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 Date: February 16th, 2021

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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
93627	Fluphenazine				◆	◆			
91345	Haloperidol					◆			
90200	Hemoglobin Evaluation Reflexive Cascade		◆						
93092	IgG Subclass 4				◆	◆			
91143	Immunoglobulin G Subclasses				◆	◆			
91609	Interleukin 28 B (IL28B)- Associated Variants, 2 SNPs							◆	
90300	Lead, Capillary							◆	
76043	Lead, Capillary						◆		
91281	Maternal AFP		◆						◆
91011	Maternal Quad Panel		◆						◆
93638	Maternal Screen #1		◆						◆
90070	Meprobamate							◆	
91174	Oligoclonal Band Profile				◆	◆			
91293	Phosphatidylserine Abs, IgGAM								
2739	Procalcitonin						◆		
93845	Procalcitonin							◆	

93627 Fluphenazine SRC/RRC

Specimen:	
Collect:	**One Red Top** Also Acceptable One Lavender (EDTA) One Pink Top (EDTA)
Submit:	**1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.** Also Acceptable 1 mL (Min:1 mL) Plasma. Submit Refrigerated. Submit in a Standard Transport Tube.
Special Handling:	Separate from cells ASAP Timing of specimen collection: Pre-dose (trough) draw - At steady state concentration.
Rejection Criteria:	Hemolyzed specimens Use of separator tubes Whole blood
Stability:	Ambient: 2 Day(s); Refrigerated: 1 Week(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Quantitative Liquid Chromatography-Tandem Mass Spectrometry
Performed:	Monday, Wednesday, Friday
Reported:	2-6 Day(s)
CPT Codes:	80342

Please take note of changes to rejection criteria and reference range.

Reference Range:

Therapeutic Range: 1.0-10.0 ng/mL
Toxic: >15 ng/mL

91345 Haloperidol RRC

Please take note of change to reference range.

Reference Range:

Therapeutic Range: 5.0-20.0 ng/mL
Toxic: >50 ng/mL

90200 Hemoglobin Evaluation Reflexive Cascade CC

Specimen:	
Collect:	**One Lavender (EDTA)** Also Acceptable One Pink Top (EDTA)
Submit:	**4 mL (Min:2 mL) Whole blood in Lavender (EDTA). Submit Refrigerated.** Also Acceptable 4 mL (Min:2 mL) Whole blood in Pink Top (EDTA). Submit Refrigerated.
Special Handling:	Patient history form, including information from a recent CBC, is required for interpretation. Separate specimens must be submitted when multiple tests are ordered. Abnormal results reflex. Additional charges will apply.
Stability:	Ambient: Unacceptable; Refrigerated: 1 Week(s); Frozen: Unacceptable; Incubated: Unacceptable
Methodology:	Electrophoresis; Fluorescence Resonance Energy Transfer; High Performance Liquid Chromatography; Polymerase Chain Reaction (PCR); RBC Solubility; Sequencing
Performed:	Sun-Sat
Reported:	Varies
CPT Codes:	83021
Interpretive Data:	Please see report for interpretive data.
Components:	93437 - HEMOGLOBIN A2 93438 - HEMOGLOBIN F 93439 - HEMOGLOBIN S 93440 - HEMOGLOBIN C 93441 - HEMOGLOBIN E 93442 - HEMOGLOBIN OTHER 93436 - HEMOGLOBIN A1 93443 - HEMOGLOBIN INTERP 93619 - SICKLE CELL SOL 93977 - HGB, CAP ELECRO 90187 - ALPHA GLOBIN 90188 - ALPHA THALASSEMIA 90199 - BETA GLOBIN SEQU 92019 - BETA GLOBIN DEL 92026 - HEMOGLOBIN LEPORE 92027 - INTERPRETATION 92182 - GAMMA GLOBIN SEQ

Please take note of change to components.
Component Changes:
Remove: 92026 - HEMOGLOBIN LEPORE
Add: 92182 - GAMMA GLOBIN SEQ

93092 IgG Subclass 4 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.**
Rejection Criteria:	Grossly Hemolyzed Samples Lipemic Samples
Stability:	Ambient: Unacceptable; Refrigerated: 2 Week(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Quantitative Immunoturbidimetry
Performed:	Sun-Sat
Reported:	2-4 Day(s)
CPT Codes:	82787

Please take note of changes to rejection criteria, stability, methodology, performed dates, and reference ranges.

