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QUALITY UPDATE
is a complimentary quarterly newsletter providing laboratory information for physicians and their staff.

OUR MISSION:
Improve the health of our community through excellence in medical laboratory services.

COMPUNET CLINICAL LABORATORIES

2308 Sandridge Drive
Moraine, Ohio 45439

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Quality Update

Occult Blood Testing Conversion Scheduled for June 1

Ike Northern, Microbiology/Serology

In our continuing effort to provide physicians and patients with the latest advances in laboratory medicine, please be aware that on June 1, 2011, CompuNet will convert occult blood testing from Hemocult®, a guaiac-based test, to InSure®, a fecal immunochemical test (FIT). According to the American College of Gastroenterology guidelines, a fecal immunochemical test is currently the preferred cancer detection test¹.

The InSure test may be used to screen for colorectal cancer by specifically detecting human hemoglobin from blood in the stool. Because InSure detects only human hemoglobin, the patient need not modify their diet prior to testing. The InSure test kit includes a card for two sample collections. Multiple sample collection increases the chance of detecting blood which could indicate colorectal cancer.

We will discontinue supplying the Hemocult SENZA occult blood card and replace any supply requests with InSure specimen collection cards on June 1. CompuNet will continue to test Hemocult cards for a period of time (approximately six months) to allow time for this conversion.

For questions about this conversion, contact Ike Northern, Microbiology/Serology manager, at 937-297-8334 or william.i.northern@questdiagnostics.com.

¹ACG Practice Guidelines, the American Journal of Gastroenterology, Vol. 104, March 2009:739-750.

Care360™ EHR Achieves Meaningful Use Certification

The January 2011 version release of Care360™ EHR has been certified by the Certification Commission for Health Information Technology (CCHIT®) and meets the CMS Meaningful Use criteria for 2011/2012.

Physicians who use Care360 Labs & Meds for online lab ordering/results and ePrescribe will find that the transition to Care360 EHR is simple, building upon their existing Care360 platform. Care360 EHR's delivery platform reduces the need for expensive hardware and physicians can access secure patient information from any fixed or mobile Internet browser.

To learn more about Care360 EHR and available CMS incentives for meaningful use attend one of the following brief webinars at www.care360.com - click News & Events:

- Care360 and HP: A Clear Path to Meaningful Use of Electronic Health Records
- Understanding Available CMS Incentives for Meaningful Use of an Electronic Health Record
- The Next Step: Using Care360EHR to Achieve Meaningful Use

Important Guidelines for Flow Cytometry CD4, H/S Ratios, & T&B for Immunity

Susan Millsaps, Flow Cytometry

Flow Cytometry is specialized testing that requires the analysis of "live" cells. For accurate results, specimens must be analyzed within 24 hours of collection. The following guidelines will ensure that you receive the most accurate results.

COLLECTION AND TRANSPORT OF CD4, H/S, AND T&B FOR IMMUNITY TESTS REQUIRE:

- Peripheral blood collected in an EDTA lavender top tube
- Same-day transport to CompuNet
- Room temperature (Colder temperatures may decrease the viability of the T-cell population.)

FLOW CYTOMETRY LOCATION AND HOURS:

- CompuNet's Flow Cytometry department, located at Miami Valley Hospital, is staffed Monday through Friday only from 7:00 a.m. - 6:00 p.m.
- CD4, H/S, and T&B for immunity specimens collected on Friday or the day before a holiday must be in the laboratory by 2:00 p.m. Call (937) 208-6687 for specimen pickup.
- We do not test on weekends or holidays, except for emergency leukemia testing.
- In an emergency, call (937) 208-6687 to make testing arrangements.

For questions regarding Flow Cytometry specimen collection and processing, contact the Flow Cytometry department at 1-800-686-2252, press 3, then press 2.

Microbiology Test Changes

(Revised from Fall 2010 Quality Update)

Ike Northern, Microbiology/Serology

In 2010, the Microbiology Department began converting all testing into a new computer system. As a result of this conversion, several tests have been combined with other tests to consolidate the number of order codes.

