

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: April 18, 2023

Order Code	Test Name	NC	CC	CPT	SRC	RRC	NT	DT	AOE
		Name Change	Component Change	CPT Change	Specimen Requirements Change	Reference Range Change	New Test	Discontinued Test	Ask on Order Entry Questions
2101	Acetaminophen				◆				
2631	AFP Tumor Marker				◆				
2135	Beta HCG, Quant Serum					◆			
2651	Beta HCG, Tumor					◆			
2110	Carbamazepine				◆				
2109	Digoxin				◆				
2112	Gentamicin, Peak				◆	◆			
2113	Gentamicin, Trough				◆				
2120	Lithium				◆				
2121	Phenobarbital				◆	◆			
2114	Phenytoin				◆				
2044	Salicylate				◆				
2117	Theophylline				◆				
2118	Tobramycin, Peak				◆				
2122	Tobramycin, Trough				◆				
2111	Valproic Acid				◆				
2287	Vancomycin, Peak				◆				
2286	Vancomycin, Trough				◆	◆			

2101 Acetaminophen
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Blue Top (Na Citrate) One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Standard Transport Tube
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 State Patient's Last Dose Reference ranges apply only after 4-hours post ingestion or a half-life value exceeding 4-hours. State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes
Stability:	Ambient: 8 Hour(s); Refrigerated: 2 Day(s); Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Enzyme Immunoassay (EIA); Spectrophotometric
Performed:	Sun-Sat
Reported:	1-2 Day(s)
CPT Codes:	80143 80176
Interpretive Data:	Please see report for interpretive data.
Components:	2701 - ACETAMINOPHEN 2913 - LAST DOSE

Please take note of change to Special Handling.

2631 AFP Tumor Marker
SRC

Specimen:	
Collect:	One SST Also Acceptable One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Red Top One Standard Transport Tube
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
Stability:	Ambient: 5 Day(s); Refrigerated: 14 Day(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Electrochemiluminescence Immunoassay (ECLIA)
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	82105
Interpretive Data:	General Reference Range : 0-7.0 IU/mL The Roche e801 AFP electrochemiluminescent immunoassay is used. Results obtained with different assay methods or kits cannot be used interchangeably.

Please take note of change to Special Handling. Removal on Biotin instructions.

2135 Beta HCG, Quant Serum
RRC

Please take note of change to Manufacturer Updating Lower Limit of Quantification from 0.2 to 0.6.

2651 Beta HCG, Tumor
RRC

Please take note of change to Manufacturer Updating Lower Limit of Quantification from 0.2 to 0.6.

2110 Carbamazepine
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
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 Separate from cells ASAP State Patient's Last Dose State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes.
Stability:	Ambient: 8 Hour(s); Refrigerated: 1 Month(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Enzyme Immunoassay (EIA); Spectrophotometric
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80156
Interpretive Data:	Please see report for interpretive data.
Components:	2710 - CARBAMAZEPINE 2917 - LAST DOSE

Please take note of change to Special Handling, and Rejection Criteria. Test comment "Carbamazepine is potentially toxic at levels greater than 12 ug/mL."

2109 Digoxin
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One SST One Standard Transport Tube
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 State Patient's Last Dose State patient's last dose in hours. Specimens should be collected immediately before next oral dose or at least 6 hours after previous dose. SST ONLY STABLE UP TO 24 HOURS.
Rejection Criteria:	Grossly Hemolyzed Samples Grossly Lipemic Samples
Stability:	Ambient: 8 Hour(s); Refrigerated: 7 Day(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Chemiluminescence; Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80162
Interpretive Data:	Please see report for interpretive data.
Components:	2709 - DIGOXIN 2916 - LAST DOSE

Please take note of change to Special Handling. Test comment "Digoxin is potentially toxic at levels greater than 2.0 ng/mL, but may occur with lower digoxin levels."

2112 Gentamicin, Peak
SRC,RRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
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 State Patient's Last Dose Draw 30 minutes following completion of IV infusion or 60 minutes after an intramuscular injection. State patient's last dose in hours. When adjusting dosage, measure peak and trough levels during the same dosing interval.
Stability:	Ambient: 2 Hour(s); Refrigerated: 6 Week(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80170
Interpretive Data:	Please see report for interpretive data.
Components:	2712 - GENTAMICIN, PEAK 2918 - LAST DOSE, PEAK

Please take note of change to Special Handling. Reference Range low 4. Reference Range High 10. Test comment "Gentamicin, Peak is potentially toxic at levels greater than 12.0 ug/mL."

