



### Technical Update • February 2014

Cleveland Clinic Laboratories is dedicated to keeping you updated and informed about recent testing changes. That's why we are happy to provide this technical update on a monthly basis.

Recently changed tests are **bolded**, and could include revisions to methodology, reference range, days performed or CPT code. For your convenience, tests are listed alphabetically and the order and billing codes are provided.

If you wish to compare the new information with previous test demographics, refer to the Test Directory, which can be accessed at [clevelandcliniclabs.com](http://clevelandcliniclabs.com).

Deleted tests and new tests are listed separately. Please update your database as necessary. For additional detail, contact Client Services at 216.444.5755 or 800.628.6816 or via email at [clientservices@ccf.org](mailto:clientservices@ccf.org).

Test Update Page #	Summary of Changes by Test Name	Order Code	Billing Code	Name Change	New Test	Test Discontinued	Specimen Information	Component Change	Days Performed/Reported	Reference Range	Methodology	CPT	Fee
2	Acetylcholinesterase, Amniotic Fluid												
2	Arginine Vasopressin												
2	Cystine, Urine Quantitative												
2, 4	Interleukin 2 Receptor (CD25), Soluble												
2	Intrinsic Factor Blocking Antibody												
2	Magnesium RBC												
2	Myelin Basic Protein, CSF												
3	Neutrophil Activity NBT												
4	Neutrophil Activity Panel												
3	Neutrophil Activity SOD												
2	Polychlorinated Biphenyls Quantitative, Serum or Plasma												
2	Porphyrins, Urine Fractionated												
2	Porphobilinogen, Urine Quant												
2	Varicella Zoster IgG Ab, CSF												
2	Vitamin B1, Plasma												
2	Vitamin C												

# Test Changes

Test Name	Order Code	Billing Code	Change	Effective Date
Acetylcholinesterase, Amniotic Fluid	ACHE	77001	<b>Stability:</b> Ambient: 4 days; <b>Refrigerated: 2 months</b> ; Frozen: Unacceptable	1/17/2014
Arginine Vasopressin	AVAS	76403	<b>Days Performed: Monday, Wednesday, Friday</b>	2/18/2014
Cystine, Urine Quantitative	UCYSTD	82620	<b>Reference Range:</b> Age: 0-2 months: 14 - 573 umol/g CRT 3-8 months: 28 - 461 umol/g CRT 9 months - 2 yrs: 34 - 186 umol/g CRT 3-12 years: 26 - 98 umol/g CRT >= 13 years: 12 - 81 umol/g CRT	2/18/2014
<b>Interleukin 2 Receptor (CD25), Soluble</b>	SIL2R	43095	<b>Name Change:</b> Formerly Interleukin Receptor (CD25) <b>Specimen Requirement:</b> 1mL serum from a serum separator tube or plasma from a Lithium Heparin tube; <b>Separate serum or plasma from cells ASAP or within 2 hours of collection; Critical Frozen.</b> <b>Stability:</b> After separation from cells: Ambient 30 mins, Frozen 1 year, Refrigerated unacceptable. <b>Methodology:</b> Quantitative Multiplex Bead Assay <b>Reference Range:</b> 0 - 1033 pg/mL <b>Days Performed:</b> Monday, Wednesday, Friday <b>Reported:</b> 2 - 5 days <b>CPT: 83520</b> <b>Price: \$330.00</b>	12/31/2013
Intrinsic Factor Blocking Antibody	INTFCT	83971	<b>Days Performed: Sunday - Saturday</b> <b>Reported:</b> 2 - 4 days	2/18/2014
Magnesium RBC	MAGRBC	82917	<b>Special Information:</b> This test is now available for New York patient testing. Patient should refrain from taking vitamins or mineral herbal supplements for at least one week before sample collection. <b>Clinical Information:</b> Magnesium is an essential trace element. Deficiency leads to irritability, neuromuscular abnormalities, cardiac and renal damage. Its salts are used as antacids and cathartics. Excessive amounts cause CNS depression, loss of muscle tone, respiratory and cardiac arrest. <b>Lab Information:</b> Leave packed cells in original collection tube. Do not centrifuge whole blood. <b>Specimen Requirements:</b> EDTA Whole Blood: <b>Ambient 4 days</b> ; Frozen unacceptable; Refrigerated 1 week. <b>Reported:</b> 3 - 6 days	1/15/2014
Myelin Basic Protein, CSF	CMBP	41045	<b>Days Performed: Sunday - Saturday</b>	2/18/2014
<b>Polychlorinated Biphenyls Quantitative, Serum or Plasma</b>	PBPS	89450	<b>Name Change:</b> Formerly Polychlorinated Biphenyls Serum or Plasma	2/18/2014
Porphyrins, Urine Fractionated	UPORFR	84120	<b>Days Performed: Monday - Friday</b>	2/18/2014
Porphobilinogen, Urine Quant	UPBGQT	77118	<b>Days Performed: Monday - Friday</b> <b>Reported:</b> 2 - 5 days	2/18/2014
Varicella Zoster IgG Ab, CSF	CVZVG	82818	<b>Specimen Requirements:</b> 0.5 CSF in a clean container. <b>Minimum 0.3 CSF</b> in a clean container. <b>Methodology:</b> Semi - Quantitative Chemiluminescent Immunoassay <b>Clinical Information:</b> The detection of antibodies to varicella-zoster in CSF may indicate central nervous system infection. However, Consideration must be given to possible contamination by blood or transfer of serum antibodies across the blood-brain barrier. <b>Reference Range:</b> 134 IV or Less: Negative 135 - 165 IV: Equivocal 166 IV or Greater: Positive <b>Days Performed: Sunday - Saturday</b> <b>Reported:</b> 2 - 3 days	2/18/2014
Vitamin B1, Plasma	PVITB1	83477	<b>CPT: 84425</b>	1/29/2014
Vitamin C	VITC	82180	<b>Days Performed: Sunday - Saturday</b> <b>Reported:</b> 2 - 6 days	2/18/2014