The following is a list of codes that have been eliminated and the new order codes that should be used instead:

OLD ORDER CODE	OLD TEST NAME	NEW ORDER CODE	NEW TEST NAME	COMMENTS
73810	Minimum Inhibitory Concentration	71148	Identification and Sensitivity	Indicate drug to be tested
74588	MRSA Screen	4483	Culture, Nose	For other sources use 70881
70363	Culture, Ear	70881	Culture, Miscellaneous	List source
388	Culture, Cerebrospinal Fluid	70881	Culture, Miscellaneous	List source
4473	Culture, Body Fluid	70881	Culture, Miscellaneous	List source
4488	Culture, Lesion	70881	Culture, Miscellaneous	List source
4483	Culture, Tissue	70881	Culture, Miscellaneous	List source
70418	Culture, Skin	70881	Culture, Miscellaneous	List source

Home Health Care Requisition and Specimen Drop-off

Carolyn Thaman, Six Sigma

CompuNet often receives questions from our Home Health Agency customers regarding lab orders and results. Listed below are our responses to some of the most common inquiries.

Q: What information is required on the test requisition for each lab order?

A: The following is required on each test requisition:

- Patient name, address, gender, and date of birth - please record this information exactly as listed on the insurance card.
- Patient billing information – insurance name, ID, group number, policy number, and insurance address.
If possible, please include a copy of the insurance card (front and back).
- Ordering physician's first and last name, address, phone and fax numbers
- Ordering physician's signature (now required by Medicare)
- Physician's NPI
- Diagnosis Code(s)
- Advance Beneficiary Notice (ABN), if required
- Collection date and time
- Name of person completing the requisition

Q: Can a test requisition be copied to use for several patients?

A: No – we cannot accept a “copied” requisition because each requisition has a unique number. Please utilize a new requisition for each patient. If you need CompuNet test requisitions contact either your CompuNet Sales Representative or call us at (937) 296-0844 and ask for the Supplies department.

Q: Where should we drop off specimens and test requisitions?

A: See Specimen and Test Requisition Drop-off Information:

LOCATION	HOURS	SAME DAY TESTING	STAT TESTING
Sandridge Reference Lab 2308 Sandridge, Moraine 45439 Most accessible No wait to drop off	Mon - Sat: 24 hour availability Sun: 11am - 3pm	Drop off by noon, Mon. - Fri. only. (Results available by 5pm)	Available - testing will be completed within 4 hours of specimen drop-off
CompuNet Patient Service Centers (all locations) Accessible Some wait time possible during drop-off	Contact Patient Service Center for hours of operation	Drop off by 10am, Mon. - Fri., only. (Results available by 5pm)	Not Available through Patient Service Centers
MVH Lab 1 Wyoming St., Dayton, 45409	For emergencies only. Please be sure to communicate with laboratory personnel at time of drop-off.		

Q: How do I get a list of the tests available for “Same Day Testing” or STAT?

A: Same Day Testing and STAT menus are available through a CompuNet Sales Representative or by contacting Client Services, (937) 297-8260.

Q: What information is needed to obtain patient results?

A: You will need the patient name and demographics. If you can provide your agency's CompuNet account number, the response will be faster.

Q: When are patient results called directly to the ordering physician?

A: Any critical test result will be directly communicated to the ordering physician so it is important to include the ordering physician's full name and contact information on the requisition.

Q: How are we informed of changes to specimen requirements?

A: Information can be found on CompuNet's website under “Search Tests”: www.compunetlab.com/tests. The printed Directory of Services is also a resource. If you are uncertain or have questions about specimen requirements, contact Client Services at (937) 297-8260.

For more information, contact CompuNet's Client Services, (937) 297-8260.

2011 CPT Code Changes

Pattie Jackson, Compliance

The American Medical Association has made CPT code changes in the 2011 edition of the AMA Current Procedural Terminology (CPT) coding manual. As a result, CompuNet has implemented the following changes.

