

January 2026

## New Orderable Code: B-Cell CD20 Expression by Flow Cytometry, Quantitative

**Effective Wednesday, January 21, 2026**, B-Cell CD20 Expression by Flow Cytometry, Quantitative (Test Order Code LAB13073) will be available as an orderable test with testing being performed at ARUP Laboratory. The test information is below.

| Test Information            | B-Cell CD20 Expression by Flow Cytometry, Quantitative |
|-----------------------------|--|
| <b>Test Order Code</b>      | LAB13073   |
| <b>Specimen Requirement</b> | Whole Blood  |
| <b>Collection Tube</b>      | Green (sodium heparin, no gel)                         |
| <b>Temperature</b>          | Ambient  |
| <b>Stability</b>            | 72 hours   |
| <b>Methodology</b>          | Flow Cytometry   |
| <b>TAT</b>                  | Final within 4 days                                    |
| <b>Performing Lab</b>       | ARUP   |

## ACL Announces Updates to ANA Screen

**Effective Wednesday, January 21, 2026**, Ribosomal P Protein (Ribo-P) testing will be removed from the following ANA Screen orders:

- ANA Screen with Antibody and IFA Reflex
  - » If the ANA Screen is positive, Ribo-P will be included in the reflex antibody panel.
- ANA Screen with Reflex IFA

A two-week review of approximately 1,500 Ribo-P tests showed the lowest positivity rate (0.26%) compared to other ANA antibodies. In cases where Ribo-P was positive, the ANA screen (which currently includes SSA, SSB, Sm, RNP, Scl-70, Jo-1, and Centromere) and/or double-stranded DNA antibodies were also positive.

Ribosomal P Protein (Ribo-P) Antibodies are typically not included in most ANA antibody screening methods. The protein is generally used as a targeted follow-up, second level test. While Ribo-P antibodies are highly specific for Systemic Lupus Erythematosus (SLE), they are not highly sensitive. They are found in only 10% – 20% of patients with SLE. A negative Ribo-P result alone cannot rule out SLE. It is generally ordered as a specific test only when clinically indicated. This includes a high suspicion of SLE with negative standard markers or when a patient has specific symptoms like neuropsychiatric lupus.

## ACL Announces Methodology Change for Apixaban Testing

**Effective Wednesday, January 21, 2026**, ACL Laboratories will transition Apixaban testing from the Siemens CS5100 platform to the Werfen ACL TOP 750 platform.

- Collection, shipping/handling instructions, and turnaround times will remain unchanged.
- The new assay is FDA-approved and will no longer include the Laboratory Developed Test disclaimer.
- There will be updates to the reportable range with the new methodology as follows.

| Reportable Range<br>Current | New Reportable Range<br>Effective 1.21.2026 |
|-----------------------------|---|
| 0-500 ng/mL                 | 20-550 ng/mL                                |

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 <https://www.aclaboratories.com/providers/test-directory/>.

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## Update for *Helicobacter Pylori* Culture

**Effective Wednesday, January 21, 2026**, updates will be made to the *Helicobacter Pylori* Culture test.

*Helicobacter Pylori* Culture testing will transition from being performed at Mayo Laboratory to testing being performed at ARUP Laboratory. ARUP will perform susceptibilities on any positive culture.

**ARUP specimen collection requires a duodenal or gastric biopsy to be preserved in Brucella broth with 20% glycerol immediately following collection. Also acceptable: Brucella broth, BHI, or equivalent with or without 10-20 percent glycerol.**

### Supply ordering information:

- Advocate/Aurora/ACL locations will place order through workday
  - » Workday order number 3066421 - MEDIA CULTURE REMEL L103 MM BRUCELLA BROTH TUBE OD15 MM 5 ML: FISHER SCIENTIFIC COMPANY LLC
- ACL Outreach clients should write Brucella Broth on the ACL supply request order form.

