Interpath Laboratory, Inc.
Test File Update

As an Interpath customer who receives electronic results or sends electronic orders you may need to be notified when we update our Service Manual. Although we try to keep these changes to a minimum, laboratory medicine is an evolving industry requiring changes to our technology from time to time. Depending on the requirements of your EMR or Hospital Information System you may be required to make similar changes to your system in order to correctly process inbound electronic results and create outbound electronic orders.

If you are uncertain that you are required to update your system we recommend that you contact your vendor for more information. As your laboratory service provider we are available to participate in the discussion with your vendor so that you clearly understand the impact of these changes.

Included in this email:

- This cover letter with a summary of the changes
- Microsoft Word® Document with the detail of these changes to our Service Manual
- Interpath Master Order/Result Compendium

Additional information including our most recent Service Manual and additional contact information can be found at www.interpathlab.com

Effective Dates: August 7, 2017 and August 14, 2017

In an effort to provide better and more comprehensive laboratory services to our clients regarding our autoimmune disease testing menu, we are pleased to announce our transition to a new test system vendor, Inova Diagnostics. Inova Diagnostics specializes in autoimmune technologies and diagnostic markers and will be an ideal partner as we seek to enlarge our autoimmune disease testing footprint.

Due to the complex nature of this transition, we will be transitioning our testing in three phases, the third taking effect on August 7th, 2017 and August 14th, 2017 (effective dates noted on testing). We appreciate your patience as we make these exciting changes.

Interpath Laboratory, Inc.
Test File Update

Order Code	Test Name	NC Name Change	CC Component Change	CPT CPT Change	SRC Specimen Requirements Change	RRC Reference Range Change	NT New Test	DT Discontinued Test	AOE Ask on Order Entry Questions
2461	Anti-Neutrophil Cytoplasmic Antibodies(ANCA)			◆	◆	◆			
93539	Cyclic Citrullinated Peptide Antibody, IgG							◆	
2939	Cyclic Citrullinated Peptide 3 Antibody, IgG						◆		
2381	Cytomegalovirus Antibodies, IgG/IgM				◆	◆			
2382	Cytomegalovirus Antibody, IgG				◆	◆			
2383	Cytomegalovirus Antibody, IgM				◆	◆			
1856	Infectious Mono Viral Panel				◆	◆			
2330	Lyme Antibody, Total				◆				
2171	Toxoplasma Antibody, IgG/IgM				◆	◆			
2172	Toxoplasma Antibody, IgG				◆	◆			
2173	Toxoplasma Antibody, IgM				◆	◆			
14470	Unexplained Fatigue Panel		◆						
2803	West Nile Antibody, IgG/IgM				◆	◆			
2808	West Nile Antibody, IgG				◆	◆			
2807	West Nile Antibody, IgM				◆	◆			

Interpath Laboratory, Inc.
Test File Update

2461 Anti-Neutrophil Cytoplasmic Antibodies (ANCA) CPT/SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme-Linked ImmunoSorbent Assay (ELISA)
Performed:	Monday, Wednesday, Thursday
Reported:	1-4 Day(s)
CPT Codes:	83520x2
Interpretive Data:	Please see report for interpretive data.
Components:	2277 - MYELOPEROXIDASE 2279 - PROTEINASE 3

Please take note of CPT codes, special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

Myeloperoxidase and Proteinase 3 Reference Ranges:

<21 Units Negative
21-30 Units Weak Positive
>30 Units Moderate to Strong Positive

ELISA method for ANCA correlates with Indirect Immunofluorescence as follows-
Myeloperoxidase = P-ANCA (Perinuclear Staining)
Proteinase 3 = C-ANCA (Cytoplasmic Staining)

Interpath Laboratory, Inc.
Test File Update

93539 Cyclic Citrullinated Peptide Antibody, IgG DT

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**0.5 mL (Min:0.3 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate serum from cells ASAP or within 2 hours of collection
Rejection Criteria:	Grossly Lipemic Samples Heat inactivated Hemolyzed specimens Icteric specimen Plasma Urine
Stability:	Ambient: 2 Day(s); Refrigerated: 2 Week(s); Frozen: 12 Month(s); Incubated: Unacceptable
Methodology:	Semi-Quantitative Enzyme-Linked Immunosorbent Assay
Performed:	Sun-Sat
Reported:	2-3 Day(s)
CPT Codes:	86200

Test is being discontinued effective 8/14/2017.

