http://www.acllaboratories.com/locations/service-centers/> for current Illinois PSC wait times.

ACL’s vision is for patients to be 100% satisfied!

- Safe, convenient sign-in
- HIPAA compliant
- Online wait times posted real time