2113 Gentamicin, Trough
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
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 State Patient's Last Dose Collect just before next scheduled dose. State patient's last dose in hours. When adjusting dosage, measure peak and trough levels during the same dosing interval.
Stability:	Ambient: 2 Hour(s); Refrigerated: 6 Week(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80170
Interpretive Data:	Please see report for interpretive data.
Components:	2713 - GENTAMICIN, TROUGH 2919 - LAST DOSE, TROUGH

Please take note of change to Special Handling. Test comment "Gentamicin, Trough is potentially toxic at levels greater than 2.0 ug/mL."

2120 Lithium
SRC

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: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 State Patient's Last Dose Recommend collection of specimen 10-12 hours post dose or peak 2-4 hours after oral dose. Separate from cells within 4 hours. State patient's last dose in hours.
Rejection Criteria:	Grossly Hemolyzed Samples Use of separator gel tubes.
Stability:	Ambient: 4 Hour(s); Refrigerated: 1 Week(s); Frozen: 12 Month(s); Incubated: Unacceptable
Methodology:	Enzyme Immunoassay (EIA); Spectrophotometric
Performed:	Sun-Sat
Reported:	1-2 Day(s)
CPT Codes:	80178
Interpretive Data:	Please see report for interpretive data.
Components:	2720 - LITHIUM 2926 - LAST DOSE

Please take note of change to Special Handling, and Rejection Criteria. Test comment "Lithium at levels greater than 1.5 mmol/L 12 hours after dose is potentially toxic."

2121 Phenobarbital
SRC,RRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
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 State Patient's Last Dose State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes.
Stability:	Ambient: 8 Hour(s); Refrigerated: 1 Month(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Homogenous Enzyme Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80184
Interpretive Data:	Please see report for interpretive data.
Components:	2721 - PHENOBARBITAL 2927 - LAST DOSE

Please take note of change to Special Handling, Rejection Criteria, and Generic Reference Range Low of 10 and High 40. Test comment "Phenobarbital is potentially toxic at levels greater than 60.0 ug/mL."

2114 Phenytoin
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
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 State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes.
Stability:	Ambient: 8 Hour(s); Refrigerated: 1 Month(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80185
Interpretive Data:	Please see report for interpretive data.
Components:	2714 - PHENYTOIN 2920 - LAST DOSE

Please take note of change to Special Handling and Rejection Criteria. Test comment "Phenytoin is potentially toxic at levels greater than 20.0 ug/mL."

2044 Salicylate
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One SST One Standard Transport Tube
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 SST ONLY STABLE UP TO 24 HOURS. State patient's last dose in hours.
Stability:	Ambient: 2 Hour(s); Refrigerated: 2 Day(s); Frozen: 6 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80179
Interpretive Data:	Please see report for interpretive data.
Components:	2744 - SALICYLATE, SERUM 2912 - LAST DOSE

Please take note of change to Special Handling. Test comment "Salicylic Acid is potentially toxic at levels greater than 30.0 mg/dL."

2117 Theophylline
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One SST One Standard Transport Tube
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 State Patient's Last Dose State patient's last dose in hours. SST ONLY STABLE UP TO 24 HOURS.
Stability:	Ambient: 8 Hour(s); Refrigerated: 1 Month(s); Frozen: 3 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80198
Interpretive Data:	Please see report for interpretive data.
Components:	2717 - THEOPHYLLINE 2923 - LAST DOSE

Please take note of change to Special Handling. Test comment "Theophylline is potentially toxic at levels greater than 20.0 ug/mL."

2118 Tobramycin, Peak
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Standard Transport Tube
Submit:	1 mL (Min:0.5 mL) Serum. Submit Frozen. Submit in a Standard Transport Tube. Also Acceptable 1 mL (Min:0.5 mL) Plasma. Submit Frozen. Submit in a Standard Transport Tube.
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Critical Frozen Separate from cells ASAP State Patient's Last Dose Sample should be drawn 60-90 minutes after an intramuscular injection, 30-60 minutes after an intravenous infusion. State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes
Stability:	Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80200
Interpretive Data:	Please see report for interpretive data.
Components:	2718 - TOBRAMYCIN, PEAK 2924 - LAST DOSE, PEAK

Please take note of change to Special handling. Test comment "Tobramycin, Peak is potentially toxic at levels greater than 12.0 ug/mL."