TEST NAME	ORDER CODE	2010 CPT CODES	NEW CPT CODES EFFECTIVE IMMEDIATELY
Avian Influenza H5 Gene, QL Real-Time PCR w/rfl to Influenza A and B RNA	17751	87798 with reflex to 87798 (x2)	87501 with reflex to 87502
Influenza A H1N1 (2009) Real-Time RT-PCR	16807	87798 (x2)	87502
HIV-1 Integrase Genotype	16868	87901	87906
HIV-1 Co-Receptor Tropism	16710	87901	87906
HIV-1 Genotype and Phenotype, PhenoSense GT(R)	15348	87901, 87903, 87904 x 10	87906, 87903, 87904 x 10
TM Co-Receptor Tropism Assay	19995	87901	87906
FISH, Vysis(R) UroVysion(R), Bladder Cancer	10107	88368 x4	88120
FISH, Bladder Cancer, Bladder Washing	19085	88368 x4	88120

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payor being billed.

For questions, contact Pattie Jackson, Compliance Auditor, (937) 297-8228.

Additional Updates

LAB TOURS AVAILABLE

Did you know that medical providers are welcome to tour CompuNet's main reference laboratory in Moraine? If you would like to take a tour, contact your CompuNet sales representative or call Robin at our office at (937) 297-8336 and we can arrange a time that is convenient for you. If you have a special area of interest, let us know in advance so that we can make special arrangements.

CARE360™ LAB ORDERS & RESULTS UPGRADE TO LABS & MEDS

Care360 Lab Orders and Results will be upgraded to Care360 Labs & Meds in the near future. Advantages of Labs & Meds include extra reporting features and available upgrades to ePrescribe or Care360 EHR. Also be aware that Care360 Labs & Meds now supports systems running on the Microsoft® Windows 7 operating system.

ANATOMIC PATHOLOGY SERVICES BILLING REMINDER

Physicians and other licensed practitioners may not bill for Anatomic Pathology Services unless they are personally performed by the practitioner or rendered under their on-site supervision. The law also prohibits the lab from billing the physician or practitioner for anatomic pathology services.

Anatomic pathology services include:

- Cytopathology (including all Pap tests), (b) Histopathology or Surgical Pathology, (c) Hematology, (d) Molecular Pathology, and (e) Blood-banking Services.

For more information contact Robin Allen, (937) 297-8336.

EDUCATIONAL PROGRAM OPPORTUNITIES AND WEBINARS

View upcoming or archived webcasts and receive CME credits at www.diagnosisCAST.com. Upcoming webinars include:

- **Tuberculosis Webinar**, Lee B. Reichman, MD, MPH - Thursday, March 3, 3:00pm
- **Tuberculosis E-forum (Ask the Expert)**, Lee B. Reichman, MD, MPH - Thursday, March 24, 3:00pm.
- **ColonCancer WRAP: Focus on Screening and Preventive Interventions for CRC**, Richard C. Wender, MD. AMA Category 1 CME credit available through December 2012.

Available through www.NicholsInstitute.com:

- **IGRAs in the Diagnosis of Tuberculosis**, on-demand webinar, presented by Richard Clark, PhD and Dale Schwab, PhD - through March 9, 2011.

NEW TESTS AVAILABLE

TPMT ACTIVITY	
Clinical Significance:	Help prevent hepatotoxicity from thiopurine therapy. This test helps identify individuals at increased risk of hepatotoxicity from thiopurine dose escalation. Patients with a TPMT activity of 4-12 nmol 6-MMP/hr/mL RBC (heterozygote/low metabolizer) are at increased risk and may require a lower dose of thiopurine drug.
Effective Date:	Immediately
Order Code:	18831
CPT Code(s):	83789
Specimen Requirements:	6 mL [x2] EDTA K2 whole blood Collect venous blood in 2 separate lavender top (K2-EDTA) tubes (3-5 mL each tube). Ship at 2-8 C. (Refrigerated) within 24 hours of collection.
Rejection Criteria:	Hemolyzed; Clotted; Animal specimen; Forensic specimen
Transport Temperature:	Refrigerated
Specimen Stability:	Room temperature: 48 hours Refrigerated: 6 days; Frozen: Unacceptable
Set-Up/Analytic Time:	Mon, Wed, Fri AM; reports Wed, Fri E, Mon PM
Reference Ranges:	>12 Normal nmol 6-MMP/hr/mL RBC 4-12 Heterozygote or low metabolizer nmol 6-MMP/hr/mL RBC <4 Homozygote Deficient Range nmol 6-MMP/hr/mL RBC
Methodology:	Liquid Chromatography Tandem Mass Spectrometry
Assay Category:	Laboratory Developed Test
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano
Result Code Mapping:	Result Code: 86006526 Result Name: TPMT Activity

