

LAB ORDER MNEMONIC	OE ORDER NAME	TEST PROCEDURE	REFERENCE RANGE	SPECIMEN REQUIREMENTS
BBK ABORH	ABORH BLOOD TYPE	<b>ABORH GROUP (BLOOD TYPE)</b> Methodology: Tube agglutination Set up: Daily, as ordered Report available: Same day  CPT Code: 86900, 86901		6.0 mL whole blood (Pink)
		<b>ACA or ACLA -</b> See Anti-Cardiolipin Antibodies		
		<b>ACE -</b> see Angiotensin-1 Converting Enzyme		
LAB ACET	ACETAMINOPHEN	<b>ACETAMINOPHEN, SERUM</b> Methodology: Immunoassay Set up: Daily, as ordered Report available: Same day  CPT Code: 80329	Accompanies report	1 mL blood (Gn -Li (PST)) or 1 mL serum (SS) Minimum: 0.5 mL
LAB ACETYL BIND	ACETYLCHOLINE BINDING RECEPT	<b>ACETYLCHOLINE RECEPTOR BINDING ANTIBODIES</b> (QUEST 206) Methodology: RIA Set up: Tues-Sat Report available: 1-2 days  CPT Code: 83519	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL  Allow serum to clot at room temperature. Serum should be separated from cells within 1 hour of collection.
LAB ACETYL BLO	ACETYLCHOLINE BLOCKING RECEPT	<b>ACETYLCHOLINE RECEPTOR BLOCKING ANTIBODIES</b> (QUEST 34459) Methodology: RIA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83519	Accompanies report	1.0 mL serum (SS) centrifuge with 1 hr of collection  Minimum: 0.5 mL
LAB ACETYL MOD	ACETYLCHOL MODULATING RECEPT	<b>ACETYLCHOLINE RECEPTOR MODULATING ANTIBODY</b> (QUEST 26474) Methodology: RIA Set up: Tue, Thur, Sun Report available: 5 days CPT Code: 83519	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB ACETYL	ACETYL-CHOLINESTERASE	<b>ACETYLCHOLINESTERASE, QUALITATIVE, GEL ELECTROPHORESIS</b> (QUEST 185314) <i>This test is automatically performed on all Alpha-Fetoprotein amniotic fluids with a MoM greater than 1.99</i> Methodology: Gel Electrophoresis Set up: Tues, Thurs evening Report available: Next Day  CPT Code: 82664	Negative	1.5 mL Amniotic fluid, <b>ROOM TEMP</b>  Minimum: 0.5 mL
LAB SALIC	SALICYLATE	<b>ACETYLSALICYLIC ACID (SALICYLATE)</b> Methodology: Colorimetric Detection Limit: 3.9 mb/dL Set up: Daily Report available: Same day  CPT Code: 80329	Therapeutic range: 0-30 mg/dL  Toxic: Greater than 41 mg/dL	1 mL serum (SS) or  1 mL blood (Gn-Li (PST))
		<b>ACID-FAST (TB) CULTURE -</b> See Culture, Acid-Fast (TB)		
LAB AFBST		<b>ACID-FAST (TB) SMEAR</b> Methodology: Smear Set up: Sun-Sat 9:00AM - 3:00PM Reports available: Next day if clinically indicated  CPT Code: 87206	No acid-fast bacilli observed	Minimum: Primary specimen (sputum, exudates, hear-fixed smear, or complete first morning urine)

LAB ACID PHOS -PAP	PROSTATIC ACID PHOSPHATASE	<b>ACID PHOSPHATASE, PROSTATIC (PAP)</b> (QUEST 7812) Methodology: Immunoassay Set up: Mon-Fri pm Report available: Next day  CPT Code: 84066	Accompanies report	1mL serum (SS), <b>FROZEN*</b>  Minimum: 0.5 mL
LAB ACTH	ACTH	<b>ACTH ADRENOCORTICOTROPIC HORMONE</b> (QUEST 211) Methodology: Immunoassay Set up: Mon-Fri am Report available: 2 days  CPT Code: 82024	Accompanies report	1.5 mL EDTA plasma (L) <b>FROZEN</b> [Collect between 7a and 10a, if drawn at any other time reference ranges do not apply.] Maintain collection tube in as ice bath before and after collection of blood. Mix well and centrifuge at 4 C, separate plasma from cells, store and ship plasma frozen in plastic vial.  Minimum: 0.5 mL
LAB ACTH STIM PANEL	ACTH STIMULATION PANEL	<b>ACTH STIMULATION PANEL</b> Methodology: Chemiluminescence Set up: Daily Report available: Same Day CPT Code: 80400	Cortisol,Baseline: >5 ug/dL Cortisol, 30 Minutes: >20 ug/dL Cortisol,1 Hour: >20 ug/dL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Collect Baseline specimen. Collect 30 minute and 1 hour specimens post administration of 250 mg Cortrosyn <b>Do not collect, testing must be scheduled through SSU by Office</b>
LAB PTT	PARTIAL THROMBOPLASTIN TIME	<b>ACTIVATED PARTIAL THROMBOPLASTIN TIME (APTT)</b> Methodology: Optical detection clotting assay Set up: Daily Report available: Same day  NOTE: Drawing blood through an indwelling catheter risks heparin contamination of the specimen. Flush the line with saline and draw 5 mL blood before Coagulation specimens are drawn  CPT Code: 85610	23.2 to 27.1 seconds	2.7 mL plasma (LB) <b>FROZEN</b>  Draw blood into light blue top tube, filling tube to the blue line indicated on the tube label. Centrifuge, remove plasma, and freeze if not tested within 4 hours of collection.
		<b>ADAPIN</b> -See Doxepin		
LAB ADA FLUID	ADENOSINE DEAMINASE PLEURAL FL	<b>ADENOSINE DEAMINASE, PLEURAL FLUID</b> (QUEST 17696) Methodology: Kinetic Set up: Mon - Fri am Report available: 1 day  CPT Code: 84311	Accompanies report	0.5 mL pleural fluid in sterile, plastic, screw-capped vial <b>FROZEN</b>  Minimum: 0.1 mL
LAB ADENOVIRUS AB	ADENOVIRUS ANTIBODY SERUM	<b>ADENOVIRUS ANTIBODY GROUP</b> (QUEST 0382) Methodology: CF Set up: Mon-Fri am Report available: 3 days  CPT Code: 86603	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB ADENOVIRUS CULT	ADENOVIRUS CULTURE	<b>ADENOVIRUS CULTURE</b> (QUEST 759) Methodology: Rapid Culture Set up: Daily, am Report available: 4 days  CPT Code: 87254	Accompanies report	3 mL Conjunctival swab in VCM transport tube, 2.5 mL nasal aspirate in sterile container, 3 mL stool in viral transport media, or 3 mL throat swab in M4 Multiuse viral transport medium, or 50 mL first-morning urine in sterile container, or Bronchial lavage/wash in M4 transport media.
		<b>AFB Culture</b> - See Culture, Acid- Fast		
		<b>AFB Smear</b> - See Acid-Fast (TB) Smear. Smear is included in AFB Culture		
		<b>AFP</b> - See Alpha-Fetoprotein		
		<b>AIDS</b> - See HIV		

