

SPECIMEN LABELING

We have noticed a significant increase in unlabeled or labeling discrepancies with clinical, anatomic and cytology specimens. This causes testing to be delayed while discrepancies are resolved. Labeling discrepancies are very serious, increasing the risk of reporting results on the wrong patient. Some specimens must be rejected to avoid this error.

1. **Please use the patient's full, legal name on the requisition. Do not use nicknames.**
2. **The patient's identification on the specimen must match the patient's identification on the requisition.**
3. The complete date of birth must be on the requisition.
4. The first and last name of the requesting physician must be present.
5. **For Microbiology (cultures), Cytology (Pap Smears and fluids) and Histology (tissue) the source of the specimen must be indicated on the container and requisition.**

Test #302 T3 UPTAKE DISCONTINUED

In accordance with the American Thyroid Association, we will no longer offer T3 Uptake (test #302) on humans or animals, after August 1, 2008.

1. http://www.thyroid.org/professionals/publications/documents/GuidelinesdetectionThyDysfunc_2000.pdf

T3 Uptake (test #302) is an indirect method for assessing unbound T4 (FTI), and **T4 Free (FT4)** directly measures the levels of unbound T4 in the blood. It is the most accurate way to access the level of unbound T4 in the circulation. For our veterinary clients, we are in the process of correlating TSH testing on animals to give an indication of abnormal thyroid function; however, our reference lab, Idexx, does offer a T4 Free, Canine, and that is **test 9278 Vet, FT4, Canine**.

Questions: Contact Dr. Gregory Post
Director of Clinical Services

Test #2203 SYNOVIAL FLUID PROFILE

Test #203 Synovial Fluid Profile has been discontinued, and has been replaced by test #2203. This was changed to incorporate appropriate CPT codes. The Profile includes Glucose, RA Factor, Color, Crystals, WBC, RBC, Differential and Protein.

Specimen: 5.0 mL synovial fluid in EDTA tube AND 5.0 mL synovial fluid in red top, clot tube.

Storage: Refrigerated 1 day.
Testing: Performed Mon-Sat and reported 1-2 days

Reference range: By Report.

CPT codes: 82945, 84157, 83872, 86430, 89050 x2, 89060

Cost: \$25

Questions: Contact Stephanie Gillespie,
Hematology Supervisor

TEST #4216 URINALYSIS REFLEX

Effective October 1, 2008, Physicians Laboratory will be offering a urinalysis test that will automatically reflex to certain tests when indicated. The criteria are:

1. When the leukocyte esterase, blood, nitrite, and/ or protein is positive, urine microscopic will be performed.
2. When the urine microscopic shows >5 WBC and <20 epithelial cells, a urine culture will be performed.

Specimen: 10.0 mL random urine in a **sterile container**

Storage: Refrigerated 1 day
Testing: Performed Mon-Sat and reported 1-2 days

Reference range: By Report.
CPT codes: 81000. Additional codes will apply if culture is performed.

Cost: \$8.00

Questions: Contact Stephanie Gillespie,
Hematology Supervisor

ANTICONVULSANT DRUG TESTING

Beginning October 15, 2008, specimens drawn in SST (gel barrier) tubes will be rejected. Only serum from plain, top red clot tubes will be accepted. The drugs are as follows:

- Test #710 Dilantin (Phenytoin), Total
- Test #357 Dilantin (Phenytoin), Free and Total
- Test #896 Dilantin (Phenytoin) / Phenobarbital
- Test #722 Carbamazepine (Tegretol), Total
- Test #361 Carbamazepine (Tegretol), Free and Total
- Test #718 Phenobarbital (Luminal), Total
- Test #660 Phenobarbital (Luminal), Free and Total
- Test #706 Valproic Acid (Depakane), Total
- Test #880 Valproic Acid (Depakane), Free and Total
- Test #836 Mysoline (Primidone) includes Phenobarbital

Results from SST (gel barrier) tubes may be 5-10% lower than from a plain, red top tube.

Questions: Contact Jan Nelson
Omaha Chemistry Supervisor

WHAT TO ORDER TO TEST FOR ENTEROHEMORRHAGIC COLITIS (EHEC)?

To insure all EHEC serotypes are screened, *"The CDC now recommends testing all stool specimens (regardless of the presence of blood) for E. coli Shiga Toxin."* This test provides better sensitivity than a culture for E.coli 0157:H7.