Interpath Laboratory, Inc.
Test File Update

2939 Cyclic Citrullinated Peptide 3 Antibody, IgG (CCP3) NT

Specimen:	
Collect:	**One SST** Also Acceptable One Blue Top (Na Citrate) One Lavender (EDTA) One Pink Top (EDTA) One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.** Also Acceptable 1 mL (Min:0.5 mL) Plasma. Submit Refrigerated. Submit in a Standard Transport Tube.
Special Handling:	Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme-Linked ImmunoSorbent Assay (ELISA)
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	86200
Interpretive Data:	CCP3 Reference Range: <20 Units Negative 20-39 Units Weak Positive 40-59 Units Moderate Positive >59 Units Strong Positive Anti-cyclic citrullinated peptide (anti-CCP), IgG antibodies are present in about 69-83 percent of patients with rheumatoid arthritis (RA) and have specificities of 93-95 percent. These autoantibodies may be present in the preclinical phase of disease, are associated with future RA development, and may predict radiographic joint destruction. Patients with weak positive results should be monitored and testing repeated.

Test is being added effective 8/14/2017.

Interpath Laboratory, Inc.
Test File Update

2381 Cytomegalovirus Antibodies, IgG / IgM SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Icteric specimen Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescent Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
Interpretive Data:	Please see report for interpretive data.
Components:	2382 - CMV, IgG 2383 - CMV, IgM

Please take note of preferred submit, special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to CMV is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Cytomegalovirus Antibody Interpretation

	IgG	IgM
No Infection	Negative	Negative
Acute Infection	Pos/Neg	Positive
Past Infection	Positive	Negative

Interpath Laboratory, Inc.
Test File Update

2382 Cytomegalovirus Antibody, IgG SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Icteric specimen Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescent Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
Interpretive Data:	General Reference Range: negative

Please take note of preferred submit, special handling, rejection criteria, stability, methodology, preformed days, reported days, and reference range changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to CMV is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Interpath Laboratory, Inc.
Test File Update

2383 Cytomegalovirus Antibody, IgM SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Icteric specimen Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescent Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
Interpretive Data:	General Reference Range: negative

Please take note of preferred submit, special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to CMV is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Interpath Laboratory, Inc.
Test File Update

1856 Infectious Mono Viral Panel SRC/RRC

Specimen:		
Collect:	**One SST** Also Acceptable One Red Top	
Submit:	**2 mL (Min:1 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**	
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP	
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Heat inactivated Icteric specimen Microbial Contamination Particulate matter	
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable	
Methodology:	Chemiluminescent Immunoassay	
Performed:	Mon-Fri	
Reported:	1-3 Day(s)	
Interpretive Data:	Please see report for interpretive data.	
Components:	2362 - EBV,IgG	2364 - EBV, IgM
	2382 - CMV, IgG	2383 - CMV, IgM
	2172 - TOXOPLASMA AB IgG	2173 - TOXOPLASMA AB IgM

Please take note of special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

Epstein-Barr Virus Antibody IgG Reference Range:

0.0-17.9 U/ml Negative
18.0-21.9 U/ml Equivocal - Repeat testing in 1-2 weeks
> 21.9 U/ml Positive

Epstein-Barr Virus Antibody IgM Reference Range:

0.0-35.9 U/ml Negative
36.0-43.9 U/ml Equivocal - Repeat testing in 1-2 weeks
> 43.9 U/ml Positive

Cytomegalovirus Antibodies, IgG/IgM:

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to CMV is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Toxoplasma Antibodies, IgG/IgM:

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to Toxoplasma gondii is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Infectious Mono Viral Panel Interpretation

Infection	IgG Ab	IgM Ab
No previous	-	-
Acute	+	+
Recent	+	+/-
Past	+	-
Reactivation	+	+/-

Interpath Laboratory, Inc.
Test File Update

2330 Lyme Antibody, Total SRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP If the Lyme Antibody Total is non-negative, then the Lyme Antibodies, IgG/IgM by Western Blot (Test# 91156) will be performed. Additional charges will apply.
Rejection Criteria:	Hemolyzed specimens Icteric specimen Lipemic Samples Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme Immunoassay (EIA)
Performed:	Tuesday, Friday
Reported:	3-5 Day(s) All non-negative results are confirmed by Western Blot.
CPT Codes:	86618
Interpretive Data:	General Reference Range : none detected

Please take note of rejection criteria, and LOINC code (see attached compendium) changes effective 8/7/2017.