LAB SGPT	ALANINE AMINOTRANSFERASE	<b>ALANINE AMINOTRANSFERASE (ALT) (SGPT)</b> Methodology: Kinetic Set up: Daily Report available: Same day  CPT Code: 84460	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB ALB	ALBUMIN	<b>ALBUMIN</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 82040	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB ALB-CREA	URINE ALBUMIN CREATININE RATIO	<b>ALBUMIN/CREATININE RATIO</b> Methodology: Turbidometric/Colorimetric Set up: Daily Report available: Same day  CPT Code: 82043, 82570	Accompanies report	10mL random urine
LAB BFALB	ALBUMIN BODY FLUID	<b>ALBUMIN, BODY FLUID</b> Performed at York Hospital Methodology: Colorimetric Set up: Daily Report available: Next day  CPT Code: 82042	Accompanies report	2 mL fluid, no preservative
LAB ALCOHOL	ALCOHOL SERUM	<b>ALCOHOL, ETHYL (SERUM)</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 80320	None detected	1 mL serum (SS) Minimum 0.5 mL  When collecting blood , the arm should be cleansed with a non-alcohol cleansing agent.
LAB U ALCOHOL	URINE ALCOHOL	<b>ALCOHOL, ETHYL (URINE)</b> (QUEST 13867) Detection Limit: 0.02 g/dL Methodology: Immunoassay Set up: Mon-Fri Report available: Next day  CPT Code: G0479	None detected	20 mL urine  Minimum: 5 mL
LAB ALCOHOL UR	ALCOHOL URINE BY GCMS	<b>ALCOHOL, ETHYL, URINE BY GCMS FOR RANDOM URINE</b> (QUEST 19938) Detection Limit: 20 mg/dL Methodology: GC Set up: Mon-Fri am Report available: 2 days  CPT Code: 80320	Accompanies report	10 mL random urine <b>ROOM TEMPERATURE</b> Minimum: 0.5 mL
LAB ISOPROPANOL BLD	ISOPROPANOL BLOOD	<b>ALCOHOL, ISOPROPYL, BLOOD</b> (QUEST 7821) <i>Includes acetone, if present</i> Methodology: Chromatography Detection Limit: 0.005 g/DI Set up: Mon - Fri pm Report available: 2 days  CPT Code: 84600	Accompanies report	5 mL blood (L) <b>ROOM TEMPERATURE</b> Minimum: 1 mL  When collecting blood, the arm should be cleansed with a non-alcohol cleansing agent.
LAB METHANOL	METHANOL	<b>ALCOHOL, METHYL (METHANOL)</b> (QUEST 4301) Methodology: Chromatography Detection Limit: 0.005 g/dL Set up : Daily Report available: Next day  CPT Code: 80320	Accompanies report	5 mL whole blood (L)  Minimum: 1 mL  When collecting blood, the arm should be cleansed with a nonalcohol cleansing agent.
LAB ALDOLASE	ALDOLASE	<b>ALDOLASE (QUEST 0212)</b> Methodology: Enzymatic Set up: Mon-Fri Report available: Next day  CPT Code: 82085	Accompanies report	2.0 mL serum (SS), centrifuge within 1 hour of collection to avoid hemolysis <b>FREEZE</b>  Minimum: 1 mL
LAB ALDOSTERON	ALDOSTERONE SERUM	<b>ALDOLAT- see Nifedipine</b> <b>ALDOSTERONE</b> (QUEST 53532) Methodology: LC/MS/MS Set up: Mon-Fri pm Report available: 3 days  CPT Code: 82088	Accompanies report	1 mL serum (R)  Minimum: 0.25 mL

LAB ALDOSTERONE UR	ALDOSTERONE 24 HR URINE	ALDOSTERONE, 24 HR URINE (QUEST 13856) Methodology: Extraction, RIA Set up: Sun, Tue Report available: 4 days  CPT Code: 82088	Accompanies report	5 mL aliquot of 24-hr urine, collected without preservatives and maintained at 4 C. Before storing or shipping, add 1 g boric acid/100 mL urine and ship refrigerated.  Minimum: 0.8 mL
LAB ALP	ALKALINE PHOSPHATASE	ALKALINE PHOSPHATASE (ALP, ALK PHOS) Methodology: PNPP Set up: Daily Report available: Same day  CPT Code: 84075	Accompanies report	1 mL blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB ALKPHOSFR	ALK PHOSPHATASE FRACTIONS	ALKALINE PHOSPHATASE FRACTIONATION (TOTAL AND THEMOSTABLE) (QUEST 17514X) Methodology: Kinetic Set up: Daily Report available: Next day  CPT Code: 84075, 84078	Accompanies report	2 mL serum (SS)  Minimum: 2.0 mL
LAB ALK PHOS BONE	ALK PHOS BONE SPECIFIC	ALKALINE PHOSPHATASE, BONE SPECIFIC (QUEST 29498) Methodology: Immunoenzymatic Set up: Mon - Fri pm Report available: Next day  CPT Code: 84075	Accompanies report	1 mL serum (SS) <b>FROZEN</b> Minimum: 0.3 mL  Grossly hemolyzed specimens will be rejected.
LAB ALK ISO	ALK PHOS ISOENZYME	ALKALINE PHOSPHATASE ISOENZYME ELECTROPHORESIS (QUEST 231X) Report includes alkaline phosphatase Methodology: Agarose Electrophoresis Set up: Mon-Fri, Sun pm Report available: Next day  CPT Code: 84075, 84080	Accompanies report	2 mL serum (SS) *overnight fasting is preferred Minimum: 1 mL
		See Appendix A for Allergy Panel Testing available through Quest Diagnostics.  Use Appendix A to determine correct panel. If correct panel cannot be determined, order each allergen separately using Quest test code 534 and specify name of allergen		
LAB ALP 1 ANTI	ALPHA 1 ANTITRYPSIN SERUM	ALPHA-1 ANTITRYPSIN (QUEST 4482) Methodology: Nephelometric Set up: Mon - Sat afternoon Report available: Next day  CPT Code: 82103	83-199 mg/dL	1 mL serum (SS) *overnight fasting is preferred Minimum: 0.5 mL
LAB AAT QUANT	ALPHA 1 ANTI QUANT AND PHENO	ALPHA-1 ANTITRYPSIN (AAT) QUANTITATION AND PHENOTYPE (QUEST 116732) Methodology: Nephelometric, Isoelectric focusing Set up: Mon, Wed, Fri am Report available: 4 days  CPT Code: 82103, 82104	Accompanies report	2 mL serum (SS) *overnight fasting is REQUIRED Minimum: 0.6 mL
LAB A1A FECES	ALPHA 1 ANTI 24 HR FECES	ALPHA-1 ANTITRYPSIN, 24 HOUR FECES (QUEST 535115) Methodology: Nephelometric Set up: Mon-Fri pm Report available: 2 days  CPT Code: 82103	Accompanies report	10 gms of 24 hour feces in 24 hour container <b>FROZEN</b>  Minimum: 2 grams
LAB ALP 1 ANTI STL	ALPHA 1 ANTI RANDOM FECES	ALPHA-1 ANTITRYPSIN, RANDOM FECES (QUEST 535118) Methodology: Nephelometric Set up: Mon-Fri afternoon Report available: 2 days  CPT Code: 82103	Accompanies report	10 grams random feces in plain container <b>FROZEN</b>  Minimum: 2 grams

