

Temporary Referral of Ceruloplasmin Testing to Mayo Clinic Laboratories

Effective Tuesday, April 21, 2026, Ceruloplasmin testing shifted from ACL Laboratories to Mayo Clinic Laboratories. Reagent for ACL's in-house method is currently out of stock, and an expected resupply date is not available. As a result, Ceruloplasmin (Test Order Code LAB8512) will be temporarily referred to Mayo Clinic Laboratories for testing.

This change will result in an increased turnaround time and a change in reference ranges. Specimen requirements remain unchanged; however, reference ranges differ. Please see the chart below for a comparison of ACL versus Mayo testing.

Test Comparison		
	ACL Laboratories	Mayo Clinic Laboratories
Methodology	Nephelometry	Nephelometry
Reference Range	<p><1 month: 19.0-56.0</p> <p>1 month to 5 months: 19.0-60.0</p> <p>6 months to 18 years: 19.0-67.0</p> <p>19 years and up: 20.0-60.0</p>	<p>Males:</p> <p>0-8 weeks: 7.4-23.7 mg/dL</p> <p>9 weeks-5 months: 13.5-32.9 mg/dL</p> <p>6-11 months: 13.7-38.9 mg/dL</p> <p>12 months-7 years: 21.7-43.3 mg/dL</p> <p>8-13 years: 20.5-40.2 mg/dL</p> <p>14-17 years: 17.0-34.8 mg/dL</p> <p>> or =18 years: 19.0-31.0 mg/dL</p> <p>Females:</p> <p>0-8 weeks: 7.4-23.7 mg/dL</p> <p>9 weeks-5 months: 13.5-32.9 mg/dL</p> <p>6-11 months: 13.7-38.9 mg/dL</p> <p>12 months-7 years: 21.7-43.3 mg/dL</p> <p>8-13 years: 20.5-40.2 mg/dL</p> <p>14-17 years: 20.8-43.2 mg/dL</p> <p>> or =18 years: 20.0-51.0 mg/dL</p>
Specimen Collection Details (specimen type, amount)	One gold gel (SST) 5.0 mL OR One red (plain)	One gold gel (SST) 5.0 mL OR One red (plain)
Transport Temperature	1.0 mL serum refrigerated	1.0 mL serum refrigerated
CPT Codes	82390	82390
Turnaround Time	24 hours	9 days

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

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Pain Management Profile Changes

Effective immediately, the Pain Management Profile (Test Order Code LAB12254) was discontinued and has been replaced with three new test order codes. This revision is intended to align laboratory testing practices with current reimbursement policies, ensuring compliance while also aiming to reduce the financial burden on patients.

Antidepressant Adherence Panel (Test Order Code LAB13433)

Test Method

- Quantitative LC/MS

Specimen Requirements

- Random urine in a sterile container
- If able, transfer 1.0 mL (minimum 0.5 mL) urine into an aliquot tube. Do not transfer urine aliquot using soft plastic transfer devices. Hard plastic tips (e.g., Eppendorf pipette tips) are acceptable. Sites that do not have MLA pipettes can pour off the urine or use aliquot straws.
- If unable to aliquot, ensure aliquot label is sent along with the urine cup (unattached).

Stability & Transport

- Ambient: 24 hours; Refrigerated: 2 weeks; Frozen: 2 weeks
- Urine collection cup with 30.0 mL (minimum 15.0 mL) urine, refrigerated AND, if available, Aliquot with 1.0 mL (minimum 0.5 mL) urine, refrigerated

Unacceptable Conditions

- Specimens received in Boric Acid preservative
- Urine collection cups that have been pH adjusted

Testing Schedule & Reporting

- Performed: Weekdays
- Performing Site: Wisconsin Central Laboratory
- Reporting Time: Final within 7 days

CPT Code

- G0480 – Definitive Drug Testing (1-7 Classes)

Interpretive Information

- For medical purposes only, not acceptable for forensic use.
- This test was developed and its analytical performance characteristics have been determined by ACL Laboratories. It has not been cleared or approved by FDA.
- Specimen Validity Test Panel will be performed on all specimens (creatinine, pH, oxidant screen).