Patients with mononucleosis, lupus erythematosis, syphilis, yaws, pinta, leptospirosis, relapsing fever or other pathogenic spirochetal diseases may give false positive Lyme Ab results.

Interpath Laboratory, Inc.
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2171 Toxoplasma Antibody, IgG / IgM SRC/RRC

Specimen:		
Collect:	**One SST** Also Acceptable One Red Top	
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**	
Special Handling:	Separate from cells ASAP	
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Microbial Contamination Particulate matter	
Stability:	Ambient: 8 Hour(s); Refrigerated: 7 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable	
Methodology:	Chemiluminescent Immunoassay	
Performed:	Mon-Fri	
Reported:	1-3 Day(s)	
Interpretive Data:	Please see report for interpretive data.	
Components:	2172 - TOXOPLASMA AB IgG	2173 - TOXOPLASMA AB IgM

Please take note of collection, specimen submit, special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to Toxoplasma gondii is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Toxoplasma Antibody Interpretation:

	IgG	IgM
No Infection	Negative	Negative
Acute Infection	Pos/Neg	Positive
Past Exposure	Positive	Negative

Interpath Laboratory, Inc.
Test File Update

2172 Toxoplasma Antibody, IgG SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 7 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescent Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
Interpretive Data:	General Reference Range: Negative

Please take note of special handling, rejection criteria, stability, methodology, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to Toxoplasma gondii is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Interpath Laboratory, Inc.
Test File Update

2173 Toxoplasma Antibody, IgM SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples Microbial Contamination Particulate matter
Stability:	Ambient: 8 Hour(s); Refrigerated: 7 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescent Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
Interpretive Data:	General Reference Range : negative

Please take note of collection, specimen submit, special handling, rejection criteria, stability, methodology, preformed days, reported days, and LOINC code (see attached compendium) changes effective 8/14/2017.

The results from this assay are not by themselves diagnostic, and should be considered in association with other clinical data and patient symptoms. Results from immunosuppressed patients should be interpreted with caution. If exposure to Toxoplasma gondii is suspected despite a negative finding, a second sample should be collected and tested no less than one to two weeks later.

Interpath Laboratory, Inc.
Test File Update

14470 Unexplained Fatigue Panel CC

Specimen:		
Collect:	**Two SST** Also Acceptable Two Red Top	
Submit:	**5 mL (Min:3 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**	
Special Handling:	Allow specimen to clot completely at room temperature Avoid Repeated Freeze/Thaw Cycles Minimize air exposure Separate from cells ASAP If positive ANA Titer, the following EIA tests will be performed: Centromere Antibody, Jo-1 Antibody, RNP Antibody, DNA Antibody, Scleroderma Antibody, Smith Antibody, Histone Antibody, Sjogren Antibodies A & B, Positive Anti-DNA confirmed with Crithidae. Additional charges will apply. If the dsDNA Antibody is Positive, then the dsDNA AB Titer (Test# 2601) will be performed. Additional charges will apply.	
Rejection Criteria:	Heat inactivated Hemolyzed specimens Lipemic Samples Microbial Contamination Particulate matter	
Stability:	Ambient: Unacceptable; Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable	
Methodology:	See Individual Components	
Performed:	Mon-Fri	
Reported:	2-5 Day(s)	
CPT Codes:	86038 86225 86431 83516x4	86200 86376 86800
Interpretive Data:	Please see report for interpretive data.	
Components:	*2939 – CCP3 ANTIBODY, IgG* 2752 - TISSUE TRANSG.IgA 2726 - GLIADIN (DGP)-IgG 2755 - THYROGLOBULIN IgG 2337 - RHEUMATOID FACTOR 2301 - ANA PATTERN	2727 - TISSUE TRANSG.IgG 2725 - GLIADIN (DGP)-IgA 2600 - dsDNA ANTIBODY 2754 - T. PEROXIDASE IgG 2312 - ANA TITER 2510 - ANA REFLEX

Please take note of component change, and reference range change for CCP3. Please remove component 93539 CCP Antibody IgG and replace with component 2939 CCP3 Antibody IgG effective 8/14/2017.