LYMPHOCYTE MITOGEN SCREEN																									
Clinical Significance:	Impaired responses to Mitogens are encountered in primary secondary immunodeficiency states.																								
Effective Date:	Immediately																								
Order Code:	40088																								
CPT Code(s):	86353 X3																								
Specimen Requirements:	20 mL whole blood collected in a sodium heparin (green-top) tube.																								
INSTRUCTIONS:	SEND TO LAB STAT - MONDAY-FRIDAY NOON																								
Rejection Criteria:	Received refrigerated, received frozen																								
Transport Temperature:	Room temperature																								
Specimen Stability:	Room temperature: 24 hours																								
Refrigerated:	Unacceptable																								
Frozen:	Unacceptable																								
Set-Up/Analytic Time:	Tuesday - Saturday																								
Methodology:	Cell Culture																								
Performing Site:	Focus Diagnostics, Inc.																								
Result Code Mapping:	<table border="0"> <tr> <td>Result Code:</td> <td>Result Name:</td> </tr> <tr> <td>86005508</td> <td>DAY 3 UNSTIMULATED CPM</td> </tr> <tr> <td>86005509</td> <td>PHA 1:5 CPM</td> </tr> <tr> <td>86005510</td> <td>PHA 1:50 CPM</td> </tr> <tr> <td>86005511</td> <td>PHA INTERPRETATION</td> </tr> <tr> <td>86005512</td> <td>CON A 1:10 CPM</td> </tr> <tr> <td>86005513</td> <td>CON A 1:50 CPM</td> </tr> <tr> <td>86005514</td> <td>CON A INTERPRETATION</td> </tr> <tr> <td>86005516</td> <td>DAY 5 UNSTIMULATED CPM</td> </tr> <tr> <td>86005517</td> <td>PWM 1:2000 CPM</td> </tr> <tr> <td>86005518</td> <td>PWM 1:20000 CPM</td> </tr> <tr> <td>86005519</td> <td>PWM INTERPRETATION</td> </tr> </table>	Result Code:	Result Name:	86005508	DAY 3 UNSTIMULATED CPM	86005509	PHA 1:5 CPM	86005510	PHA 1:50 CPM	86005511	PHA INTERPRETATION	86005512	CON A 1:10 CPM	86005513	CON A 1:50 CPM	86005514	CON A INTERPRETATION	86005516	DAY 5 UNSTIMULATED CPM	86005517	PWM 1:2000 CPM	86005518	PWM 1:20000 CPM	86005519	PWM INTERPRETATION
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TSH RECEPTOR ANTIBODY	
Clinical Significance:	Hyperthyroidism in Graves' disease is caused by autoantibodies to the TSH receptor (TSHR), and measurement of these TSHR antibodies can be useful in disease diagnosis and management. The majority of TSH receptor antibodies mimic the action of TSH. Because they are not controlled by the negative feedback system, the stimulation of the thyroid often leads to the clinical thyrotoxic state of Graves' disease.
Effective Date:	Immediately
Order Code:	16453
CPT Code(s):	82397
Specimen Requirements:	1 mL no gel (red-top) serum
Rejection Criteria:	Plasma, gross icteric
Transport Temperature:	Room temperature
Specimen Stability:	Room temperature and Refrigerated: 7 days, Frozen: 28 days
Set-Up/Analytic Time:	Set-up Tue, Fri AM; reports Wed, Sat N
Reference Ranges:	Healthy, non-thyroidal disease: < or = 1.22 IU/L Thyroid disease without Graves' disease: < or = 1.58 IU/L Untreated Graves' disease: >1.75 IU/L
Methodology:	Immunoassay
Assay Category:	FDA Approved/Cleared
Performing Site:	Quest Diagnostics Nichols Institute
Result Code Mapping:	Result Code: 86006416 Result Name: TSH Receptor Antibody