LAB AAT MUTATION	ALPHA 1 ANTITRYPSIN MUTATION	ALPHA-1 ANTITRYPSIN (AAT) MUTATION ANALYSIS (QUEST 15441) Methodology: Fluorescent Restriction Fragment Length Polymorphism Set up: Mon, Wed, Fri night Report available: 6 days  CPT Code: 81332	Accompanies report	5 mL whole blood ( L )  Minimum: 2 mL
LAB TRIPLE SCREEN	TRIPLE SCREEN	ALPHA-FETOPROTEIN TRIPLE SCREEN PROFILE (AFP, hCG, uE3) (QUEST 7292) Methodology: Calculation & Immunoassay Set up: Mon-Fri Report available: Next day: <b>Patient must be between 16-20 weeks gestation</b>  CPT Code: 82105, 82677, 84702	Accompanies report	1 mL serum (SS) refrigerated. <b>Reject gross hemolysis. FREEZE</b> if greater then 24 hour delay in transporting to the laboratory. It is essential that complete and accurate patient information be included with each test request. Required patient information is as follows: 1. Expectant mothers date of birth 2. Date/time of sample collection 3. Maternal weight (in pounds) 4. Number of fetuses 5. Race 6. Specify if mother is insulin-dependent diabetic 7. Family history of NTD 8. Accurate and complete gestational age.
LAB AFP TUMOR	AFP TUMOR	ALPHA-FETOPROTEIN, TUMOR MARKER (CPAL 1750760) <b>Do not use this Test Code for Evaluation of open neural tube defects and Down Syndrome. Use for Males and Non-pregnant females.</b> Methodology: Chemluminescence Set up: Mon-Fri Report available: 48 hours  CPT Code: 82105	0.0-14.9 ng/mL	1 mL serum (SS) , refrigerated <b>FREEZE</b> if greater then 24 hour delay in transporting to the laboratory.  Minimum: 0.2mL
LAB AFP NTD	MATERNAL SERUM AFP	ALPHA-FETOPROTEIN FOR EVALUATION OF OPEN NEURAL TUBE DEFECT AND DOWN SYNDROME ON MATERNAL SERUM (Quest 5059) Methodology: Immunoassay Set up: Mon - Fri afternoon Report available: 24-48 hours  CPT Code: 82105	Accompanies report	1.0 mL serum (SS), refrigerated. <b>Reject gross hemolysis. FREEZE</b> if greater than 24 hour delay in transporting to the laboratory.  Minimum: 0.5 mL
LAB AFPAMNIO	AMNIO ALPHA FETO PROTEIN	ALPHA-FETOPROTEIN FOR EVALUATION OF OPEN NEURAL TUBE DEFECT AND DOWN SYNDROME ON AMNIOTIC FLUID (QUEST 799314) Methodology: Gel Electrophoresis, RID Set up: Mod-Fri Report available: Next Day  CPT Code: 82106 (If the amniotic fluid AFP MoM is greater then 2.0, an acetylcholinesterase is automatically performed at an additional charge)	Accompanies report	3 mL amniotic fluid <b>ROOM TEMP</b>  Minimum: 1.5 mL
LAB ALPHA GALACT	ALPHA GALACTOSIDASE SERUM	ALPHA-GALACTOSIDASE , SERUM (QUEST 83692) Methodology: Fluorometric Setup: Tues am Report Available: 9 days  CPT Code: 82657	Accompanies report	2 mL serum (R) <b>FROZEN</b>
LAB ALPHA-SUBUNIT	ALPHA SUBUNIT	ALPHA-SUBUNIT (QUEST 8658) Methodology: Electrochemiluminescent Immunoassay Set up: Tues, Fri Report Available: 4-11 days  CPT Code: 82397	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL

LAB ALPRAZOLAM	ALPRAZOLAM SERUM / XANAX	<b>ALPRAZOLAM (XANAX)</b> (QUEST 21592) Methodology: HPLC Detection Limit: 5 ng/mL Set up: Mon, Wed, Fri morning Report available: 4 days  CPT Code: 80346	Accompanies report	2 mL serum (DB,R); protect from light <b>ROOM TEMP</b>  Minimum: 1.0 mL
LAB ALUMINUM	ALUMINUM	<b>ALUMINUM</b> (QUEST 2958) Methodology: Inductively-Coupled Plasma Mass Spectrometry Set up: Mon, Wed, Fri afternoon Report available: 3 days  CPT Code: 82108	Accompanies report	2 mL serum (DB) Draw one DB tube of blood and discard. Draw second tube. Allow to clot in an upright position. Centrifuge and pour (do not pipette) the serum into a metal-free tube (plastic screw-cap).  Minimum: 0.7 mL
		<b>AMEBIC ANTIBODIES - See Entamoeba histolytica Antibodies</b>		
LAB AMIKACIN	AMIKACIN	<b>AMIKACIN</b> (QUEST 236) Methodology: Immunoassay Detection Limit: 0.9 µg/mL Set up: Mon - Sat am Report available: Next day  CPT Code: 80150	Accompanies report	1 mL serum (R) <b>ROOM TEMP</b>  Minimum: 0.2 mL
LAB AMINO ACID	AMINO ACID URINE QUAL	<b>AMINO ACIDS, QUALITATIVE</b> (QUEST 36183X) Methodology: LC/MS Set up: Mon, Tues, Fri am Report available: 5 days  CPT Code: 82139,82570	Accompanies report	2 mL unpreserved random urine (sterile, leakproof container) <b>FROZEN</b>  Minimum: 0.5 mL
LAB AMINO ACID PL	AMINO ACID ANALYSIS PLASMA	<b>AMINO ACIDS ANALYSIS, PLASMA</b> (QUEST 0233) Methodology: LC/MS Set up: Mon - Fri am Report available: 11 days  CPT Code: 82139	Accompanies report	2 mL plasma (Gn Na-Hep) <b>FROZEN</b>  Minimum: 0.25 mL
QUEST 767X Univ. Req.	Universal Requisition	<b>AMINO ACID QUANTITATION, PLASMA</b> Referral test for QUEST Methodology: LC/MS Set up: Mon - Sat Report available: 5-6 days  CPT Code: 82139	Accompanies report	2 mL plasma (Gn Na-Hep) <b>FROZEN</b>  Minimum: 0.3 mL
		<b>ANIMOPHYLLINE -See Theophylline</b>		
LAB AMIODARONE	AMIODARONE SERUM	<b>AMIODARONE GROUP (CARDARONE)</b> (QUEST 36721) <i>Includes desethylamiodarone</i> Methodology: HPLC Detection limit: 0.1 µg/mL Set up: Tues, Thurs, Sat Report available: 2 days  CPT Code: 80299	Accompanies report	3 mL serum (R) Centrifuge and immediately separate serum or plasma specimens from cells into clean, plastic, screw-cap vial. ( <b>SST unacceptable.</b> )  Minimum: 1 mL
LAB AMITRIP	AMITRIPTYLINE SERUM	<b>AMITRIPTYLINE (ELAVIL)</b> (QUEST 423) <i>Includes nortriptyline</i> Methodology: LC/MS/MS Detection limit: 5 ng/mL Set up: Mon - Fri. Report available: Next day  CPT Code: 80335	Accompanies report	3 mL serum (R)  Minimum: 1.5 mL
LAB AMM	AMMONIA	<b>AMMONIA</b> Methodology: Direct Enzymatic Set up: Daily Report available: Same day  CPT Code: 82140	Accompanies report	3 mL plasma (Gn). Place on ice, centrifuge immediately. Keep stoppered at all times. Separate Plasma and store at 2-4 C. Stable for 3 hours.