| Helicobacter Pylori Culture |  |  |
|-----------------------------|--|--|
|                             | Current<br>(Deactivated 1.21.2026)   | Replacement<br>(Activated 1.21.2026)   |
| Test Name                   | Helicobacter Pylori Culture with Antimicrobial Susceptibilities  | Helicobacter Pylori Culture  |
| Test Order Code             | LAB18672   | LAB13111   |
| Performing Lab              | Mayo   | ARUP   |
| Specimen Type               | Tissue: Duodenal or gastric biopsy<br>Gastric Fluid  | Tissue: Duodenal or gastric biopsy   |
| Collection container        | Tissue or biopsy placed in sterile container with sterile saline<br>Gastric fluid in sterile container   | Tissue or biopsy placed in Brucella Broth  |
| Temperature                 | Refrigerated   | Refrigerated   |
| Stability                   | 48hours  | 48hours  |
| Methodology                 | Conventional Culture Technique with Minimal Inhibitory Concentration (MIC) (Agar Dilution or Broth Microdilution or Gradient Diffusion) or Disk Diffusion if appropriate | Qualitative Culture / Matrix-Assisted Laser Desorption Ionization-Time of Flight (MALDI-TOF) Mass Spectrometry |
| TAT                         | Final within 30 days   | Final within 11 days   |

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 <https://www.acllaboratories.com/providers/test-directory/>.

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## Alzheimer Evaluation Spinal Fluid

**Effective Wednesday, January 21, 2026**, updates will be made to the Alzheimer Evaluation Spinal Fluid test offering.

Required collection container/tube: Sarstedt CSF False Bottom Tube



Collection Instructions:

1. Perform lumbar puncture and discard the first 1.0 to 2.0 mL of cerebrospinal fluid (CSF).
2. Collect CSF directly into the Sarstedt CSF False Bottom tube least 50% full.
3. Send CSF specimen in original collection tube. Do not aliquot.

Note: Polystyrene collection tubes are not acceptable. Exposure of CSF to polystyrene tubes may result in falsely low Abeta42 concentrations.

Supply ordering information:

- The ACL Warehouse will carry the Sarstedt CSF False Bottom Tube.
- ACL hospital locations should stock a supply of tubes for distribution to the Advocate/Aurora Hospital Interventional Radiology departments.
  - » ACL Lab locations will need to place order with ACL Warehouse using the ACL Special Request Supply form posted on share point.
- ACL Outreach clients should write CSF Sarstedt tube on the ACL supply request order form.

| Alzheimer Disease Evaluation, Spinal Fluid |  |   |
|--|--|---|
|  | Current<br>(Deactivated 1.21.2026)   | Replacement<br>(Activated 1.21.2026)        |
| <b>Test Name</b>                           | ADmark Phospho Tau, CSF  | Alzheimer Disease Evaluation, Spinal Fluid  |
| <b>Test Order Code</b>                     | LAB9089  | LAB13188                                    |
| <b>Performing Lab</b>                      | Athena/Quest   | Mayo  |
| <b>Specimen Type</b>                       | Spinal Fluid   | Spinal Fluid                                |
| <b>Collection container</b>                | Previously collected in sterile polypro-pylene tube<br>September 2025 Athe-na/Quest updated to CSF Sarstedt tube | CSF Sarstedt tube                           |
| <b>Temperature</b>                         | Refrigerated   | Refrigerated                                |
| <b>Stability</b>                           | 3 weeks  | 14 days                                     |
| <b>Methodology</b>                         | Enzyme-linked Immunosorbent Assay  | Electrochemiluminescent Immunoassay (ECLIA) |
| <b>TAT</b>                                 | Final within 18 days   | Final within 6 days                         |

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 <https://www.acllaboratories.com/providers/test-directory/>.