Analytes (Positive Cut-off in ng/mL)

Citalopram (40.0)	Paroxetine (40.0)	Desmethyldoxepin (40.0)	Bupropion (40.0)
Duloxetine (40.0)	Sertraline (40.0)	Mirtazapine (20.0)	Venlafaxine (40.0)
Fluoxetine (40.0)	Amitriptyline (40.0)	Nortriptyline (40.0)	

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

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Pain/Controlled Substance Management Profile (Test Order Code LAB13434):

Test Method

- Screen: Immunoassay
- Definitive: Quantitative LC/MS

Specimen Requirements

- Random urine in a sterile container
- If able, transfer 1.0 mL (minimum 0.5 mL) urine into an aliquot tube. Do not transfer urine aliquot using soft plastic transfer devices. Hard plastic tips (e.g., Eppendorf pipette tips) are acceptable. Sites that do not have MLA pipettes can pour off the urine or use aliquot straws.
- If unable to aliquot, ensure aliquot label is sent along with the urine cup (unattached).

Stability & Transport

- Ambient: 24 hours; Refrigerated: 2 weeks; Frozen: 2 weeks
- Urine collection cup with 30.0 mL (minimum 15.0 mL) urine, refrigerated AND, if available, Aliquot with 1.0 mL (minimum 0.5 mL) urine, refrigerated

Unacceptable Conditions

- Specimens received in Boric Acid preservative
- Urine collection cups that have been pH adjusted

Testing Schedule & Reporting

- Performed: Weekdays
- Performing Site: Wisconsin Central Laboratory
- Reporting Time: Final within 7 days

CPT Code

- 80307 – Drug Screen
- G0482 – Definitive Drug Testing (15-21 Classes)

Interpretive Information

- For medical purposes only, not acceptable for forensic use.
- This test was developed and its analytical performance characteristics have been determined by ACL Laboratories. It has not been cleared or approved by FDA.
- Specimen Validity Test Panel will be performed on all specimens (creatinine, pH, oxidant screen).

Analytes (Positive Cut-off in ng/mL)

Amphetamine (50.0)	Oxazepam (40.0)	O-Desmethyl-Cis-Tramadol (50.0)	Norfentanyl (10.0)
Methamphetamine (50.0)	Temazepam (40.0)	Tramadol (50.0)	Carisoprodol-SOMA (50.0)
Phentermine (50.0)	Codeine (50.0)	6MAM (5.0)	Cyclobenzaprine (40.0)
MDA (50.0)	Hydrocodone (50.0)	Buprenorphine (10.0)	Meprobamate (50.0)
MDMA (50.0)	Hydromorphone (50.0)	Norbuprenorphine (10.0)	Gabapentin (1,000.0)
Methylphenidate (20.0)	Morphine (50.0)	EDDP (MTHD Metabolite) (50.0)	Pregabalin (1,000.0)
Benzoyllecgonine (100.0 ng/dL)	Norhydrocodone (50.0)	Methadone (50.0)	THC-11-Nor-Delta-9-Carboxy (25.0)
7-Aminoclonazepam (40.0)	Meperidine (40.0)	Noroxycodone (50)	Phencyclidine-PCP (10.0)
Alpha-Hydroxy Alprazolam (40.0)	Naloxone (20.0)	Oxycodone (50.0)	Tapentadol (40.0)
Alprazolam (40.0)	Naltrexone (10.0)	Oxymorphone (50.0)	Zolpidem (10.0)
Lorazepam (40.0)	Normeperidine (40.0)	Fentanyl (5.0)	Ketamine (10.0)
Nordiazepam (40.0)			

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

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Antidepressant + Pain/Controlled Substance Management Profile (Test Order Code LAB13435)

Test Method

- Screen: Immunoassay
- Definitive: Quantitative LC/MS

Specimen Requirements

- Random urine in a sterile container
- If able, transfer 1.0 mL (minimum 0.5 mL) urine into an aliquot tube. Do not transfer urine aliquot using soft plastic transfer devices. Hard plastic tips (e.g., Eppendorf pipette tips) are acceptable. Sites that do not have MLA pipettes can pour off the urine or use aliquot straws.
- If unable to aliquot, ensure aliquot label is sent along with the urine cup (unattached).