Reference Ranges:

Age	Reference Range
0-2 years	1-34 mg/dL
3-4 years	1-65 mg/dL
5-9 years	0-168 mg/dL
10-14 years	1-103 mg/dL
15-18 years	2-170 mg/dL
19 and older	1-123 mg/dL

91143 Immunoglobulin G Subclasses 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:	Separate from cells ASAP
Rejection Criteria:	Grossly Hemolyzed Samples Lipemic Samples
Stability:	Ambient: Unacceptable; Refrigerated: 2 Week(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Quantitative Immunoturbidimetry
Performed:	Sun-Sat
Reported:	2-4 Day(s)
CPT Codes:	82787x4
Interpretive Data:	Please see report for interpretive data.
Components:	93089 - IgG SUBCLASS 1 93090 - IgG SUBCLASS 2 93091 - IgG SUBCLASS 3 93092 - IgG SUBCLASS 4

Please take note of changes to rejection criteria, stability, methodology, performed dates, and reference ranges.

Reference Ranges:

93089 – IgG Subclass 1

Age	Reference Range
0-2 years	167-900 mg/dL
3-4 years	313-941 mg/dL
5-9 years	363-1276 mg/dL
10-14 years	316-1076 mg/dL
15-18 years	325-894 mg/dL
19 and older	240-1118 mg/dL

93090 – IgG Subclass 2

Age	Reference Range
0-2 years	55-359 mg/dL
3-4 years	72-287 mg/dL
5-9 years	27-398 mg/dL
10-14 years	86-509 mg/dL
15-18 years	156-625 mg/dL
19 and older	124-549 mg/dL

Changes continued on following page

93091 – IgG Subclass 3

Age	Reference Range
0-2 years	34-85 mg/dL
3-4 years	25-117 mg/dL
5-9 years	17-169 mg/dL
10-14 years	14-201 mg/dL
15-18 years	34-246 mg/dL
19 and older	21-134 mg/dL

93092 – IgG Subclass 4

Age	Reference Range
0-2 years	1-34 mg/dL
3-4 years	1-65 mg/dL
5-9 years	0-168 mg/dL
10-14 years	1-103 mg/dL
15-18 years	2-170 mg/dL
19 and older	1-123 mg/dL

91609 Interleukin 28 B (IL28B)- Associated Variants, 2 SNPs DT
Test is being discontinued.

90300 Lead, Capillary DT

Please take note test is being discontinued and replaced with Test 76043 Lead, Capillary.

76043 Lead, Capillary NT

Specimen:	
Collect:	**One Lavender (EDTA)**
Submit:	**0.5 mL (Min:0.3 mL) Whole blood in Lavender (EDTA). Submit Ambient.**
Special Handling:	Invert 10 times to prevent specimen clotting. Stability: If the specimen is drawn and stored in the appropriate container the lead values do not change with time.
Rejection Criteria:	Specimens collected/transported in tubes other than Lavender Pediatric (EDTA) or Trace Element Free Transport Tube. Heparin anticoagulant or clotted specimens.
Stability:	Ambient: 24 Month(s); Refrigerated: 24 Month(s); Frozen: Unacceptable; Incubated: Unacceptable
Methodology:	Inductively Coupled Plasma Mass Spectrometry
Performed:	Mon-Fri
Reported:	2-8 Day(s)
CPT Codes:	83655
Interpretive Data:	General Reference Range : <=4.9 ug/dL

New test available for order.

91281 Maternal AFP CC/AOE

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 Specimen must be drawn between 14 weeks, 0 days and 24 weeks, 6 days gestation. Special Form - Patient History for Maternal Serum Testing The following information is required and must accompany the sample for test Interpretation: Patient's date of birth, current weight, due date, dating method (US, LMP), number of fetuses present, patient's race, if the patient was diabetic at the time of conception, if there is a known family history of neural tube defects, if the patient is currently smoking, if the patient is taking valproic acid or carbamazepine (Tegretol), and if this is a repeat sample.
Rejection Criteria:	Grossly Hemolyzed Samples Plasma
Stability:	Ambient: 3 Day(s); Refrigerated: 2 Week(s); Frozen: 12 Month(s); Incubated: Unacceptable
Methodology:	Quantitative Chemiluminescent Immunoassay
Performed:	Sun-Sat
Reported:	3-4 Day(s)
CPT Codes:	82105
Interpretive Data:	Please see report for interpretive data.
Components:	93241 - SPECIMEN 93242 - DATING 93252 - Gestational Age 93243 - Mat. Insulin DM 93245 - Maternal Race 93169 - Patients AFP 93240 - Interpretation 92184 - In Vitro Fert 93248 - Maternal Age 93202 - Est. Due Date 93238 - Maternal Weight 93244 - Family Hx of NTD 93246 - Number of Fetuses 93239 - MoM for AFP 92052 - SMOKING 92185 - Donor egg age

Please take note of changes to components.