Univ. Req. <b>LAB MISC</b>	<b>Universal Requisition</b>	<b>AMNIOSTAT</b> Rapid semi-quantitative assay for phosphatidylglycerol (PG) in amniotic fluid. Available on a STAT basis at Lancaster General Hospital. Methodology: slide agglutination Set up: On request Report available: Phone report available from LGH on completion  CPT Code: 84081	Accompanies report	2 mL amniotic fluid
LAB <b>AMOBARBITAL BLD</b>	<b>AMOBARBITAL BLOOD</b>	<b>AMOBARBITAL, BLOOD</b> (QUEST 12261) Methodology: GCMS Set up: Mon,Wed,Fri am Report available: 5 days  CPT Code: 80345	Accompanies report	2 mL serum (R)  Minimum: 0.7 mL
<b>QUEST 4713</b> Univ. Req.	<b>Universal Requisition</b>	<b>AMP CYCLIC</b> (ARUPTC 0070485) Methodology: RIA Set up: Wed Report available: 2 days	Accompanies report	1 mL random urine, <b>FROZEN</b>
LAB <b>AMP SC UR</b>	<b>AMPHETAMINE SCREEN URINE</b>	<b>AMPHETAMINE SCREEN URINE SCREEN</b> (QUEST 18987) Methodology: EMIT Set up: Mon - Sat. am Report available: Next day  CPT Code: G0479	None detected	20 mL urine  Minimum: 10 mL
<b>QUEST 19122</b> Univ. Req.	<b>Universal Requisition</b>	<b>AMPHETAMINE VERIFICATION</b> Methodology: GC/MS Detection limit: 50 ng/mL Set up: Mon-Sat Report available: 3 days  CPT Code: 80359, 80324	Accompanies report	5 mL serum (R) Centrifuge specimen within 1 hr of collection. Immediately separate serum into clean, plastic screw-top vial. Minimum: 3 mL
LAB <b>AMYLASE</b>	<b>AMYLASE</b>	<b>AMYLASE, SERUM</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 82150	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB <b>BFAMYLASE</b>	<b>AMYLASE BODY FLUID</b>	<b>AMYLASE, BODY FLUID</b> Performed at York Hospital Methodology: Enzymatic Set up: Daily Report available: Next day  CPT Code: 82150	Accompanies report	2 mL fluid, no preservative
LAB <b>UAMY</b>	<b>URINE AMYLASE RANDOM</b>	<b>AMYLASE, URINE RANDOM</b> Methodology: Enzymatic Set up: Daily Report available: Same day <b>For 8 hour order UAMY8</b>  CPT Code: 82150	Accompanies report	Timed or random specimen; no preservative  Minimum: 1 mL
LAB <b>AMYLASE FRACT</b>	<b>AMYLASE FRACTIONATED</b>	<b>AMYLASE ISOENZYMES (FRACTIONATED)</b> (QUEST 845) Methodology: Spectrophotometry Set up: Mon - Fri am Report available: Next day  CPT Code: 82150(X2)	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
		<b>AMYTAL - See Amobarbital</b>		
LAB <b>ANA ID</b>	<b>LAB ONLY</b>	<b>ANAEROBIC IDENTIFICATION</b> When unable to identify an anaerobic isolate, organism will be sent to Quest Diagnostics Lab on request. Methodology: Biochemical and microscopic Set up: Mon - Fri. Report available: 1 week  CPT Code: 87076	Accompanies report	Send pure culture of organism in suitable anaerobic transport system or thioglycollate broth. An isolation charge will be added for organisms submitted in mixed culture.

		<b>ANALYZER PANEL</b> <i>(No longer available as of 11/20/07 - order tests seperately)</i> Includes: Anti-Parietal Antibody (2092) SM and SM/RNP Antibodies (4272) Thyroid Peroxidase Ab(5292) Double Strand DNA Ab (5962) Mitochondrial M2 Ab IgG (6932) Anti-Reticulin Ab (8962) Actin Ab IgG (15043) Anti-Myocardial Ab (42682) Anti-Skeletal Muscle (0282) Scleroderma Ab (0542) SS-A and SS-B (0752)		Since this test is no longer offered, please contact the office to clarify the order. Lupus SLE Panel (LUPUS PAN) is the recommended alternative.
LAB A PHAGO AB	A PHAGOCYTOPHILUM ANTIBODIES	<b>ANAPLASMA PHAGOCYTOPHILUM ANTIBODIES (IgG, IgM)</b> (QUEST 68972) Methodology: IFA Set up: Tues, Thurs am Report available : Next day  CPT Code: 86666(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
		<b>ANCA - See Anti-PR3 and Anti-Myeloperoxidase Antibodies</b>		
LAB ANCA PROF	ANCA PROFILE	<b>ANCA PROFILE WMPO &amp; PR3, REFLEX</b> (QUEST 70159X) Includes: ANCA screen, Anti-PR3 & Anti-Myeloperox and reflexes to the c-ANCA, p-ANCA and/or atypical p-ANCA titers as indicated. Methodology: Immunoassay Set up: Mon - Fri am Report available : 3 days  CPT Code: 86021(X3)	Accompanies report	2 mL serum (SS)  Minimum: 0.8 mL
LAB ANDROSTEN	ANDROSTENEDIONE	<b>ANDROSTENEDIONE</b> (QUEST 17182) Methodology: LC/MS/MS Set up: Sun-Fri Report available : 4 days  CPT Code: 82157	Accompanies report	1 mL serum (R) *early morning specimen preferred Minimum: 0.25 mL
		<b>ANEMIA, SICKLE CELL - See Sickle Cell Anemia Screen</b>		
LAB ANEMIA PANEL	ANEMIA PANEL	<b>ANEMIA PANEL</b> Includes: FE, TIBC, TRANSFERRIN, FERRITIN, FOLATE, VITB12 Methodology: Various Set up: Daily Report available: Same day  CPT Codes: 83540, 84466, 82746, 82607, 82728	Accompanies report	2 Gn -Li (PST) tubes or 2 serum (SS) tubes  Minimum: 3.0 mL
		<b>ANERGY PANEL (SKIN TEST) - Not performed by Laboratory</b>		
LAB ANGIOTEN1	ANGIOTENSIN 1 CONVERTING ENZ	<b>ANGIOTENSIN-1-CONVERTING ENZYME, SERUM</b> (QUEST 683X) Methodology: Spectrophotometry Set up: Mon - Sat. Report available : Next day  CPT Code: 82164	Accompanies report	1 mL serum (RED) *ROOM TEMP Minimum: 0.2 mL
LAB ANGIOTENSIN CSF	CSF ANGIOTENSIN	<b>ANGIOTENSIN-1-CONVERTING ENZYME, CSF</b> (QUEST 34692) Methodology: Kinetic Set up: Mon - Sun Report available : Next day  CPT Code: 82164	Accompanies report	1.0 mL CSF *FROZEN Minimum: 0.2 mL
BBK ELU	LAB ONLY	<b>ANTIBODY ELUTION</b> Performed as indicated when a patient has a positive Direct Coombs.  CPT Code: 86860		4 mL whole blood (Pink)
BBK ABID	LAB ONLY	<b>ANTIBODY IDENTIFICATION, RED CELL</b> Methodology: Hemagglutination Set up: Daily, as indicated Report available : Next day  CPT Code: 86870	Accompanies report	6.0 mL whole blood (Pink)  Please include clinical history, e.g. dates of Rh immune globulin administration, medication history.