GENOMIC ALTERATIONS, POSTNATAL, OLIGO-SNP ARRAY																			
New York State approval pending. This test is not available for NYS patient testing The recommended alternative test code for NY patient testing is TC (16135X) [16135] CHY 16134X [16135]-Genomic Alterations, Postnatal, ClariSure(R) CGH.																			
Clinical Significance:	Determine genetic cause of developmental delay (DD) or mental retardation (MR) in patients with or without dysmorphic features. Confirm, exclude, (or clarify) the diagnosis of known chromosomal syndromes. Assist in clinical management and genetic counseling. High resolution detection of chromosome segments involved in deletions, duplications, and long continuous stretches of homozygosity.																		
Effective Date:	Immediately																		
Test Code:	16478 CHY 16478																		
CPT Code(s):	88386, 83891, 83892, 83898																		
Specimen Requirements:	10 mL sodium heparin (green-top) whole blood Whole blood 5-10 mL (5 mL minimum). Green vacutainer (sodium heparin only). Ship at room temperature. Other vacutainer tubes containing sodium heparin are acceptable. See Genetics Specimen Collection Section for detailed specimen instructions. SPECIMEN VIABILITY DECREASES DURING TRANSIT. SEND SPECIMEN TO TESTING LAB FOR VIABILITY DETERMINATION. DO NOT REJECT.																		
Transport Temperature:	Room temperature																		
Specimen Stability:	See Instructions																		
Set-Up/Analytic Time:	Set-up Mon-Sat E; reports Mon-Sat E. Reports within 12-15 days																		
Reference Ranges:	Accompanies report																		
Methodology:	Affymetrix 6.0 protocol																		
Assay Category:	Laboratory Developed Test																		
Performing Site:	Quest Diagnostics Nichols Institute, San Juan Capistrano																		
CPU Interface Mapping:	<table border="0"> <tr> <td>Result Code:</td> <td>Type:</td> <td>Result Name:</td> </tr> <tr> <td>86006497</td> <td></td> <td>Postnatal, Oligo-SNP Array</td> </tr> <tr> <td>86001164</td> <td>Prompt No Return</td> <td>Diagnosis:</td> </tr> <tr> <td>85997342</td> <td>Prompt No Return</td> <td>Physician Name:</td> </tr> <tr> <td>85997343</td> <td>Prompt No Return</td> <td>Physician Phone #:</td> </tr> <tr> <td>90004906</td> <td>Prompt No Return</td> <td>Physician NPI</td> </tr> </table>	Result Code:	Type:	Result Name:	86006497		Postnatal, Oligo-SNP Array	86001164	Prompt No Return	Diagnosis:	85997342	Prompt No Return	Physician Name:	85997343	Prompt No Return	Physician Phone #:	90004906	Prompt No Return	Physician NPI
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TEST CHANGES & MODIFICATIONS

(CHANGES ARE INDICATED IN BOLD PRINT)

Hypercoag Profile with JAK2 (Includes Phospholipid Antibodies, Protein C Activity, Antithrombin III Activity, Plasminogen Activity, PLT, PT, APTT, dRVVT, Kaolin Clot Time, Prothrombin Abs, APC Resistance, Protein S Total and Free, Jak2 Mutation)