Component Changes:

Add: 92184 - In Vitro Fert; 92185 - Donor egg age

AOE changes:

Add: Q1147 – In Vitro Fertilization; Q1165 – Donor Egg Age

91011 Maternal Quad Panel CC/AOE

Specimen:		
Collect:	**One SST** Also Acceptable One Red Top	
Submit:	**3 mL (Min:1 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.**	
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Separate aliquot required for each frozen test ordered Separate from cells ASAP Collect at 14-24 weeks gestation only. Remarks: The following information is required and must accompany the sample for test interpretation: Patient's date of birth, current weight, due date, dating method (US, LMP), number of fetuses present, patient's race, if the patient was diabetic at the time of conception, if there is a known family history of neural tube defects, if the patient has had a previous pregnancy with a trisomy, if the patient is currently smoking, if the patient is taking valproic acid or carbamazepine (Tegretol), if this is a repeat sample, and the age of the egg donor if in vitro fertilization.	
Rejection Criteria:	Grossly Hemolyzed Samples Plasma	
Stability:	Ambient: 3 Day(s); Refrigerated: 2 Week(s); Frozen: 12 Month(s); Incubated: Unacceptable	
Methodology:	Quantitative Chemiluminescent Immunoassay	
Performed:	Sun-Sat	
Reported:	3-5 Day(s)	
CPT Codes:	82105 84702	82677 86336
Interpretive Data:	Please see report for interpretive data.	
Components:	93169 - Patients AFP 93206 - MoM FOR DIA 93238 - Maternal Weight 93240 - Interpretation 93242 - DATING 93244 - Family Hx of NTD 93246 - Number of Fetuses 93249 - Patients hCG 93252 - Gestational Age 93255 - MoM for uE3 90059 - EER SCREEN 92185 - Donor egg age	93202 - Est. Due Date 93207 - Patients DIA 93239 - MoM for AFP 93241 - SPECIMEN 93243 - Mat. Insulin DM 93245 - Maternal Race 93248 - Maternal Age 93251 - MoM for hCG 93253 - Patients uE3 91593 - Hx of Aneuploidy 92052 - SMOKING

Please take note of changes to componnets.

Component Changes:

Add: 92185 - Donor egg age

AOE changes:

Add: Q1165 – Donor Egg Age

93638 Maternal Screen #1 CC/AOE

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:	Specimen must be drawn between 10 weeks, 0 days and 13 weeks, 6 days gestation (Crown-Rump length (CRL) must be 32.4-83.9 mm). Requires complete gestational information including CRL. This test also requires the following information: Patient's date of birth, current weight, number of fetuses present, patient's race, if the patient was diabetic at the time of conception, if there is a known family history of neural tube defects, if the patient has had a previous pregnancy with a trisomy, if the patient is currently smoking, if the patient is taking valproic acid or carbamazepine (Tegretol), if this is a repeat sample, and the age of the egg donor if in vitro fertilization.
Rejection Criteria:	Hemolyzed specimens Plasma Specimens exposed to repeat freeze/thaw cycles
Stability:	Ambient: 3 Day(s); Refrigerated: 2 Week(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Quantitative Chemiluminescent Immunoassay
Performed:	Sun-Sat
Reported:	3-5 Day(s) Final interpretative report available when second specimen testing is complete.
CPT Codes:	84163
Interpretive Data:	Please see report for interpretive data.
Components:	93963 - Patients PAPP-A 93240 - Interpretation 93238 - Maternal Weight 93252 - Gestational Age 93245 - Maternal Race 93962 - Crown Rump Length 93966 - Sonographer Name 93969 - Date for Sample 2 92053 - NUCHAL TWIN B 92052 - SMOKING 92054 - Crown Rump Twin B 93961 - Nuchal Trans (NT) 93248 - Maternal Age 93202 - Est. Due Date 93246 - Number of Fetuses 91593 - Hx of Aneuploidy 93965 - Sonographer Cert 93967 - Ultrasound Date 93970 - EER Maternal Scrn 93242 - DATING 93241 - SPECIMEN 92185 - Donor egg age

Please take note of changes to componnets.