BBK ABSC	ANTIBODY SCR INDIRECT COOMBS	<b>ANTIBODY SCREEN (INDIRECT COOMBS)</b> Methodology: Hemagglutination Set up: Daily Report available : Same day  CPT Code: 86850	None detected	6.0 mL whole blood (Pink)
BBK ABTITER	ANTIBODY TITER	<b>ANTIBODY SCREEN AND TITER IF INDICATED</b> Methodology: Hemagglutination Set up: Daily, as needed Report available :24 - 48 hours  CPT Code: 86886 (If antibody screen is positive, a charge will be added for antibody titer.)		6.0 mL whole blood (Pink)
LAB ANTI PM SCL		<b>ANTIBODY PM SCLERODERMA ANTIBODY</b> Effective 5/24/16, this test has been discontinued by Quest Diagnostics.		
LAB CARD PAN 1	CARDIOLIPIN AB PANEL 1	<b>ANTI-CARDIOLIPIN ANTIBODIES PANEL 1 (IgG, IgM)</b> (QUEST 19152) Methodology: Immunoassay Set up: Sun-Fri Report available : Next day  CPT Code: 86147(X2)	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB CARD PAN 2	CARDIOLIPIN AB PANEL 2	<b>ANTI-CARDIOLIPIN ANTIBODIES PANEL 2 (IgG, IgA, IgM)</b> (QUEST 7352) Methodology: Immunoassay Set up: Mon - Fri Report available : Next day  CPT Code: 86147(X3)	Accompanies report	1 mL serum (SS) Minimum: 1.0 mL
LAB CARDIO IGA	CARDIOLIPIN AB IGA	<b>ANTI-CARDIOLIPIN IgA</b> (QUEST 4661) Methodology: Immunoassay Set up: Mon - Fri Report available : Next day  CPT Code: 86147	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB CARDIO IGG	ANTI-CARDIOLIPIN IGG	<b>ANTI-CARDIOLIPIN IgG</b> (QUEST 4662) Methodology: Immunoassay Set up: Mon - Fri Report available : Next day  CPT Code: 86147	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB CARDIO IGM	CARDIOLIPIN AB IGM	<b>ANTI-CARDIOLIPIN IgM</b> (QUEST 4663) Methodology: Immunoassay Set up: Mon - Fri Report available : Next day  CPT Code: 86147	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
		<b>ANTI-CCP ANTIBODY - See CCP ANTIBODY</b>		
LAB ANTI-CENT	ANTI CENTROMERE AB	<b>ANTI-CENTROMERE ANTIBODIES</b> (QUEST 16088)  Methodology: Immunoassay Set up: Mon - Sat. Report available : Next day  CPT Code: 86038	Accompanies Report	1 mL serum (SS) Fasting Specimen Preferred  Minimum: 0.5 mL
LAB HSP-70 ANTIBODY	ANTI COCHLEAR AB	<b>ANTI-COCKLEAR ANTIBODIES TO INNER EAR ANTIGEN (68kD)(HSP-70 Antibody)</b> (QUEST 36734) Methodology: WB Set up: Tues, Fri Report available : 5 days  CPT Code: 84181	Accompanies report	1 mL serum (SS) minimum: 0.5ml
		<b>ANTI-CYCLIC CITRULLINATED PEPTIDE - See CCP Antibody</b>		
LAB ARGININE VASO	ARGININE VASOPRESSIN	<b>ANTI-DIURETIC HORMONE (ADH) (Arginine Vasopressin)</b> (QUEST 8243) Methodology: Extraction, RIA Set up: Mon,Wed,Fri Report available : 8 days  CPT Code: 84588	Accompanies report	4 mL EDTA plasma (L) <b>FROZEN</b> . Patient should be fasting and supine during blood collection. Collect blood in <i>prechilled</i> EDTA tube. Centrifuge immediately and separate and freeze immediately.  Minimum: 1.1 mL

LAB ANTI-DNA	ANTI DNA AB	<b>ANTI-dsDNA SCREEN (double-stranded)</b> (CPAL 3000195) Methodology: IFA Set up: Mon, Wed, Fri.. Report available : Next day  CPT Code: 86225 (If screen is positive, a titer will be performed.)	Negative	1 mL serum (SS)
LAB ANTI DNA IGG	SINGLE STRAND DNA IGG ANTIBODY	<b>ANTI-ssDNA IgG ANTIBODIES (single stranded)</b> (QUEST 45972) Methodology: Immunoassay Set up: Tues, Thurs Report available : Next day  CPT Code: 86226	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB ANTI-ENA	ANTI ENA AB	<b>ANTI-ENA ANTIBODIES</b> (CPAL 3000818) <i>Includes antibodies to Smith antigen (Anti-SM) and ribonucleoprotein (Anti-RNP).</i> Methodology: Ochterlony gel Set up: Wed, Sat. Report available : 3 days  CPT Code: 86235(X2)	Negative	1 mL serum (SS)
		<b>ANTI-ENDOMYSIAL ANTIBODIES</b> Refer to <b>ENDOMYSIAL ANTIBODY SCREEN</b>		
BBK AGID	LAB ONLY	<b>ANTIGEN TESTING, RBC</b> Methodology: Hemagglutination Set up: Daily Report available : Same day	Accompanies report	5 mL whold blood (Pink) Minimum: 2 mL Please specify antigen to be tested for under Special instructions on request form.
LAB GLIAD PAN	ANTI GLIADIN PANEL	<b>ANTI-GLIADIN/GLUTEN PANEL</b> (QUEST 8889X) <i>Includes IgG and IgA</i> Methodology: Immunoassay Set up: Mon - Fri. Report available : Next day  CPT Code: 83516(X2)	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB GLIAD IGA	ANTI GLIADIN IGA	<b>ANTI-GLUTEN/GLIADIN ANTIBODIES, IgA</b> (QUEST 79742) Methodology: Immunoassay Set up: Mon - Fri. Report available : Next day  CPT Code: 83516	Accompanies report	1 MI Serum (SS) Minimum: 0.5 mL
LAB GLIAD IGG	ANTI GLIADIN IGG	<b>ANTI-GLUTEN/GLIADIN ANTIBODIES, IgG</b> (QUEST 79732) Methodology: Immunoassay Set up: Mon - Fri. morning Report available : Next day  CPT Code: 83516	Accompanies report	1.0 mL serum (SS) Minimum: 0.3 mL
LAB ANTI-GBM	ANTI GLOMERULAR BASEMENT AB	<b>ANTI-GLOMERULAR BASEMENT MEMBRANE ANTIBODIES (ANTI-GBM)</b> (QUEST 257X) Methodology: Immunoassay Set up: Mon - Sat. Report available : Next day  CPT Code: 83520	Accompanies report	1 mL serum (R) Minimum: 0.5 mL
		<b>ANTI-HEPATITIS ANTIBODIES - See Hepatitis Tests</b>		
LAB ANTI-HISTO	ANTI HISTONE AB	<b>ANTI-HISTONE ANTIBODIES</b> (QUEST 9012) Methodology: EIA Set up: Mon, Wed., Fri. Report available : Next day  CPT Code: 83516	Accompanies report	1 mL serum (SS) <b>FREEZE</b> Overnight fasting is preferred Minimum: 0.3 mL
		<b>ANTI-Hu - See Hu Autoantibody (Western Blot)</b>		
		<b>ANTI-Hu ANTIBODY TYPE 1- See NEURONAL NUCLEAR (Hu) ANTIBODY</b>		