Stability & Transport

- Ambient: 24 hours; Refrigerated: 2 weeks; Frozen: 2 weeks
- Urine collection cup with 30.0 mL (minimum 15.0 mL) urine, refrigerated AND, if available, Aliquot with 1.0 mL (minimum 0.5 mL) urine, refrigerated

Unacceptable Conditions

- Specimens received in Boric Acid preservative
- Urine collection cups that have been pH adjusted

Testing Schedule & Reporting

- Performed: Weekdays
- Performing Site: Wisconsin Central Laboratory
- Reporting Time: Final within 7 days

CPT Code

- 80307 – Drug Screen
- G0482 – Definitive Drug Testing (15-21 Classes)

Interpretive Information

- For medical purposes only, not acceptable for forensic use.
- This test was developed and its analytical performance characteristics have been determined by ACL Laboratories. It has not been cleared or approved by FDA.
- Specimen Validity Test Panel will be performed on all specimens (creatinine, pH, oxidant screen).

Analytes (Positive Cut-off in ng/mL)

Amphetamine (50.0)	Codeine (50.0)	Norbuprenorphine (10.0)	THC-11-Nor-Delta-9-Carboxy (25.0)
Methamphetamine (50.0)	Hydrocodone (50.0)	EDDP (MTHD Metabolite) (50.0)	Phencyclidine-PCP (10.0)
Phentermine (50.0)	Hydromorphone (50.0)	Methadone (50.0)	Citalopram (40.0)
MDA (50.0)	Morphine (50.0)	Noroxycodone (50.0)	Duloxetine (40.0)
MDMA (50.0)	Norhydrocodone (50.0)	Oxycodone (50.0)	Fluoxetine (40.0)
Methylphenidate (20.0)	Meperidine (40.0)	Oxymorphone (50.0)	Paroxetine (40.0)
Benzoylcegonine (100.0 ng/dL)	Naloxone (20.0)	Fentanyl (5.0)	Sertraline (40.0)
7-Aminoclonazepam (40.0)	Naltrexone (10.0)	Norfentanyl (10.0)	Amitriptyline (40.0)
Alpha-Hydroxy Alprazolam (40.0)	Normeperidine (40.0)	Carisoprodol-SOMA (50.0)	Desmethyldoxepin (40.0)
Alprazolam (40.0)	O-Desmethyl-Cis-Tramadol (50.0)	Cyclobenzaprine (40.0)	Mirtazapine (20.0)
Lorazepam (40.0)	Tramadol (50.0)	Meprobamate(50.0)	Nortriptyline (40.0)
Nordiazepam (40.0)	6MAM (5.0)	Gabapentin (1,000.0)	Bupropion (40.0)
Oxazepam (40.0)	Buprenorphine (10.0)	Pregabalin (1,000.0)	Venlafaxine (40.0)
Temazepam (40.0)			

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

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New Orderable Code: Chronic Inflammatory Demyelinating Polyradiculoneuropathy/Nodopathy Evaluation, Serum

Effective immediately, Chronic Inflammatory Demyelinating Polyradiculoneuropathy/Nodopathy Evaluation, Serum is available as an orderable test code with testing performed at Mayo Clinic Laboratories.

The test information is below.

Test Information	Chronic Inflammatory Demyelinating Polyradiculoneuropathy/Nodopathy Evaluation, Serum
Test Order Code	LAB13474
Specimen Requirements	3.0 mL (minimum 2.0 mL) serum
Collection Tube	Gold gel
Temperature	Refrigerated
Stability	28 days
Methodology	Cell binding assay (CBA) and flow cytometry
TAT	Within 12 days
Performing Laboratory	Mayo Clinic Laboratories

Test Inactivation: Paraneoplastic, Autoantibody Evaluation, Serum (Test Order Code LAB12791) and Paraneoplastic, Autoantibody Evaluation, CSF (Test Order Code LAB12360)

Effective immediately, orderable test codes for Paraneoplastic, Autoantibody Evaluation, Serum (Test Order Code LAB12791) and Paraneoplastic, Autoantibody Evaluation, CSF (Test Order Code LAB12360) are obsolete. It is recommended that providers utilize phenotype-specific autoimmune/paraneoplastic evaluations (e.g. encephalopathy, movement disorders, myelopathy, axonal neuropathy).

ACL has the following replacement orderable test codes available:

Obsolete Test	Replacement Patients >18 years of age	Replacement Patients <18 years of age
Paraneoplastic, Autoantibody Evaluation, Serum (Test Order Code LAB12791)	Encephalopathy, Autoimmune/Paraneoplastic Evaluation, Serum (Test Order Code LAB12700)	Pediatric Autoimmune Encephalopathy/CNS Disorder Evaluation, Serum (Test Order Code LAB12563)
Paraneoplastic, Autoantibody Evaluation, CSF (Test Order Code LAB12360)	Encephalopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid (Test Order Code LAB12714)	Pediatric Autoimmune Encephalopathy/CNS Disorder Evaluation, Spinal Fluid (Test Order Code LAB12564)

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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Updates to von Willebrand Multimer Panel

Effective immediately, von Willebrand Multimer Panel (Test Order Code LAB9891) has been inactivated and replaced with von Willebrand Factor Multimeric Panel (Test Order Code LAB13213). See below for detailed information.