Component Changes:

Add: 92185 - Donor egg age

AOE changes:

Add: Q1165 – Donor Egg Age

90070 Meprobamate DT

Test is being discontinued.

91174 Oligoclonal Band Profile SRC/RRC

Specimen:			
Collect:	**One SST** **CSF in Sterile Specimen Container** Also Acceptable One Red Top		
Submit:	**1 mL (Min:0.6 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube.** **1.5 mL (Min:1 mL) CSF in Sterile Specimen Container. Submit Refrigerated.**		
Special Handling:	Allow specimen to clot completely at room temperature Separate from cells ASAP Serum specimen should be drawn within 48 hours of CSF collection		
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples		
Stability:	Ambient: Unacceptable; Refrigerated: 2 Week(s); Frozen: 6 Month(s); Incubated: Unacceptable		
Methodology:	Electrophoresis; Qualitative Isoelectric Focusing; Quantitative Immunoturbidimetry		
Performed:	Monday, Wednesday, Friday		
Reported:	2-5 Day(s)		
CPT Codes:	82040 83873 82784x2	82042 83916	
Interpretive Data:	Please see report for interpretive data.		
Components:	93082 - IgG, SERUM 93071 - ALBUMIN, CSF 93096 - ALBUMIN INDEX 93191 - IgG INDEX 93181 - OLIGO BANDS 93182 - INTERPRETATION	93094 - IgG, CSF 93095 - ALBUMIN, SERUM 93097 - IgG SYNTHESIS 93190 - CSF IgG/ALB RATIO 93867 - OLIGO BANDS NUMBER	

Please take note of changes to submit volumes, rejection criteria, stability, methodology and reference range.

Reference Range:

93082 – IgG, SERUM

Age	Reference Range
0-2 years	242-1108 mg/dL
3-4 years	485-1160 mg/dL
5-9 years	514-1672 mg/dL
10-14 years	581-1652 mg/dL
15-18 years	479-1433 mg/dL
19 and older	768-1632 mg/dL

91293 Phosphatidylserine Abs, IgGAM SRC/RRC

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
Rejection Criteria:	Bacterially Contaminated Samples Heat inactivated Hemolyzed specimens Lipemic Samples
Stability:	Ambient: 2 Day(s); Refrigerated: 2 Week(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Semi-Quantitative Enzyme-Linked Immunosorbent Assay
Performed:	Tuesday, Wednesday, Friday, Saturday, Sunday
Reported:	2-4 Day(s)
CPT Codes:	86148
Interpretive Data:	Please see report for interpretive data.
Components:	93585 - PHOSPHATIDYL IgA 93586 - PHOSPHATIDYL IgM 93587 - PHOSPHATIDYL IgG

Please take note of changes to stability and reference range.

Reference Ranges:

93585- PHOSPHATIDYL IgA: <20 APS (IgA antiphosphatidylserine units)
93586- PHOSPHATIDYL IgM: <22 MPS (IgM antiphosphatidylserine units)
93587- PHOSPHATIDYL IgG: <16 GPS (IgG antiphosphatidylserine units)

2739 Procalcitonin NT

Specimen:	
Collect:	**One SST** Also Acceptable One PPT White Top (EDTA)
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 within 2 hours of collection
Stability:	Ambient: 1 Day(s); Refrigerated: 2 Day(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Electrochemiluminescence Immunoassay (ECLIA)
Performed:	Sun-Sat
Reported:	1-2 Day(s)
CPT Codes:	84145
Interpretive Data:	General Reference Range : 0.02-0.08 ng/mL Procalcitonin Interpretation: <0.5 ng/mL - Associated with low risk for progression to severe sepsis on the first day of ICU admission. This does not exclude an infection, especially with localized infections without systemic signs that could be associated with such low concentrations or in cases of initial stages of infection (<6hrs). 2.0 ng/mL - Associated with a high risk for progression to severe sepsis and/or septic shock. Biotin in specimens taken from patients on high-dose biotin therapy or supplements may intefere with this test and cause inaccurate test results. It is recommended that for patients receiving therapy with high biotin doses (> 5 mg/day), no laboratory test specimen should be collected until at least 8 hours after the last biotin administration.

New test available for order.

93845 Procalcitonin DC

Please take note test is being discontinued and replaced with Test# 2739 Procalcitonin.