QUEST 36741 Univ. Req.	Universal Requisition	ISLET CELL ANTIBODY SCREEN WITH REFLEX TO TITER Methodology: IFA Set up: Mon - Thurs Report available : 5 days  CPT Code: 86341 (If titer is reflexed add additional 86341)	Accompanies report	2 mL serum (SS)  Minimum: 0.5 mL
LAB ANTI-JO1	ANTI JO1 AB	ANTI-Jo-1 ANTIBODIES (CPAL 3000824) Methodology: Fluoroenzyme Immunoassay Set up: Mon, Wed, Fri Report available : Next day  CPT Code: 86235	Accompanies report	0.5 mL serum (SS) FROZEN  Minimum: 0.2 mL
		ANTI-LKM - See Liver-Kidney Microsomal Antibodies		
		ANTI-MICROSOMAL ANTIBODIES - See Anti-Thyroid Microsome (TPO) (Thyroid Peroxidase Antibodies)		
LAB AMA	ANTI MITOCHONDRIAL ANTIBODY	ANTI-MITOCHONDRIAL ANTIBODIES (QUEST 30321) Methodology: EIA Set up: Mon, Wed, Fri. Report available : Next day  CPT Code: 83520	Accompanies report	1 mL serum (SS)  Minimum: 0.3 mL
LAB ANTI-MYELO	ANTI MYELOPEROXIDASE AB	ANTI-MYELOPEROXIDASE (pANCA COMPONENT) ANTIBODIES (QUEST 8796) Methodology: Immunoassay Set up: Mon - Fri. Report available : Next day  CPT Code: 86021	Accompanies report	1 mL serum (SS)  Minimum: 0.3 mL
		ANTI-NEURONAL ANTIBODIES (NEURONAL NUCLEAR Hu ANTIBODY) - See Hu Antibody		
		ANTI-NEUROPHIL CYTOPLASMIC ANTIBODIES - See ANTI-PR3		
LAB ANA SCR	ANA SCREEN	ANTINUCLEAR ANTIBODIES (ANA) (CPAL 3000210) Methodology: IFA Set up: Mon - Fri. Report available : Next day  CPT Code: 86038 [If Screen is positive, a Quant (pattern and titer) is reflexively added and charged.]	Negative	1 mL serum (SS) -or- 1 mL pleural fluid
LAB ANTI-NEUTR	ANTI NEUTRO CYTO AB	ANTI-PR3 (cANCA) ANTIBODIES (QUEST 34151X) Included in ANCA Profile #1 Methodology: EIA Set up: Mon - Fri. Report available : Next day  CPT Code: 86021	Accompanies report	1 mL serum (SS)  Minimum: 0.3 mL
QUEST 8962 Univ. Req.	Universal Requisition	RETICULIN IgG AND IgA SCREEN WITH REFLEX TO TITER Methodology: IA Set up: Mon - Fri. Report available : Next day  CPT Code: 86255(X2) [If a screen(s) is positive, a titer(s) will be added at an additional charge (CPT 86256 for each titer added)]	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		ANTI-RNP, ANTI-Sm - See Anti-ENA		
		ANTI-Ro (SS-A), ANTI-La (SS-B) - See Sjögrens Syndrom Antibodies		
		ANTI-SCLERODERMA (Sci-70) ANTIBODIES - See Scleroderma (Sci-70) Antibodies		
		ANTI-SJÖGREN'S SYNDROME ANTIBODIES SS-A (RO), ss-b(La)- See Sjögrens Syndrom Antibodies		
		ANTI-SKELETAL MUSCLE ANTIBODIES - See Striated Muscle Antibody with Reflex to Titer		
		ANTI-SKIN ANTIBODIES - See Skin Antibodies		
		ANTI-SMITH -See Anti-ENA		

LAB ANTI-SMOOTH	ANTI SMOOTH MUSCLE AB	<b>ANTI-SMOOTH MUSCLE ANTIBODIES (ACTIN ANTIBODY)</b> (QUEST 15043) Methodology: ELISA Set up: Mon - Fri. Report available : Next day  CPT Code: 83516	Accompanies report	0.5 mL serum (R)  Minimum: 0.1 mL
LAB SPERM AB	SPERM AB IGG IGA	<b>ANTI-SPERM ANTIBODY TYPING - INDIRECT (IgG, IgA)</b> (QUEST 19492) Methodology: Immunobeads Set up: Wed, Fri. Report available : 3 days  CPT Code: 89325(X2)	Accompanies report	1 mL serum (R)  Minimum: 0.3 mL
LAB DNASE-B AB	<b>STREPTOCOCCAL DNASE B B</b>	<b>ANTI-STREPTOCOCCAL Dnase B (STREPTODORNASE) ANTIBODIES</b> (QUEST 2952) Methodology: Nephelometry Set up: Mon - Fri Report available : 3 days Reference Send Out Test for Quest CPT Code: 86215	Accompanies report	1 mL serum (SS)  Minimum: 0.4 mL
LAB ANTI-STREP	<b>STREPTOCOCCAL EXOENZYME AB SCR</b>	<b>ANTI-STREPTOCOCCAL EXOENZYME SCREEN W/ REFLEX TO TITER</b> (QUEST 15260) Screen for antibodies to streptolysin, streptokinase, hyaluronidase, Dnase B, and NADase. If positive, assays for ASO and Anti-Streptococcal Dnase B can be helpful. Positive screens are quantitated. Methodology: Agglutination Set up: Mon - Sun morning Report available : Next day  CPT Code: 86403 [If screen is positive, a titer will be performed at an additional charge (CPT 86406).]	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB ASO	<b>ANTI STREP O AB TITER</b>	<b>ANTI-STREPTOLYSIN O ANTIBODY TITER</b> (CPAL 3000165) Methodology: Nephelometry Set up: Mon - Sat. Report available : 24 - 48 hours  CPT Code: 86060	Accompanies report	1 mL serum (SS)
LAB ANTITH III	<b>ANTI THROMBIN III</b>	<b>ANTI-THROMBIN III</b> (QUEST 216) Methodology: Chromogenic Set up: Mon - Fri. evening Report available : Next day  CPT Code: 85300	Accompanies report	1 mL plasma (LB) <b>FROZEN</b> Specimens received thawed or hemolyzed are unacceptable. Minimum 0.5 ml
LAB ANTI TG AB	<b>ANTI THYROGLOBULIN AB</b>	<b>ANTI-THYROGLOBULIN ANTIBODIES</b> (CPAL 1750027) Methodology: Chemiluminescence Set up: Mon - Sat Report available : Next day  CPT Code: 86800	< 41 IU/mL	1 mL serum (SS)
LAB ANTI-THY	<b>ANTI-THYROID ANTIB GRP (CPAL)</b>	<b>ANTI-THYROID ANTIBODY PROFILE</b> (CPAL 1750024) Includes: Anti-Thyroglobulin and Anti-TPO (Anti-Thyroid Microsomal) antibodies. Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 86376, 86800	See individual tests	2 mL serum (SS)
LAB ANTI-TPO	<b>ANTI THYROID MICROSOMAL AB</b>	<b>ANTI-THYROID MICROSOMAL / ANTI-THYROID PEROXIDASE (TPO) ANTIBODIES</b> (CPAL 1750025) Methodology: Chemiluminescence Set up: Mon - Sat Report available : Next day  CPT Code: 86376	35 IU/mL	1 mL serum (SS)
		<b>ANTITRYPSIN -See Alpha-1 Antitrypsin</b>		