Unit Code:	104795
(MODIFIED) Mnemonic:	74794TX
Department:	SC
Collect:	S or 2 Gold S, 2L & 6B or 9 plastic B
Profile/Panel:	
CPT Code:	85303, 85300, 85420, 86147x3, 86148x3, 86146x3, 85049, 85610, 85730, 85613, 85347, 0030Tx2, 85307, 85305, 85306, 83891, 83898, 83896, 83904x2, 83912
Specimen Req.:	Discard tube required. Refer to Special Coag Specimen Collection found in the large and at the end of the small Directory of Services. 1 - SST or 2 Gold SST, 2 Lavender and 6 - 4.5 mL completely filled glass or 9 - 2.7 mL completely filled plastic Sodium Citrated blue top tubes.
Spec Handling:	Centrifuge SST or Gold SST. Transport Lavender at Room Temperature. Call for Stat Courier pick up. Blue top tube(s) must be centrifuged and the plasma removed and pooled together into 1 plastic tube. Centrifuge this pooled plasma and pour off the plasma quickly in one smooth motion into a separate clean plastic tube, making sure to leave red cell button in bottom of first tube. Perform a platelet on the double spun plasma. Must be less than 5K/mm ³ . Divide the plasma into 8 plastic capped tubes (1.5 mL each of plasma) and freeze within 4 hours of time drawn.
Disclaimer:	This test was developed and its performance characteristics have been determined by Quest Diagnostics. Performance characteristics refer to the analytical performance of the test. This test is performed pursuant to a license agreement with Roche Molecular Systems, Inc.

Lupus Anticoagulant Assay (Includes Platelet count, PT, sensitive APTT, Dilute Russell's Viper Venom Time, Kaolin Clotting Time)

Unit Code:	
Mnemonic:	70911
Department:	SC
Collect:	L & 3B or 5 plastic B
Profile/Panel:	Coagulation
CPT Code:	85049, 85613, 85347, 85610, 85730
Specimen Req.:	Discard tube required. Refer to Special Coag Specimen Collection found in the large and at the end of the small Directory of Services. 1 lavender and 3 - 4.5 mL completely filled glass or 5 - 2.7 mL completely filled plastic Sodium Citrated blue top tubes.
Spec Handling:	Transport lavender as whole blood at room temperature. Call for stat courier pick up.
Technical Info:	Blue top tube(s) must be centrifuged and the plasma removed and pooled together into 1 plastic tube. Centrifuge this pooled plasma and pour off the plasma quickly in one smooth motion into a separate clean plastic tube, making sure to leave red cell button in bottom of first tube. Perform a platelet on the double spun plasma. Must be less than 5K/mm ³ . Divide the plasma into 5 plastic capped tubes (1.0 mL each of plasma) and freeze within 4 hours of time drawn.
(MODIFIED) Disclaimer:	Reflex as needed to Thrombin Time, Platelet Neutralization Procedure, HMPA, TTI, 1:1 mixing studies, LA Confirm and Factor Assays at additional charges.

Chicken Meat (F83) IgE

Effective Date:	Immediately
Test Code:	2857
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999815 - CHICKEN MEAT (F83) IGE 85999816 - CLASS NEW 2004302 - CHICKEN MEAT (F83) IGE 2004303 - CLASS 2004245 - INTERPRETATION

Tomato (F25) IgE

Effective Date:	Immediately
Test Code:	2825
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999817 - TOMATO (F25) IGE 85999818 - CLASS NEW 2004294 - TOMATO (F25) IGE 2004295 - CLASS 2004245 - INTERPRETATION

Malt (F90) IgE

Effective Date:	Immediately
Test Code:	2863
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85997035 - MALT (F90) IGE 85997036 - CLASS NEW 2004304 - MALT (F90) IGE 2004305 - CLASS 2004245 - INTERPRETATION

Cacao (Chocolate) F93 IgE

Effective Date:	Immediately
Test Code:	2875
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999317 - CHOCOLATE (F93) IGE 85999318 - CLASS NEW 2004306 - CHOCOLATE (F93) IGE 2004307 - CLASS 2004245 - INTERPRETATION

Beef (F27) IgE

Effective Date:	Immediately
Test Code:	2827
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999803 - BEEF (F27) IGE 85999804 - CLASS NEW 2004296 - BEEF (F27) IGE 2004297 - CLASS 2004245 - INTERPRETATION

Garlic (F47) IgE

Effective Date:	Immediately
Test Code:	2847
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999373 - GARLIC (F47) IGE 85999374 - CLASS NEW 2004298 - GARLIC (F47) IGE 2004299 - CLASS 2004245 - INTERPRETATION