# New Tests

Test Name	Order Code	Billing Code	Test Information	Effective Date
Neutrophil Activity NBT	NBT	89825	<p><b>Specimen Requirement:</b> 20mL whole blood in a Sodium Heparin (Green) tube. Must be delivered to the lab within 24 hours at room temperature.</p> <p><b>Special Information: Internal:</b> Deliver blood immediately to the lab after collection. Specimens drawn on Friday or the day before a holiday must be received in the testing lab by noon.</p> <p><b>FHC/RMP/External:</b> Deliver blood within 24 hours. Collect Monday - Thursday only. Specimen must be received in the testing lab by noon Friday. Do not collect specimens the day before a holiday.</p> <p><b>Stability:</b> Ambient 24 hours, Refrigerated unacceptable, Frozen unacceptable.</p> <p><b>Methodology:</b> Stain</p> <p><b>Clinical Information:</b> Neutrophils are polymorphonuclear lymphocytes that provide effective host defense against bacterial and fungal infections. Individuals with marked decrease of neutrophils or severe defects in neutrophil functions often suffer from recurrent systemic bacterial infections (i.e. pneumonia). Membrane sensors (receptors) from neutrophils can detect minute amount of microbial products together with endogenous chemoattractants, complements and cytokines during infection. These molecules act to recruit neutrophils to the site of infection. Neutrophils will engage in a series of physical and chemical process that result in the sequestration and lysis of microorganisms. The Nitroblue Tetrazolium Reduction Assay (NBT) is a qualitative assay of Oxidative metabolism which requires the integrity of phagocytosis and oxidative metabolism. In the NBT assay, neutrophils phagocytize endotoxin and nitroblue tetrazolium, and reduces the NBT to blue formazan in the presence of intact oxidative metabolism. NBT reduction is a useful means of assaying overall metabolic integrity of phagocytizing neutrophils.</p> <p><b>Reference Range:</b> UNBT: &gt;1%; SNBT: &gt;15%</p> <p><b>Days Performed:</b> Monday - Friday</p> <p><b>Reported:</b> 1 - 3 days</p> <p><b>CPT:</b> 86384</p> <p><b>Price:</b> \$190.00</p>	3/11/2014
Neutrophil Activity SOD	SOD	89823	<p><b>Specimen Requirement:</b> 20mL whole blood in a Sodium Heparin (Green) tube. Must be delivered to the lab within 24 hours at room temperature.</p> <p><b>Special Information: Internal:</b> Deliver blood immediately to the lab after collection. Specimens drawn on Friday or the day before a holiday must be received in the testing lab by noon.</p> <p><b>FHC/RMP/External:</b> Deliver blood within 24 hours. Collect Monday - Thursday only. Specimen must be received in the testing lab by noon Friday. Do not collect specimens the day before a holiday.</p> <p><b>Stability:</b> Ambient 24 hours, Refrigerated unacceptable, Frozen unacceptable.</p> <p><b>Clinical Information:</b> Neutrophils are polymorphonuclear lymphocytes that provide effective host defense against bacterial and fungal infections. Individuals with marked decrease of neutrophils or severe defects in neutrophil functions often suffer from recurrent systemic bacterial infections (i.e. pneumonia). Membrane sensors (receptors) from neutrophils can detect minute amount of microbial products together with endogenous chemoattractants, complements and cytokines during infection. These molecules act to recruit neutrophils to the site of infection. Neutrophils will engage in a series of physical and chemical process that result in the sequestration and lysis of microorganisms. This test detects the production of superoxide anion (SOD) in neutrophils when stimulated.</p> <p><b>Methodology:</b> Immunoassay (IA)</p> <p><b>Reference Range:</b> SO2CON: 3 - 19 Nmoles; SO2PMA: 30 - 66 Nmoles</p> <p><b>Days Performed:</b> Monday - Friday</p> <p><b>Reported:</b> 1 day</p> <p><b>CPT:</b> 86318</p> <p><b>Price:</b> \$190.00</p>	3/11/2014

## Fee Increases

Test Name	Order Code	Billing Code	List Fee	CPT Code
Interleukin 2 Receptor (CD25), Soluble	SIL2R	43095	\$330.00	83520

## Discontinued Tests

Test Name	Order Code	Billing Code	Test Information	Effective Date
Neutrophile Activity Panel	NAP	75723	This panel is being made inactive. The NBT and SOD components of the battery will become individual batteries.	3/20/2014