

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 <u>www.interpathlab.com</u>

Effective Date: October 18, 2021



		NC	CC	СРТ	SRC	RRC	NT	DT	AOE
		nge	Component Change	CPT Change	Specimen Requirements Change	Reference Range Change	New Test	Discontinued Test	Ask on Order Entry Questions
Order Code	Test Name	Name Change	Corr Chai	СРТ	Spe Req Cha	Refe Ran	New	Disco Test	Ask Entr Que
1942	Basic Metabolic Panel					•			
1462	BUN + Creatinine					•			
1943	Comprehensive Metabolic Panel					•			
1100	Creatinine Clearance					•			
1080	Creatinine with GFR					•			
73030	Drug Screen, Targeted Urine Pain Management						٠		
74000	Medication Management Expanded, Urine Confirmation						٠		•
74005	Medication Management Expanded with TCA, Urine Confirmation						•		•
74042	Mitragynine, Urine Confirmation						•		
1941	Renal Function Panel					•			
94301	Synthetic Cannabinoid Metabolites, Qualitative Urine						•		
70160	Synthetic Cannabinoid Metabolites Screen, Urine							•	



1942 Basic Metabolic Panel

Specimen: Collect: One SST Also Acceptable One Green Top (Li Heparin) 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: Allow specimen to clot completely at room temperature Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP Cap sample to avoid evaporation. Rejection Criteria: EDTA plasma Grossly Hemolyzed Samples Stability: Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 2 Week(s); Incubated: Unacceptable Methodology: See Individual Components Performed: Mon-Fri Reported: 1-2 Day(s) CPT Codes: 80048 Interpretive Data: Please see report for interpretive data. Components: 1026 - SODIUM 1027 - POTASSIUM 1024 - CHLORIDE 1025 - CARBON DIOXIDE 1030 - ANION GAP 1023 - GLUCOSE 1022 - UREA NITROGEN 1014 - CREATININE, SERUM 1040 - GFR ESTIMATION 1029 - BUN/CREAT.RATIO 1016 - CALCIUM

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

- GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.
- GFR = 60-89: Kidney damage with mild decreased GFR.
- GFR = 30-59: Moderate decreased GFR.
- GFR = 15-29: Severe decreased GFR.
- GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



1462 BUN + Creatinine

Specimen: Collect: One SST Also Acceptable One Green Top (Li Heparin) One Green Top (Na Heparin) 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. Rejection Criteria: Grossly Hemolyzed Samples Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable Stability: Methodology: Colorimetric; Kinetic Performed: Mon-Fri Reported: 1-3 Day(s) CPT Codes: 82565 84520 Interpretive Data: Please see report for interpretive data. 1022 - UREA NITROGEN 1014 - CREATININE, SERUM Components: 1040 - GFR ESTIMATION 1029 - BUN/CREAT.RATIO

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.

GFR = 60-89: Kidney damage with mild decreased GFR.

GFR = 30-59: Moderate decreased GFR.

GFR = 15-29: Severe decreased GFR.

GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



1943 Comprehensive Metabolic Panel

Specimen:				
Collect:	One SST			
	Also Acceptable One Green Top (Li Heparin) 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:	Allow specimen to clot completely at room temperature Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP Cap sample to avoid evaporation.			
Rejection Criteria:	EDTA plasma Hemolyzed specimens			
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 2 Week(s); Incubated: Unacceptable			
Methodology:	See Individual Components			
Performed:	Sun-Sat	Sun-Sat		
Reported:	1-2 Day(s)			
CPT Codes:	80053			
Interpretive Data	Please see report for interpretive data.			
Components:	1023 - GLUCOSE	1022 - UREA NITROGEN		
	1014 - CREATININE, SERUM 1029 - BUN/CREAT.RATIO	1040 - GFR ESTIMATION 1016 - CALCIUM		
	1029 - BON/CREAT.RATIO	1018 - CALCIOM 1026 - SODIUM		
	1024 - CHLORIDE	1020 - OODIOM 1030 - ANION GAP		
	1020 - PROTEIN	1021 - ALBUMIN		
	1031 - GLOBULIN	1028 - A/G RATIO		
	1019 - BILIRUBIN, TOTAL	1011 - ALKALINE PHOS		
	1010 - AST(SGOT)	1025 - CARBON DIOXIDE		
	2046 - ALT(SGPT)			