LAB APOLIPO A-1	APOLIPOPROTEIN A 1	<b>AOLIPOPROTEIN A-1</b> (QUEST 22252) Methodology: Nephelometry Set up: Mon - Sat. Report available : Next day  CPT Code: 82172	Accompanies report	1.0 mL serum (SS) Fasting at least 12 hours is required.  Minimum: 0.5 mL
LAB APOLIPO B	APOLIPOPROTEIN B	<b>APOLIPOPROTEIN B-100</b> (QUEST 22262) Methodology: Nephelometry Set up: Mon - Sat. Report available : Next day  CPT Code: 82172	Accompanies report	2.0 mL serum (R) Fasting at least 12 hours is required.  Minimum: 0.5 mL
LAB APT TEST	FETAL HEMOGLOBIN APT TEST	<b>FETAL HEMOGLOBIN APT TEST</b> (QUEST 90584) Methodology: Colorimetric Set up: Mon - Fri. Report available : Next day  CPT Code: 85460	Accompanies Report	Bloody stool, bloody vomitus or bloody diaper  Minimum: 1 mL
		<b>APTT - See Activated Partial Thromboplastin Time</b>		
LAB ENCEP IGG	ARBOVIRUS IGG PANEL	<b>ARBOVIRUS IGG ANTIBODY PANEL</b> (QUEST 13522) Effective 12/11/14, this test is no longer available. There is no recommended alternative.		
LAB ENCEP IGM	ARBOVIRUS IGM PANEL	<b>ARBOVIRUS IGM ANTIBODY PANEL</b> (QUEST 14532) Effective 12/11/14, this test is no longer available. There is no recommended alternative.		
LAB ARSENIC	ARSENIC BLOOD	<b>ARSENIC, BLOOD</b> (QUEST 269) Methodology: ICP-MS Detection limits: Urine: 10 µg/L Blood: 0.3 µg/dL Set up: Mon, Wed, Fri. pm Report available : Next day  CPT Code: 82175	Accompanies report	4 mL whole blood (Dk Blue EDTA) Seafood and herbal supplements should not be consumed for at least 3 days before specimen collection  Minimum: 2 mL
LAB ARYLSULFATASE A	ARYLSULFATASE A URINE	<b>ARYLSULFATASE A, URINE</b> (QUEST 34694) Methodology: Enzymatic Set up: Thurs Report available : 2 days  CPT Code: 84311	Accompanies report	20 mL random urine  Minimum: 8 mL
		<b>ASCORBIC ACID - See Vitamin C</b>		
		<b>ASMA - See Anti-Smooth Muscle Antibodies</b>		
		<b>ASO - See Anti-streptolysin O Antibodies</b>		
LAB SGOT	ASPARTATE AMINO TRANSFERASE	<b>ASPARTATE TRANSAMINASE (AST) (SGOT)</b> Methodology: Enzymatic Set up: Daily Report available : Same day  CPT Code: 84450	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
		<b>ASPERGILLUS BATTERY - See Hypersensitivity Pneumonitis Aspergillus Battery</b>		
LAB ASP SCR	ASPERGILLUS AB SCREEN	<b>ASPERGILLUS ANTIBODIES SCREEN</b> (QUEST 14452) For detection of antibodies to either <i>Aspergillus fumigatus</i> , <i>A. flavus</i> , or <i>A. niger</i> . To distinguish reactivity for individual antigens of <i>Aspergillus</i> species, see <i>Hypersensitivity Pneumonitis Aspergillus Battery</i> . Methodology: ID Set up: Tues, Thurs, Sat. Report available : 3 days  CPT Code: 86606(X3)	Accompanies report	1 mL serum (SS)  Minimum: 0.1 mL