Onion (F48) IgE	
Effective Date:	Immediately
Test Code:	2848
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999321 - ONION (48) IGE 85999322 - CLASS NEW 2004300 - ONION (F48) IGE 2004301 - CLASS 2004245 - INTERPRETATION

Yellow Hornet (I5) IgE	
Effective Date:	Immediately
Test Code:	2735
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999365 - YELLOW HORNET (I5) IGE 85999366 - CLASS NEW 2004318 - YELLOW HORNET (I5) IGE 2004319 - CLASS 2004245 - INTERPRETATION

Mouse Epithelia (E71) IgE	
Effective Date:	Immediately
Test Code:	2657
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 86001517 (55098005) - MOUSE EPITHELIA (E71) IGE 86001518 (55098010) - CLASS NEW 2004308 - MOUSE EPITHELIA (E71) IGE 2004309 - CLASS 2004245 - INTERPRETATION

Epicoccum Purpurascens (M14) IgE	
Effective Date:	Immediately
Test Code:	6692
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999355 - E. PURPURASCENS (M14) IGE 85999356 - CLASS NEW 2004322 - E. PURPURASCENS (M14) IGE 2004323 - CLASS 2004245 - INTERPRETATION

Honey Bee (I1) IgE	
Effective Date:	Immediately
Test Code:	2731
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999380 - HONEY BEE (I1) IGE 85999381 - CLASS NEW 2004310 - HONEY BEE (I1) IGE 2004311 - CLASS 2004245 - INTERPRETATION

Giant Ragweed (W3) IgE	
Effective Date:	Immediately
Test Code:	2403
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999098 - GIANT RAGWEED (W3) IGE 85999099 - CLASS NEW 2004324 - GIANT, RAGWEED (W3) IGE 2004325 - CLASS 2004245 - INTERPRETATION

White Faced Hornet (I2) IgE	
Effective Date:	Immediately
Test Code:	2732
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999849 - WH-FACED HORNET (I2) IGE 85999850 - CLASS NEW 2004312 - WH-FACED HORNET (I2) IGE 2004313 - CLASS 2004245 - INTERPRETATION

Allergy Panel 13, Stinging Insect Group	
Effective Date:	Immediately
Test Code:	7913
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999833 - HONEY BEE (I1) IGE 85999834 - CLASS 85999835 - WH-FACED HORNET (I2) IGE 85999836 - CLASS 85999837 - YELLOW JACKET (I3) IGE 85999838 - CLASS 85999839 - PAPER WASP (I4) IGE 85999840 - CLASS 85999841 - YELLOW HORNET (I5) IGE 85999842 - CLASS NEW 2004310 - HONEY BEE (I1) IGE 2004311 - CLASS 2004245 - INTERPRETATION 2004312 - WH-FACED HORNET (I2) IGE 2004313 - CLASS 2004245 - INTERPRETATION 2004318 - YELLOW HORNET (I5) IGE 2004319 - CLASS 2004245 - INTERPRETATION 2004316 - PAPER WASP (I4) IGE 2004317 - CLASS 2004245 - INTERPRETATION 2004314 - YELLOW JACKET (I3) IGE 2004315 - CLASS 2004245 - INTERPRETATION

Common Wasp, Yellow Jacket (I3) IgE	
Effective Date:	Immediately
Test Code:	2733
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999371 - YELLOW JACKET (I3) IGE 85999372 - CLASS NEW 2004314 - YELLOW JACKET (I3) IGE 2004315 - CLASS 2004245 - INTERPRETATION

Paper Wasp (I4) IgE	
Effective Date:	Immediately
Test Code:	2734
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85997051 - PAPER WASP (I4) IGE 85997052 - CLASS NEW 2004316 - PAPER WASP (I4) IGE 2004317 - CLASS 2004245 - INTERPRETATION

Latex Hevea Braziliensis (K82) IgE	
Effective Date:	Immediately
Test Code:	8927
Performing Site:	CompuNet Clinical Laboratories
Department:	Blood Serology
CPU Interface mapping:	OLD 85999090 - LATEX (K82) IGE 85999091 - CLASS NEW 2004320 - LATEX (K82) IGE 2004321 - CLASS 2004245 - INTERPRETATION

Properdin Factor B (C3 Proactivator)	
Unit Code:	
Mnemonic:	300
Department:	RC
Collect:	S
Profile/Panel:	
CPT Code:	83883
Specimen Req.:	1 mL serum (SST). Refrigerated.
(MODIFIED) Spec Handling:	Avoid hemolysis. Invert a minimum of 8 times then allow to clot in an upright position for 30 minutes. Centrifuge the SST for at least 10 minutes. Keep tightly stoppered.