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

- GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.
- GFR = 60-89: Kidney damage with mild decreased GFR.
- GFR = 30-59: Moderate decreased GFR.
- GFR = 15-29: Severe decreased GFR.
- GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



1100 Creatinine Clearance

RRC

Specimen:			
Collect:	One SST		
	Timed Urine in Timed Urine Container		
	Also Acceptable		
	One Red Top		
Submit:	1 mL (Min:0.5 mL) Serum. Submit Refrigerated. Submit in a Standard Transport Tube. 10 mL (Min:5 mL) Aliquot(s) Timed Urine in Sterile Specimen Container. Submit Refrigerated.		
Special Handling:	24 HR Urine Collection Preferred		
	Keep Specimen Refrigerated During Collection State Height	1	
	State Volume		
	State Weight		
	State number of hours of collection.		
Rejection Criteria:	Serum specimen must be collected within 24 hours of urine collection start or finish.		
Stability:	Ambient: 8 Hour(s); Refrigerated: 6 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable		
Methodology:	Colorimetric; Kinetic		
Performed:	Mon-Fri		
Reported:	1-3 Day(s)		
CPT Codes: 82575			
nterpretive Data	a: Please see report for interpretive data.		
Components:	1069 - CREATININE, SERUM	1040 - GFR ESTIMATION	
-	1111 - CREAT CLEAR	2490 - VOLUME (ML)	
	2491 - HRS OF COLLECTION	2498 - CREATININE, URINE	
	2499 - BODY SURFACE AREA		

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.

GFR = 60-89: Kidney damage with mild decreased GFR.

GFR = 30-59: Moderate decreased GFR.

GFR = 15-29: Severe decreased GFR.

GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



1080 Creatinine with GFR

Specimen: Collect: One SST Also Acceptable One Green Top (Li Heparin) One Green Top (Na Heparin) 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 GFR is a calculation Can add to a previous Serum Creatinine Result. To estimate the glomerular filtration rate for African Americans, multiply the result provided by 1.21 Rejection Criteria: Hemolyzed specimens Ambient: 8 Hour(s); Refrigerated: 7 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable Stability: Methodology: Performed: Mon-Fri Reported: 1-3 Day(s) CPT Codes: 82565 Interpretive Data: Please see report for interpretive data. 1014 - CREATININE, SERUM Components: 1040 - GFR ESTIMATION

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.

GFR = 60-89: Kidney damage with mild decreased GFR.

GFR = 30-59: Moderate decreased GFR.

GFR = 15-29: Severe decreased GFR.

GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



	ug Screen, Targeted Urine Pair	n wanagement	N
Specimen:			
Collect:	Random Urine in Sterile Specimen Container		
Submit:	10 mL (Min:4 mL) Random Urine. Subr	nit Refrigerated.	
Special Handling:	Avoid freeze and thaw cycles.		
Stability:	Ambient: Unacceptable; Refrigerated: 3 Day(s); F	rozen: 1 Week(s); Incubated: Unacceptable	
lethodology:	Enzyme Immunoassay (EIA); Liquid Chromatogra	aphy Mass Spectrometry	
Performed:	Monday, Wednesday, Friday		
Reported:	2-7 Day(s)		
CPT Codes:	80307		
nterpretive Data	Please see report for interpretive data.		
Components:	7022 - BARBITURATES	7031 - ALCOHOL, URINE	
-	7024 - CANNABINOIDS	7032 - CREATININE, URINE	
	73021 - CARISOPRODOL	73011 - CLONAZEPAM	
	73039 - NORMEPERIDINE	73068 - METHYLPHENIDATE	
	73047 - NORBUPRENORPHINE	73048 - NORFENTANYL	
	73056 - MEPROBAMATE	73077 - DIHYDROCODEINE	
	73078 - PROPOXYPHENE	73012 - 6-ACETYLMORPHINE	
	73013 - 7-AMINOCLONAZEPAM	73014 - A-OH-ALPRAZOLAM	
	73016 - ALPRAZOLAM	73017 - AMPHETAMINE	
	73018 - A-OH-MIDAZOLAM	73019 - BENZOYLECGONINE	
	73022 - BUPRENORPHINE	73023 - CODEINE	
	73024 - DIAZEPAM	73026 - FENTANYL	
	73027 - GABAPENTIN	73028 - HYDROCODONE	
	73029 - HYDROMORPHONE	73032 - LORAZEPAM	
	73033 - MDA	73036 - MDEA-EVE	
	73037 - MDMA-ECSTASY	73042 - METHADONE	
	73043 - METHAMPHETAMINE	73044 - MIDAZOLAM	
	73049 - MORPHINE	73051 - NALOXONE	
	73052 - NORDIAZEPAM	73053 - NORHYDROCODONE	
	73058 - NOROXYCODONE	73059 - NOROXYMORPHONE	
	73061 - OXAZEPAM	73062 - OXYCODONE	
	73063 - OXYMORPHONE	73064 - PHENCYCLIDINE	
	73066 - PHENTERMINE	73067 - PREGABALIN	
	73069 - TAPENTADOL	73071 - TAPENTADOL-O-SULF	
	73072 - TEMAZEPAM	73073 - TRAMADOL	
	73074 - ZOLPIDEM	73076 - ZOLPIDEM P-4-COOH	



74000	Medication Management Expanded, Urine Confirmation	NT/AOE
Specimen:		
Collect:	Dandam Uring in Starile Specimen Container	

Collect:	Random Urine in Sterile Specimen Container		
Submit:	10 mL (Min:3 mL) Random Urine. Submit Refrigerated.		
Special Handling:	Avoid Repeated Freeze/Thaw Cycles		
Rejection Criteria:	Urine stabilized with additives or preservatives		
Stability:	Ambient: Unacceptable; Refrigerated: 3 Day(s); F	Frozen: 1 Week(s); Incubated: Unacceptable	
Methodology:	Liquid Chromatography Mass Spectrometry		
Performed:	Mon-Fri		
Reported:	1-6 Day(s)		
CPT Codes:	82570 G0483		
nterpretive Data	Please see report for interpretive data.		
Components:	74066 - MDAMPHETAMINE	74067 - MDMETHAMPHET	
	74124 - TRAMADOL	74122 - TAPENTADOL	
	74054 - PROPOXYPHENE-U-Q	74027 - PHENCYCLIDINE-U-Q	
	74051 - NOROXYCODONE	74052 - OXYCODONE	
	74053 - OXYMORPHONE	74032 - CODEINE	
	74036 - HYDROCODONE	74037 - HYDROMORPHONE	
	74043 - MORPHINE	74049 - NORHYDROCODON	
	74119 - MEPERIDINE-U-Q	74034 - FENTANYL	
	74048 - NORFENTANYL	74033 - METHADONEMET	
	74041 - METHADONE	74021 - CARISOPRODOL	
	74023 - MEPROBAMATE	74062 - COCAINEMET-U-Q	
	74008 - 7AMCLONAZEPAM	74009 - AOHALPRAZOLAM	
	74012 - LORAZEPAM	74013 - NORDIAZEPAM	
	74012 - OXAZEPAM	74016 - TEMAZEPAM	
	74031 - BUPRENORPHINE	74047 - NORBUPRENORPH	
	74004 - BUTALBITAL	74006 - PHENOBARBITAL	
	74007 - SECOBARBITAL	74059 - AMPHETAMINE	
	74007 - SECOBARDITAL 74064 - METHAMPHET	74039 - AMI HE FAMILY 74028 - 6ACETYLMORPH-U-Q	
	74018 - ETHYLGLUCURON	74020 - OKCETTEMORTHO-Q 74019 - ETHYLSULFATE	
	74018 - ETTTEGEOCORON 74022 - CYCLOBENZAPRN-U-Q	74013 - DEXMETHORPHAN	
	74038 - LEVORPHANOL	74003 - DEXMETHOR HAR 74001 - GABAPENTIN	
	74030 - LE VORTHANOL 74024 - KETAMINE	74001 - GABAFEININ 74026 - NORKETAMINE	
	74022 - MITRAGYNINE-U-Q	74068 - MPHENIDATE	
	74072 - RITALINICACID	74000 - MI TIENDATE 74044 - NALOXONE-U-Q	
	74029 - 6BNALTREXOL	74044 - NALOXONE-0-Q	
	74029 - OBNALTREXOL	74002 - PREGABALIN	
	74009 - NORTRIPTTLINE 74017 - 11N9COOHTHC-U-Q	74002 - PREGADALIN 74101 - ACFENTANYL	
	74102 - ACNORFENTANYL	74101 - ACPENTANTL 74126 - ZOLPIDEM	
	74102 - ACNORPENTANTL 7012 - CREATININE, URINE		