**Effective Wednesday, January 21, 2026**, the following send out assays will be updated:

| Rubeola Antibody IgM        |   |
|-----------------------------|---|
| Test Information            | Rubeola Antibody IgM                                  |
| <b>Test Order Code</b>      | LAB8552   |
| <b>Specimen Requirement</b> | 0.5 mL (minimum 0.3 mL) Serum                         |
| <b>Collection Tube</b>      | Gold Gel  |
| <b>Temperature</b>          | Refrigerated  |
| <b>Stability</b>            | 2 weeks   |
| <b>Methodology</b>          | Semi-Quantitative Indirect Fluorescent Antibody (IFA) |
| <b>TAT</b>                  | Final within 7 days                                   |
| <b>Performing Lab</b>       | ARUP  |

| Immuknow Immune Cell Function |                                    |                                      |
|-------------------------------|------------------------------------|--------------------------------------|
| Test Information              | Current<br>(Deactivated 1.21.2026) | Replacement<br>(Activated 1.21.2026) |
| <b>Test Name</b>              | Immune Function Assay, ATP         | Immuknow Immune Cell Function        |
| <b>Test Order Code</b>        | LAB9614                            | LAB13184                             |
| <b>Performing Lab</b>         | Quest                              | Viracor                              |
| <b>Specimen Type</b>          | Whole Blood                        | 3.0 mL Whole Blood                   |
| <b>Collection container</b>   | Green (sodium heparin no gel)      | Green (sodium heparin no gel)        |
| <b>Temperature</b>            | Ambient                            | Ambient                              |
| <b>Stability</b>              | 30 hours                           | <b>30 hours</b>                      |
| <b>Methodology</b>            | Chemiluminescence                  | Luminometer                          |
| <b>TAT</b>                    | Final within 6 days                | Final within 4 days                  |

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 <https://www.aclaboratories.com/providers/test-directory/>.

## ACL Expands AdvoSeq™ Non-Invasive Prenatal Aneuploidy Screen (NIPS) (Test Order Code LAB12248) to Include Opt-In for 22q Microdeletion

**Effective Wednesday, January 21, 2026**, ACL Laboratories will offer 22q Microdeletion (DiGeorge Syndrome) opt-in testing to the in-house AdvoSeq™ Non-Invasive Prenatal Aneuploidy Screen (NIPS) (Test Order Code: LAB12248).

### Clinical indication:

The AdvoSeq™ NIPS test screens for common chromosomal aneuploidies (trisomy 21, 18, and 13) and sex chromosome abnormalities with >99% sensitivity and specificity. It now also offers an additional option to detect the common 3 Mb 22q11.2 microdeletion, which is associated with 22q11.2 deletion syndrome (DiGeorge syndrome/velocardiofacial syndrome).

### Test Method

- Next Generation Sequencing

### Specimen Requirements

- One cell-free DNA BCT (Streck) tube, 10.0 mL (minimum 7.0 mL), whole blood, refrigerated.
- Important note: Opting in for 22q Microdeletion testing with AdvoSeq™ does **not** require an additional blood draw.

### Stability & Transport

- Ambient: 5 days, Refrigerated: 5 days, Frozen: Unacceptable

### Unacceptable Conditions

- Gestational age <10 weeks
- More than two fetuses
- Expired tubes or tubes other than cell-free DNA BCT (Streck)
- Hemolyzed specimens (dependent on level of hemolysis)
- 22q testing on twin pregnancies

### Testing Schedule & Reporting

- Performed: Weekdays
- Performing Site: Illinois Central Laboratory – Molecular Pathology
- Reporting Time: Final results within 7 days

### CPT Code(s)

- AdvoSeq™ NIPS (Aneuploidy only): 81420, G0452
- AdvoSeq™ NIPS (Aneuploidy and 22q Microdeletion): 81420, 81422, G0452
- Preauthorization will be completed based on selections at the time of order entry

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 <https://www.aclaboratories.com/providers/test-directory/>.

