

# Test Bulletin

September 2018

# ALA Dehydratase, Whole Blood (Test Order Code ALADWB)

**Effectively immediately**, Cleveland Clinic Laboratories (CCL), the performing laboratory, has updated the specimen requirements and test performance for ALA Dehydratase, Whole Blood (Test Order Code ALADWB).

Specimen collection requirements are as follows:

ALA Dehydratase, Whole Blood (Test Order Code ALADWB)	Current Specimen Collection Requirements	New Specimen Collection Requirements –  Effective Immediately
Patient Preparation	Abstinence from alcohol is essential for at least 24 hours prior to specimen collection as ethanol suppresses ALAD activity.	Abstinence from alcohol is essential for at least 24 hours prior to specimen collection as ethanol suppresses ALAD activity.  Do not collect specimens the day before a holiday. Samples should be collected Monday through Thursday.
Collect	One green (sodium heparin no gel) 4.0 mL (also acceptable: lavender (EDTA) 3.0 mL and green (lithium heparin no gel) 6.0 mL) Collect a full tube. Collect on ice.	Two green (sodium heparin no gel) 4.0 mL (also acceptable: two lavender (EDTA) 3.0 mL and two green (lithium heparin no gel) 6.0 mL) Collect full tubes.  Collect on ice.
Transport	4.0 mL (min: 3.0 mL) whole blood refrigerated	5.0 mL (min: 3.0 mL) whole blood refrigerated
Order Remarks	This test will not detect lead intoxication.	This test will not detect lead intoxication. If available, include a list of medications the patient is currently taking.
Performed	Weekdays	Monday, Wednesday, Friday
Reporting Time	Final within 5 Days	Final within 6 Days

### Activated Partial Thromboplastin Time (Test Order Code APTT) Reference Range Changes

As a part of the annual Coagulation reagent rollover procedure, ACL Laboratories evaluates the sensitivity of the new reagent lot and determines if the reference ranges for PT and APTT need to be adjusted.

**Effective Monday, October 29, 2018** at approximately midnight (Sunday evening into early Monday morning), ACL will change the upper limit of APTT reference range results for adults from 30 to 32 seconds. Pediatric ranges will also be adjusted per the chart below. PT/INR ranges remain the same. Critical ranges also remain the same.

#### Test Order Code APTT

Description	Current Reference Ranges	Reference Ranges Effective Monday, October 29, 2018		
Adult Reference Range:	22-30 sec.	22-32 sec.		
Heparin Therapy therapeutic range:	47-67 sec.	45-70 sec.		
Pediatric Ranges:				
O-2 days:	26-41 sec.	26-43 sec.		
2-6 days:	21-45 sec.	21-47 sec.		
6-28 days:	21-41 sec.	21-44 sec.		
28 days – 4 months:	20-37 sec.	20-40 sec.		
4 mo. – 1 yr.:	23-32 sec.	23-34 sec.		
1 yr. – adult:	22-30 sec.	22-32 sec.		

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/.

## Cyanide, Blood (Test Order Code CYANID)

**Effective Tuesday, September 4, 2018**, Cleveland Clinic Laboratories (CCL), the performing laboratory, will update the specimen requirements and test performance for Cyanide, Blood (Test Order Code CYANID).

Specimen collection requirements are as follows:

Cyanide, Blood (Test Order Code CYANID)	Current Specimen Collection Requirements	New Specimen Collection Requirements –  Effective Tuesday, September 4, 2018
Collect	One gray (sodium fluoride/ potassium oxalate) 2.0 mL (also acceptable: lavender (EDTA) 3.0 mL and green (sodium or lithium heparin (no gel)) 4.0 mL)	One lithium heparin (no gel) 6.0 mL (also acceptable: lavender (EDTA) 3.0 mL and green sodium heparin (no gel) 4.0 mL)
Transport	1.0 mL (min: 0.5 mL) whole blood refrigerated	4.0 mL (min: 3.0 mL) whole blood ambient CRITICAL: Specimen must be ambient.
Unacceptable Conditions	None	Frozen or refrigerated specimens. Clotted samples. Hemolyzed samples. Serum or plasma specimens.
Stability	Ambient: 72 Hours Refrigerated: 14 Days Frozen: 180 Days	Ambient: 72 Hours (if tightly capped) Refrigerated: Unacceptable Frozen: Unacceptable
Order Remarks	No laboratory test is available to assess cyanide toxicity in a patient who is on nitroprusside therapy. This test should <b>not</b> be ordered when the patient is on nitroprusside.	Used to monitor cyanide exposure. Cyanide poisoning can cause hypoxia, dizziness, weakness and mental and motor impairment. Elevated cyanide concentrations rarely indicate toxicity for patients on nitroprusside therapy. Thiocyanate should be monitored in patients on nitroprusside therapy for potential toxicity. Toxicity may occur with long term nitroprusside use (longer than 7-14 days with normal renal function and 3-6 days with renal impairment at greater than 2 µg/kg/min infusion rates). Thiocyanate levels may be monitored on an every other day basis to assess potential thiocyanate toxicity and to indicate possible adjustment in dosage.
Performed	Daily	Sunday, Wednesday, Friday
Reporting Time	Final within 11 Days	Final within 7 Days