See attached compendium for AOE



74005 Medication Management Expanded with TCA, Urine Confirmation NT/AOE

Specimen:			
Collect:	Random Urine in Sterile Specimen Co	ontainer	
Submit:	10 mL (Min:3 mL) Random Urine. Submit Refrigerated.		
Special Handling:	Avoid Repeated Freeze/Thaw Cycles		
Rejection Criteria:	Urine stabilized with additives or preservatives		
Stability:	Ambient: Unacceptable; Refrigerated: 3 Day(s);	Frozen: 1 Week(s); Incubated: Unacceptable	
Methodology:	Liquid Chromatography Mass Spectrometry		
Performed:	Mon-Fri		
Reported:	1-6 Day(s)		
CPT Codes:	82570	G0483	
nterpretive Data:	Please see report for interpretive data.		
Components:	74066 - MDAMPHETAMINE	74067 - MDMETHAMPHET	
•	74124 - TRAMADOL	74122 - TAPENTADOL	
	74054 - PROPOXYPHENE-U-Q	74027 - PHENCYCLIDINE-U-Q	
	74051 - NOROXYCODONE	74052 - OXYCODONE	
	74053 - OXYMORPHONE	74032 - CODEINE	
	74036 - HYDROCODONE	74037 - HYDROMORPHONE	
	74043 - MORPHINE	74049 - NORHYDROCODON	
	74119 - MEPERIDINE-U-Q	74034 - FENTANYL	
	74048 - NORFENTANYL	74033 - METHADONEMET	
	74041 - METHADONE	74021 - CARISOPRODOL	
	74041 - METHADONE 74023 - MEPROBAMATE	74021 - CARISOFRODOL 74062 - COCAINEMET-U-Q	
	74023 - MEPROBAMATE 74008 - 7AMCLONAZEPAM	74002 - COCAINEINET	
	74008 - TAMOLONAZEPAM	74013 - NORDIAZEPAM	
	74031 - BUPRENORPHINE	74047 - NORBUPRENORPH	
	74004 - BUTALBITAL	74006 - PHENOBARBITAL	
	74007 - SECOBARBITAL	74059 - AMPHETAMINE	
	74064 - METHAMPHET	74028 - 6ACETYLMORPH-U-Q	
	74018 - ETHYLGLUCURON	74019 - ETHYLSULFATE	
	74022 - CYCLOBENZAPRN-U-Q	74003 - DEXMETHORPHAN	
	74038 - LEVORPHANOL	74001 - GABAPENTIN	
	74024 - KETAMINE	74026 - NORKETAMINE	
	74042 - MITRAGYNINE-U-Q	74068 - MPHENIDATE	
	74072 - RITALINICACID	74044 - NALOXONE-U-Q	
	74029 - 6BNALTREXOL	74046 - NALTREXONE	
	74089 - NORTRIPTYLINE	74002 - PREGABALIN	
	74073 - AMITRIPTYLINE	74077 - CLOMIPRAMINE	
	74078 - DESIPRAMINE	74081 - DOXEPIN	
	74086 - IMIPRAMINE	74079 - DESMETDOXEPIN	
	74094 - TRIMIPRAMINE	74017 - 11N9COOHTHC-U-Q	
	74101 - ACFENTANYL	74102 - ACNORFENTANYL	
	74126 - ZOLPIDEM	7012 - CREATININE, URINE	