## New Platform for Quantiferon Testing

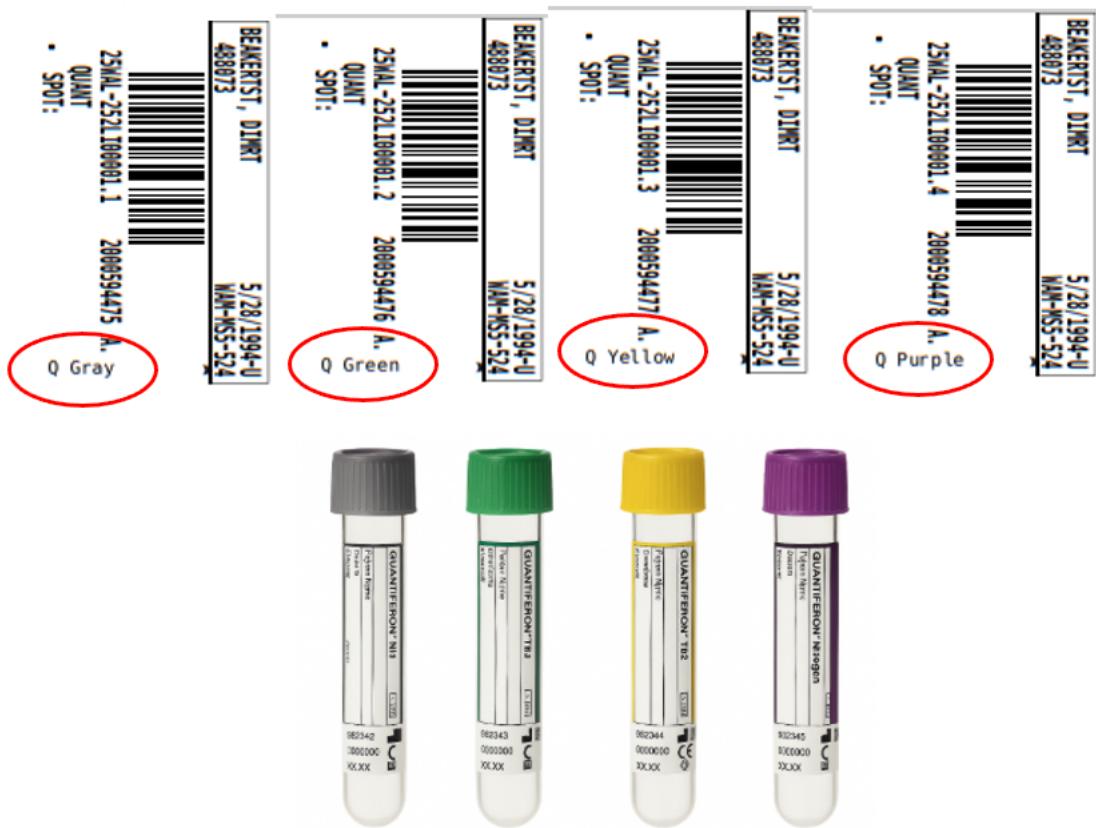
**Effective Wednesday, January 21, 2026**, Quantiferon TB (Test Order Code LAB9049) is changing from an ELISA based test performed on the DSX to a CLIA based test being performed on the Liaison XL. Sending sites should be aware of collection and processing changes associated with this change.

### Collection:

- The collection of the four tubes included in each kit remains unchanged.
- Sites are reminded to appropriately fill the tubes. Be cognizant to not overfill or underfill tubes, but rather, filling to the marked fill line.

### Labeling:

- Instead of having one specimen ID for all four tubes, each tube will now have its own specimen ID. 4 labels will print from the collection activity.
- Collectors need to be aware that the correct label is going with the right tube. Each label should have an additional identifier to signify what tube it goes on. For example, the gray tube label should say "GRAY" below the specimen ID barcode.



### Sending to Core Labs:

- Place all 4 IDs on a packing list.
- Bag Together and send with appropriate special stickers

### Wisconsin Only: Sites who incubate tubes prior to transport:

- No changes to the current process. Send as usual.

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 <https://www.aclaboratories.com/providers/test-directory/>.