Reference Ranges for tTG IgG and IgA:

< 7.0 U/mL Negative
7.0 - 10.0 U/mL Equivocal
> 10.0 U/mL Positive

Reference Ranges for Gliadin IgG and IgA; B2 Glycoprotein IgA, IgG, and IgM:

< 7.0 U/mL Negative
7.0 - 10.0 U/mL Equivocal - Repeat testing in 4-6 weeks
> 10.0 U/mL Positive

Reference Ranges for Thyroglobulin (TG):
<280 IU/mL Negative
280-344 IU/mL Equivocal
>344 IU/mL Positive

Reference Ranges for TPO:
<60 IU/mL Negative
60-100 IU/mL Equivocal
>100 IU/mL Positive

Reference Ranges for dsDNA Ab:
<30 IU/mL Negative
30-75 IU/mL Equivocal
>75 IU/mL Positive

Reference Range notes for ANA TITER:
An ANA TITER of 1:160 or less may be seen in up to 4% of apparently healthy individuals, increasing in incidence with aging. These results should be considered in the context of clinical finding and criteria established by the American College of Rheumatology.

Reference Range for CCP3 Antibody:
<20 Units Negative
20-39 Units Weak Positive
40-59 Units Moderate Positive
>59 Units Strong Positive

Anti-cyclic citrullinated peptide (anti-CCP), IgG antibodies are present in 69-83 percent of patients with rheumatoid arthritis (RA) and have specificities of 93-95 percent. These autoantibodies may be present in the preclinical phase of disease, are associated with future RA development, and may predict radiographic joint destruction. Patients with weak positive results should be monitored and testing repeated.

Interpath Laboratory, Inc.
Test File Update

2803 West Nile Antibody, IgG / IgM SRC/RRC

Specimen:		
Collect:	**One SST** Also Acceptable One Red Top	
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**	
Special Handling:	Allow specimen to clot completely at room temperature Separate from cells ASAP	
Rejection Criteria:	Grossly Lipemic Samples Heat inactivated Hemolyzed specimens Icteric specimen Microbial Contamination	
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable	
Methodology:	Enzyme-Linked ImmunoSorbent Assay (ELISA)	
Performed:	Tuesday, Friday	
Reported:	3-5 Day(s)	
CPT Codes:	86788	86789
Interpretive Data:	Please see report for interpretive data.	
Components:	2808 - WEST NILE AB, IgG	2807 - WEST NILE AB, IgM

Please take note of specimen submit, special handling, rejection criteria, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/7/2017.

West Nile Antibody IgG:
WNV IgG may produce false positive results due to cross-reactivity to CMV and/or bunyaviruses, or if a person has been infected with or vaccinated for falviviruses such as Japanese encephalitis virus, dengue virus, or yellow fever virus.

West Nile Antibody IgM:
WNV IgM may produce false positive results due to other flaviviruses or residual IgM from previous infection present for over 500 days. IgM positive results for children may also be caused by cross-reactivity with enteroviruses.

Interpath Laboratory, Inc.
Test File Update

2808 West Nile Antibody, IgG SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Allow specimen to clot completely at room temperature Separate from cells ASAP
Rejection Criteria:	Grossly Lipemic Samples Heat inactivated Hemolyzed specimens Icteric specimen Microbial Contamination
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme-Linked ImmunoSorbent Assay (ELISA)
Performed:	Tuesday, Friday
Reported:	3-5 Day(s)
CPT Codes:	86789
Interpretive Data:	General Reference Range: none detected

Please take note of specimen submit, special handling, rejection criteria, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/7/2017.

WNV IgG may produce false positive results due to cross-reactivity to CMV and/or bunyaviruses, or if a person has been infected with or vaccinated for falviviruses such as Japenese encephalitis virus, dengue virus, or yellow fever virus.

Interpath Laboratory, Inc.
Test File Update

2807 West Nile Antibody, IgM SRC/RRC

Specimen:	
Collect:	**One SST** Also Acceptable One Red Top
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**
Special Handling:	Allow specimen to clot completely at room temperature Separate from cells ASAP
Rejection Criteria:	Grossly Lipemic Samples Heat inactivated Hemolyzed specimens Icteric specimen Microbial Contamination
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme-Linked ImmunoSorbent Assay (ELISA)
Performed:	Tuesday, Friday
Reported:	3-5 Day(s)
CPT Codes:	86788
Interpretive Data:	General Reference Range: none detected

Please take note of specimen submit, special handling, rejection criteria, preformed days, reported days, reference range, and LOINC code (see attached compendium) changes effective 8/7/2017.

WNV IgM may produce false positive results due to other flaviviruses or residual IgM from previous infection present for over 500 days. IgM positive results for children may also be caused by cross-reactivity with enteroviruses.