See attached compendium for AOE



NT

74042 Mitragynine, Urine Confirmation

Specimen: Collect: Random Urine in Sterile Specimen Container Submit: 10 mL (Min:3 mL) Random Urine. Submit Refrigerated. Special Avoid Repeated Freeze/Thaw Cycles Handling: Rejection Urine stabilized with additives or preservatives Criteria: Stability: Ambient: 1 Week(s); Refrigerated: 1 Month(s); Frozen: 24 Month(s); Incubated: Unacceptable Methodology: Liquid Chromatography Mass Spectrometry Performed: Mon-Fri 1-6 Day(s) Reported: CPT Codes: 80323 Interpretive General Reference Range : <1 ng/mL Data: Values listed in the reference/normal range indicate a laboratory reporting cutoff. Result below the cutoff value (negative) may indicate non-use, poor timing of specimen collection, poor absorption, specimen dilution, specimen adulteration, or testing limitation. Quantitative results are reported only when equal to or above cutoff value. For medical purpose only. Methodology: Quantitative Liquid Chromatography Tandem Mass Spectrometry. Test developed and validated by Interpath Laboratory. Questions can be directed to laboratory.



1941 Renal Function Panel

Specimen:			
Collect:	One SST		
	Also Acceptable One Red Top		
Submit:	1 mL (Min:0.5 mL) Serum. Submit R	efrigerated. Submit in a Standard Transport Tube.	
Special Handling:	Allow specimen to clot completely at room temperature Avoid Repeated Freeze/Thaw Cycles Separate from cells ASAP		
Rejection Criteria:	Grossly Hemolyzed Samples		
Stability:	See Individual Components		
Methodology:	See Individual Components		
Performed:	Mon-Fri		
Reported:	1-3 Day(s)		
CPT Codes:	PT Codes: 80069		
Interpretive Data	Please see report for interpretive data.		
Components:	1021 - ALBUMIN	1016 - CALCIUM	
-	1025 - CARBON DIOXIDE	1024 - CHLORIDE	
	1014 - CREATININE, SERUM	1040 - GFR ESTIMATION	
	1023 - GLUCOSE	1012 - PHOSPHORUS, INORG	
	1027 - POTASSIUM	1030 - ANION GAP	
	1029 - BUN/CREAT.RATIO	1026 - SODIUM	
	1022 - UREA NITROGEN		

Please note change to reference range for 1040 GFR ESTIMATION. Reference Range Changes:

ESTIMATED GFR Reference Range:

GFR = Greater than or equal to 90: Kidney damage with normal or increased GFR.

GFR = 60-89: Kidney damage with mild decreased GFR.

GFR = 30-59: Moderate decreased GFR.

GFR = 15-29: Severe decreased GFR.

GFR = Less than 15: Kidney Failure.

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method.



DT

NT

70160 Synthetic Cannabinoid Metabolites, Screen Urine

94301 Synthetic Cannabinoid Metabolites, Qualitative Urine

Specimen:

Specimen.		
Collect:	Random Urine in Sterile Specimen Container	
Submit:	3 mL (Min:1.5 mL) Random Urine. Submit in a Standard Transport Tube.	
Stability:	Ambient: 1 Month(s); Refrigerated: 1 Month(s); Frozen: 1 Month(s); Incubated: Unacceptable	
Methodology:	ethodology: Qualitative Liquid Chromatography - Tandem Mass Spectrometry	
Performed:	Varies	
Reported:	7-10 Day(s)	
CPT Codes:	80352	