The most common serotype associated with EHEC is E. coli 0157:H7; however, more than 50 other non-0157 EHEC serotypes can be associated with EHEC. Culturing for only E. coli 0157:H7 will miss approximately 80% of EHEC cases.

TEST # 675	E. coli Shiga Toxin
Specimen:	1 gm fresh stool placed in Para Pak C&S Vial (orange cap) <u>within 1 hour of collection.</u>
Storage:	Refrigerated 3 days.
Testing:	Performed Sun-Sat and reported 2 days
Reference range:	By report.
CPT codes:	87899 87899-59 87015
Cost:	\$55
Questions:	Contact Shari Talbert Microbiology Supervisor

SERUM FREE KAPPA AND LAMBDA LIGHT CHAINS

Immunoglobulins are produced by plasma cells in our bone marrow. They are comprised of a heavy and light chain component which is bound to each other to make a functional antibody. Free light chains are normally present at very low concentrations in the circulation. In conditions such as myeloma or monoclonal gammopathy of undetermined significance (MGUS), excess light chains can enter the bloodstream. The quantity can be linked to the activity of the plasma cells. Light chains are more sensitive than serum/urine protein electrophoresis or immunofixation in detecting early plasma cell dyscrasias. They are also more sensitive when following response to treatment or relapse of myeloma.

Currently we send this test to Mayo Medical Laboratories (MML), but during September, we are reporting out parallel results from both MML and Physicians Laboratory Services as we plan on switching this test to "in-house"

Effective October 1, 2008:

Test #7700	Immunoglobulins Free Light Chains, Serum
Specimen:	1.0 mL serum
Storage:	Frozen.
Reference range:	Kappa 0.33 – 1.94 mg/dL Lambda 0.57 – 2.63 mg/dL Kappa/Lambda Ratio 0.26 – 1.65
CPT codes:	83520 x2
Cost:	\$120.00
Questions:	Contact Jan Nelson, Chemistry Supervisor

NEW BIOHAZARD BAGS AVAILABLE

To help our clients comply with certain specimen requirements, we now have "blue bags" for FROZEN specimens, and "brown" bags" for specimens that require "Protect from Light". To obtain either of these bags, please contact our Supply Dept.

CONFIDENTIAL REPORTS

If you have a patient whose laboratory results should only be viewed by certain personnel at your facility, please follow this protocol:

1. Submit the test request under an identification number you have devised. It is the client's responsibility to match results to the identification number. We suggest using your account number, hyphen, and then start with 0001. Example: 0010-0001.
Note: Do not use the patient's social security number.
2. On the requisition, specify how (by mail, fax, etc.) and to whom the results are to be sent.
3. On the requisition, mark through your account number, and write acct. number "15". This insures the report is only printed at Physicians Laboratory, and we will direct the report to the individual you have specified.

Notes: To obtain total confidentiality, we must bill the client and not the patient's insurance. If the test is one where the patient's test results must be reported to the state, e.g. HIV positive, other sexually transmitted diseases (Chlamydia, Gonorrhea), you will be contacted by the state to provide patient information.

Questions: Contact Betsy Hildebrandt
Client Services Coordinator

WE'RE PROUD TO ANNOUNCE

Physicians Laboratory Services in Omaha was selected by Olympus Diagnostics as a beta testing site for the new AU3000i immunoassay analyzer. Our facility was the first site in the US chosen for placement of this instrument. Thyroid assays (TSH, FT4, T4) were first evaluated and compared to our "in-house" assays. The instrument performed up to expectations and provided us with logistical advantages regarding handling of the specimens. These findings were presented by Dr. Gregory Post, Director of Clinical Services, Physicians Laboratory, at the annual American Association of Clinical Chemistry meeting held in Washington DC in July 2008

MEET OUR NEW MARKETING PERSONNEL

Ms. Kacey Moreland has been promoted to the Director of Marketing position. You may have spoken with Kacey in the past since she has served as the Evening Clinical Processing Supervisor for the past six years. Kacey has her BS in Marketing and Masters in Business Administration. **Mr. Vincent Rallis** joins us as a Marketing Representative for the Lincoln and western Iowa regions. "Vinny" comes to Physicians Laboratory with over 20 years sales experience in the pharmaceutical industry.

WOULD YOU LIKE TO RECEIVE THE TECHNICAL BULLETINS AND/OR MEMOS BY E-MAIL?

If you prefer this format, please contact Pam Otto at 402 731-4145, 1-800-642-1117 or email potto@physlab.com