	Inactivated von Willebrand Multimer Panel	Replacement von Willebrand Factor Multimeric Panel
Test Order Code	LAB9891	LAB13213
Specimen Requirements	3.0 mL (minimum 1.5 mL) platelet poor plasma	3.0 mL (minimum 1.5 mL) platelet poor plasma
Collection Tube	Light blue	Light blue
Temperature	Frozen	Frozen
Stability	3 months	3 months
Methodology	Immunoassay (Immunoturbidimetry)	Clotting / Microlatex Particle-Mediated Immunoassay / Quantitative Immunoturbidimetry
TAT	Within 13 days	Within 5 days
Performing Laboratory	ARUP	ARUP

Updates to Trypanosoma cruzi Antibody, IgG

Effective immediately, Trypanosoma cruzi Antibody, IgG (Test Order Code LAB10442) has been inactivated and replaced with Trypanosoma cruzi Antibody, IgG Panel (Test Order Code LAB13460). See below for detailed information.

	Inactivated Trypanosoma cruzi Antibody, IgG	Replacement Trypanosoma cruzi Antibody, IgG Panel
Test Order Code	LAB10442	LAB13460
Specimen Requirements	0.5 mL (minimum: 0.15 mL) serum	0.5 mL (minimum: 0.5 mL) serum
Collection Tube	Gold gel	Plain red
Temperature	Refrigerated	Refrigerated
Stability	14 days	14 days
Methodology	Semi-Quantitative Enzyme-Linked Immunosorbent Assay (ELISA)	Semi-Quantitative Enzyme-Linked Immunosorbent Assay (ELISA)
TAT	Within 10 days	Within 8 days
Performing Laboratory	ARUP	ARUP

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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ACL Migrates from Siemens Centaur XP to Beckman Coulter DXI 600

Effective Wednesday, May 20, 2026, Anti-Thyroperoxidase (aTPO) will migrate from the Siemens Centaur XP to the Beckman Coulter DXI 600 platform. This migration will standardize and improve workflows across ACL. The DXI aTPO method is utilized by ACL’s southern affiliate Atrium Health - Wake Forest as well as reference laboratories such as Mayo Clinic Laboratories. This change also recombines Anti-Thyroperoxidase with Anti-Thyroglobulin testing, which are often ordered in a panel, improving workflows and reducing additional handling. Anti-Thyroglobulin testing was previously transitioned to the DXI platform due to method concerns. In conclusion, the limit of detection is lower and there is less variability on the new method as the lower limit of detection is approached, resulting in greater accuracy and precision at those lower detection levels.

Anti-Thyroperoxidase (aTPO)		
	Current	New (effective 5/20/2026)
Test	Microsomal Antibody (Test Order Code LAB8541) Thyroid Antibodies (Test Order Code LAB8556)	Microsomal Antibody (Test Order Code LAB8541) Thyroid Antibodies (Test Order Code LAB8556)
Specimen Type	Serum aliquot	Serum aliquot
Collection Container	One gold gel (SST) 5.0 mL OR One red (plain)	One gold gel (SST) 5.0 mL OR One red (plain)
Temperature	Frozen	Frozen
Stability	Ambient: 8 hours Refrigerated: 2 days Frozen: 14 days	Ambient: 8 hours Refrigerated: 2 days Frozen: 14 days
Methodology	Chemiluminescence	Chemiluminescence
TAT	Final within 24 hours	Final within 3 days
Reference Range	<60.0 Units/mL	<=9.0 IU/mL

ACL Laboratories Discontinues Gastrointestinal Parasite Panel by PCR (Test Order Code LAB9927), Replacing it with *Giardia* & *Cryptosporidium* EIA (Test Order Code LAB13477)

Effective Wednesday, May 20, 2026, ACL Laboratories will discontinue the Gastrointestinal Parasite Panel by PCR (Test Order Code LAB9927) due to limited clinical utility, high invalid rates, and relatively high cost. The test will be replaced with an enzyme immunoassay, *Giardia* & *Cryptosporidium* EIA (Test Order Code LAB13477) that detects the presence of *Giardia* and *Cryptosporidium* in stool specimens.