2122 Tobramycin, Trough
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Standard Transport Tube
Submit:	1 mL (Min:0.5 mL) Serum. Submit Frozen. Submit in a Standard Transport Tube. Also Acceptable 1 mL (Min:0.5 mL) Plasma. Submit Frozen. Submit in a Standard Transport Tube.
Special Handling:	Avoid Repeated Freeze/Thaw Cycles Critical Frozen Separate from cells ASAP State Patient's Last Dose Sample should be drawn 3-5 hours prior to next dose. State patient's last dose in hours.
Rejection Criteria:	Use of separator tubes
Stability:	Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 1 Month(s); Incubated: Unacceptable
Methodology:	Homogeneous enzyme immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80200
Interpretive Data:	Please see report for interpretive data.
Components:	2722 - TOBRAMYCIN, TROUGH 2928 - LAST DOSE, TROUGH

Please take note of change to Special Handling. Test comment "Tobramycin, Trough is potentially toxic at levels greater than 2 ug/mL."

2111 Valproic Acid
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Blue Top (Na Citrate) One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) Four Lavender (EDTA) One Pink Top (EDTA) One SST
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 State Patient's Last Dose For trough level specimens should be collected just before next scheduled dose. Peak is 1-3 hours after oral dose. SST ONLY STABLE UP TO 24 HOURS. State patient's last dose in hours.
Stability:	Ambient: 2 Hour(s); Refrigerated: 2 Day(s); Frozen: 12 Month(s); Incubated: Unacceptable
Methodology:	Immunoassay
Performed:	Mon-Fri
Reported:	1-3 Day(s)
CPT Codes:	80164
Interpretive Data:	Please see report for interpretive data.
Components:	2711 - VALPROIC ACID 2911 - LAST DOSE

Please take note of change to Special Handling. Test comment “Valproic acid serum concentrations of 50–100 µg/mL effectively control generalized and partial seizures in most patients. Seizure control may improve at levels greater than 100 µg/mL, but toxicity may occur at levels of 100–150 µg/mL.”

2287 Vancomycin, Peak
SRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA)
Submit:	1 mL (Min:0.5 mL) Serum. Submit Frozen. Submit in a Standard Transport Tube. Also Acceptable 1 mL (Min:0.5 mL) Plasma. Submit Frozen. Submit in a Standard Transport Tube.
Special Handling:	State Patient's Last Dose Specimen should be drawn within 0.5-2 hours after an infusion. If IM injection is given, check with attending physician; collection times vary. State patient's last dose in hours.
Rejection Criteria:	Grossly Hemolyzed Samples Use of separator tubes.
Stability:	Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 2 Week(s); Incubated: Unacceptable
Methodology:	Fluorescence Polarization Immunoassay (FPIA); Immunoassay
Performed:	Sun-Sat
Reported:	1-2 Day(s)
CPT Codes:	80202
Interpretive Data:	Please see report for interpretive data.
Components:	2288 - VANCOMYCIN, PEAK 2289 - LAST DOSE, PEAK

Please take note of change to Special Handling, and Rejection Criteria. Test comment "Vancomycin, Peak is potentially toxic at levels greater than 30.0 ug/mL."

2286 Vancomycin, Trough
SRC,RRC

Specimen:	
Collect:	One Red Top Also Acceptable One Gray Top One Green Top (Li Heparin) One Green Top (Na Heparin) One Lavender (EDTA) One Pink Top (EDTA) One Standard Transport Tube
Submit:	1 mL (Min:0.5 mL) Serum. Submit Frozen. Submit in a Standard Transport Tube. Also Acceptable 1 mL (Min:0.5 mL) Plasma. Submit Frozen. Submit in a Standard Transport Tube.
Special Handling:	State Patient's Last Dose State patient's last dose in hours. Specimen should be drawn 10 minutes prior to next infusion.
Rejection Criteria:	Grossly Hemolyzed Samples Use of separator tubes.
Stability:	Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 2 Week(s); Incubated: Unacceptable
Methodology:	Fluorescence Polarization Immunoassay (FPIA); Immunoassay
Performed:	Sun-Sat
Reported:	1-2 Day(s)
CPT Codes:	80202
Interpretive Data:	Please see report for interpretive data.
Components:	2291 - VANCOMYCIN, TROUGH 2292 - LAST DOSE, TROUGH

Please take note of change to Special Handling, and Rejection Criteria. Generic Reference Range is Changing from 10-15 to 5-10. Updating Associated flags. Test comment "Vancomycin, Trough is potentially toxic at levels greater than 10.0 ug/mL."