Methylenetetrahydrofolate Reductase (MTHFR)									
Effective Date:	Immediately								
Order Code:	36165								
Performing Site:	Quest Diagnostics, Nichols Institute, Chantilly								
Result Code Mapping:	<table border="1"> <thead> <tr> <th>Result Code:</th> <th>Result Name:</th> </tr> </thead> <tbody> <tr> <td>86006640</td> <td>Result</td> </tr> <tr> <td>86006641</td> <td>Interpretation</td> </tr> <tr> <td>86006642</td> <td>Reviewer</td> </tr> </tbody> </table>	Result Code:	Result Name:	86006640	Result	86006641	Interpretation	86006642	Reviewer
Result Code:	Result Name:								
86006640	Result								
86006641	Interpretation								
86006642	Reviewer								
Additional Information:	Update test codes, result codes and result names.								

Testosterone, Free and Total, LC/MS/MS							
Effective Date:	Immediately						
Order Code:	36170						
Performing Site:	Quest Diagnostics Nichols Institute						
Result Code Mapping:	<table border="1"> <thead> <tr> <th>Result Code:</th> <th>Result Name:</th> </tr> </thead> <tbody> <tr> <td>85996653</td> <td>Testosterone, Total</td> </tr> <tr> <td>86000542</td> <td>Testosterone, Free</td> </tr> </tbody> </table>	Result Code:	Result Name:	85996653	Testosterone, Total	86000542	Testosterone, Free
Result Code:	Result Name:						
85996653	Testosterone, Total						
86000542	Testosterone, Free						
Additional Information:	The % Free Value is no longer reported. Update mapping by removing % Free Testosterone reporting analyte 86000541.						

DISCONTINUED TESTS

Lymphocyte Proliferation, Mitogens	
Effective Date:	Immediately
Order Code:	17000
Performing Site:	Mayo Reference Laboratory
Additional Information:	This test has been discontinued. The recommended alternative is 40088 Lymphocyte Mitogen Screen, performed at Focus Diagnostics. Refer to the New Test Offerings section for test information.

Prometheus™ TPMT Enzyme®	
Effective Date:	Immediately
Order Code:	14937
Performing Site:	Prometheus Therapeutics and Diagnostics
Additional Information:	This test will be discontinued. The recommended alternative is 18831-TPMT Activity performed at Quest Diagnostics Nichols Institute, San Juan Capistrano in the New Test Offerings section.

Dog Epithelium (E2) IgE	
Effective Date:	Immediately
Test Code:	2602
Performing Site:	CompuNet Clinical Laboratories
Additional Information:	This test has been discontinued. The recommended alternative is 2605 DOG DANDER (E5) IGE.

Thiopurine Methyltransferase (TPMT), Erythrocytes	
Effective Date:	Immediately
Order Code:	37452
Performing Site:	Mayo Medical Laboratories
Additional Information:	This test will be discontinued. The recommended alternative is 18831-TPMT Activity performed at Quest Diagnostics Nichols Institute, San Juan Capistrano in the New Test Offerings section.

TBII (Thyrotropin-Binding Inhibitory Immunoglobulin)	
Effective Date:	Immediately
Order Code:	5738
Performing Site:	Mayo Medical Laboratories
Additional Information:	This test will be discontinued. The recommended alternative is 16453 - TSH Receptor Antibody in the New Test Offerings section.

You can view the current and past issues of the Quality Update at www.compunetlab.com under Healthcare Providers tab.
For address changes or to unsubscribe, please call (937) 297-8336.

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