From January 1, 2023 through December 31, 2025, the positivity rates for *Giardia lamblia*, *Cryptosporidium* species, and *Entamoeba histolytica* using the Gastrointestinal Parasite Panel by PCR are 1.6%, 0.9%, and 0.1%, respectively. The invalid rate 1.5% for this test is nearly equivalent to or greater than the positivity rate for all targets on the panel.

The new enzyme immunoassay test (Test Order Code LAB13477) can detect *Giardia lamblia* and *Cryptosporidium* species, but does not detect *E. histolytica*. ACL Laboratories averages less than two (2) positive *E. histolytica* specimens annually. Studies have demonstrated that the *Giardia/Cryptosporidium* enzyme immunoassay has a sensitivity of approximately 80 – 90% compared to molecular tests.^{1,2}

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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Based on current testing volumes and positivity rate with the Gastrointestinal Parasite Panel, the transition to the EIA test should only yield a small number of false negative results annually. False negative results are more likely to occur in mild infections (due to lower parasite burden) many of which will resolve without subsequent treatment. In addition to having a relatively minor effect on detection of positive stool specimens, the new EIA test will be more cost effective.

ACL Laboratories will continue to offer the larger molecular GI Panel, Gastrointestinal Pathogen Panel (Test Order Code LAB9037), which includes *Giardia lamblia*, *Cryptosporidium* species, and *Entamoeba histolytica*, in addition to some bacterial and viral targets, and may be considered for serious infections.

1. Kabir M, et al. 2018. *Giardia/Cryptosporidium* Quik Chek assay is more specific than quantitative PCR for rapid point-of-care diagnosis of Cryptosporidiosis in infants in Bangladesh. Clin Infect Dis. 67(12): 1897-1903. Doi: 10.1093/cid/ciy372.
1. Bitilinyu-Bangoh J, et al. 2019. Performance of three rapid diagnostic tests for the detection of *Cryptosporidium* spp. and *Giardia duodenalis* in children with severe acute malnutrition and diarrhea. Infectious Diseases of Poverty. 8: 96. Doi: 10.1186/s40249-019-0609-6.

Update Regarding Collection/Shipping Handling for ADVOSEQ™ Non-Invasive Prenatal Aneuploidy Screen (Test Order Code LAB12248)

Effective Wednesday, May 20, 2026, ACL Laboratories will update collection/shipping handling for ADVOSEQ™ Non-Invasive Prenatal Aneuploidy Screen (Test Order Code LAB12248)

Specimen Requirements: One Cell-Free DNA BCT (Streck), 10.0 mL

Transport Requirements

- Specimen: Whole blood, 10.0 mL (minimum acceptable volume: 7.0 mL)
- Temperature: Ambient

EPIC Beaker Packing List: ROM – Molecular Ambient

Stability

- Ambient: Up to 5 days
- Refrigerated: Up to 7 days
- Frozen: Unacceptable

Patient Preparation and Collection Requirements

- Follow the correct order of draw to avoid heparin contamination.
- Immediately invert the tube 8–10 times after collection (do not shake).
- Do not refrigerate the specimen.
- Ensure the tube is completely filled (~10.0 mL).
- Failure to adequately mix the specimen or delays in mixing may result in inaccurate or failed test results.

If you have any questions, please contact:

ACL Laboratories Molecular Pathology Department at Rosemont (847-349-7182) or
ACL Client Services (800-877-7016)

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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ACL Billing Update

Since January 2026, we have seen an increase in denials related to diagnosis-code issues from payers across the board.

This appears to be driven by payers tightening their medical-necessity policies to reduce laboratory ordering.

As a result, coverage for certain laboratory tests is more restricted, including which tests are covered and when.

Several of our payers follow CMS (Medicare) guidelines, but they also maintain payer-specific policies that may override CMS guidance when they choose causing challenges as we work to resolve claims and ensure they are processed correctly.

As your laboratory service provider, ACL's goal is to process claims quickly and efficiently.

We are asking that our clients pay close attention and are mindful of updated plan guidelines when coding testing for their patients, checking for payable diagnosis codes along with frequency guidelines prior to submitting testing.

We appreciate your support as ACL manages through the changing landscape of insurance coverage.

For additional information, please contact ACL Client Services at 1.800.877.7016 or visit our website at <https://www.acllaboratories.com/patients/billing/>.