LAB ASP FUM AB	ASPERGILLUS FUMIGATUS AB	<b>ASPERGILLUS FUMIGATIS ANTIBODIES</b> (QUEST 2962) CF is less sensitive than immunodiffusion; however, CF reactivity is more indicative of recent infection than ID reactivity. See fungal Antibody Screen ID. Methodology: CF Set up: Mon - Fri Report available : 2 days  CPT Code: 86606	Accompanies report	1 mL serum (SS), <b>Room Temp</b> Fasting Specimen Preferred Minimum: 0.5 mL
LAB ASPERGILLUS IGG	ASPERGILLUS IGG AB	<b>ASPERGILLUS IgG Antibodies</b> Test has been discontinued effective 7/21/14, the recommended alternative is Quest 92529 - Aspergillus fumigatus, IgG Ab, Serum performed at Mayo Medical Laboratories.	Accompanies report	1 mL serum (R)  Minimum: 0.8 mL
QUEST 92529 Req.	Univ. Universal Requisition	<b>ASPERGILLUS FUMIGATUS, IGG ANTIBODIES, SERUM</b> Performed by Mayo Medical Laboratories Methodology: Fluorescence Enzyme Immunoassay Set up: Mon - Sat Report available : 5 days  CPT Code: 86606	Accompanies report	0.5 mL serum (R)  Minimum: 0.3 mL
LAB ASPER AG	ASPERGILLUS ANTIGEN, EIA	<b>ASPERGILLUS ANTIGEN, EIA</b> (QUEST 14950) Methodology: Immunoassay Set up: Mon - Fri Report available : Next day  CPT Code: 87305	Accompanies report	2 mL serum (SS) <b>FREEZE</b> (Bronchoalveolar lavage/wash is no longer acceptable)  Minimum: 1 mL
		<b>ASPIRIN - See Salicylate</b>		
		<b>AVITAN - See Lorazepam</b>		
		<b>AVENTYL - See Nortriptyline</b>		
		<b>B27 - See HLA-B27 Histocompatibility Antigen</b>		
LAB B CELLS (CD20)	B CELLS CD20	<b>B CELLS (CD20)</b> Effective 7/25/16, Quest has discontinued this test. There is no recommended alternative.		.
LAB BACLOFEN	BACLOFEN SERUM OR PLASMA	<b>BACLOFEN, serum/plasma</b> (QUEST 7265) Referral test for QUEST. Methodology: LC/MS/MS Set up: Mon, Wed, Fri.am Report available : 2 days  CPT Code: 80299	Accompanies report	1 mL plasma (L) or 1ml serum (R) Promptly centrifuge and separate serum/plasma into a plastic, screw- capped vial.  Minimum: 0.4 mL
LAB B MICROTI DNA	BABESIA MICROTI DNA PCR	<b>BABESIA DNA BY PCR</b> (QUEST 112451) Methodology: RT-PCR Set up: Daily Report available: 3 days  CPT Code: 87798	Accompanies report	0.7mL whole blood (L or Y). OR 1 tick submitted in ETOH in sterile container
LAB BABESIA AB PAN	BABESIA MICROTI AB PANEL	<b>BABESIA MICROTI IgG, IgM ANTIBODY PANEL</b> (Quest 34300) Methodology: IFA Set up: Tues, Thurs Report available: 2 days  CPT Code: 86753(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.1 mL
LAB BARBITURATES	BARBITURATE SCREEN	<b>BARBITURATES, serum</b> (QUEST 18972) Methodology: Immunoassay Detection limit: 100 ng/mL Set up: Mon - Fri Report available :1 day  CPT Code: G0479	Accompanies report	7 mL plasma (Gy) or serum (R or DB) Centrifuge and separate plasma/serum from cells and place in plastic screw- capped vial.  Minimum: 1 mL
LAB BARBITURAT PL	BARBIT ID WITH QUANT PLASMA	<b>BARBITURATES, IDENTIFICATION WITH QUANTITATION - PLASMA</b> (QUEST 4082) (amobarbital, butabarbital, butalbital, pentobarbital, phenobarbital, and secobarbital) Methodology: GCMS Detection limit: 0.1 µg/mL Set up: Mon - Sat Report available : 3 days  CPT Code: 80345	Accompanies report	2 mL plasma (L) or serum (R or DB) Centrifuge and separate plasma from cells and place plasma in plastic screw- capped vial.  Minimum: 1 mL

LAB BARBITURATE UR	BARBIT ID WITH QUANT URINE	<b>BARBITURATES, IDENTIFICATION WITH QUANTITATION - URINE</b> (Quest 4087) (amobarbital, butabarbital, butalbital, pentobarbital, phenobarbital, and secobarbital) Methodology: GCMS Detection limit: 0.1 µg/mL Set up: Mon - Sat Report available : 3 days  CPT Code: 80345	Accompanies report	20 mL random urine in plastic, leakproof container  Minimum: 5 mL
QUEST 18977 Univ. Req.	Universal Requisition	<b>BARBITUATE PRESUMPTIVE SCREEN, URINE</b> Methodology: Immunoassay Set up: Mon - Fri. Report available : Next day  CPT Code: G0479	Accompanies report	20 mL random urine  Minimum: 10 mL
LAB BARTONELLA	BARTONELLA AB PANEL	<b>BARTONELLA ANTIBODY PANEL (IgG, IgM) W/ REFLEX TO TITERS</b> Includes <i>Bartonella henselae</i> IgG, IgM; <i>Bartonella quintana</i> IgG, IgM (QUEST 34251X) Methodology: IFA Set up: Tues, Thurs Report available : Next day  CPT Code: 86611(X4) [Each reflexed titer will be performed at an additional charge (CPT 86611)]	Accompanies report	1 mL serum (R)  Minimum: 0.2 mL
LAB BARTONELLA IGG	BARTONELLA IGG AB	<b>BARTONELLA IGG ANTIBODIES, IFA (B. HENSELAE &amp; B. QUINTANA)</b> (QUEST 87582) Methodology: IFA Set up: Tues, Thursday Report available : Next day  CPT Code: 86611(X2)	Accompanies report	1 mL serum (R)  Minimum: 0.2 mL
LAB BART HEN AB	BARTONELLA HENSELAE AB PANEL	<b>BARTONELLA HENSELAE ANTIBODY (IgG, IgM) W/ REFLEXES TO TITERS</b> (QUEST 144062) Methodology: IFA Set up: Tues, Thurs Report available : Next day  CPT Code: 86611(X2) [Each reflexed titer will be performed at an additional charge (CPT 86611)]	Accompanies report	1 mL serum (R)  Minimum: 0.2 mL
LAB BASIC	BASIC METABOLIC PANEL	<b>BASIC METABOLIC PANEL</b> (Includes: Calcium, Creatinine, Electrolytes, Glucose, Urea Nitrogen (BUN)). Methodology: Various Set up: Daily Report available: Same day  CPT Code: 80048	See individual tests	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS))  Minimum: 0.5 mL
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>BCRFISH</b> (Performed at CPAL) Methodology: FISH Set up: Mon, Wed Report available: 1-2 days  CPT Code: 88374	Accompanies report	Specimen: Peripheral blood or bone marrow in EDTA or Sodium heparin (1 mL minimum) . Testing is set up on Monday and Wednesday and cases are posted Tuesday and Thursday. Specimen must be received within 72 hours of collection.
LAB BENCE JONE	BENCE JONES 24 HR URINE	<b>BENCE-JONES PROTEIN</b> (QUEST 17404X) Includes electrophoresis and immunofixation Methodology: Varied Set up: Mon - Fri. Report available : Next day  CPT Code: 83883(X2), 84156, 84166, 86335	Accompanies report	10 mL 24-hour urine, collected without preservative  Minimum: 5 mL
LAB BENZ SCR	BENZO SCREEN URINE	<b>BENZODIAZEPINE PRESUMPTIVE SCREEN</b> (QUEST 18297) Methodology: EMIT Set up: Mon - Fri Report available : Next day  CPT Code: G0479	None detected	20 mL random urine  Minimum: 10 mL

LAB BENZODIAZEPINES	BENZO SCREEN BLOOD	<b>BENZODIAZEPINE PANEL, BLOOD</b> (QUEST 23095) Referred test for Quest. Contains: Diazepam, Nordiazepam, Oxazepam, Temazepam, Clobazam, Chlordiazepoxide, Lorazepam, Clonazepam, 7-amino Clonazepam, Alprazolam, Alpha-Hydroxyalprazolam, Midazolam, Triazolam, Hydroxytriazolam, Hydroxyethylflurazepam, Desalkylflurazepam, Flurazepam, Estazolam. Methodology: LC/MS/MS Set up: Mon, Wed, Fri Report available : 5 days CPT Code: 80346	Accompanies report	1 mL whole blood (L) Minimum: 0.4 mL
QUEST 14967X Univ. Req.	Universal Requisition	<b>BENZODIAZEPINE, CONFIRMATION BY GCMS, URINE</b> Methodology: GS/MS Set up: Tues-Sat Report available : 3 days CPT Code: 80346	Accompanies report	20 mL random urine Minimum: 5 mL
QUEST 13777 Univ. Req.	Universal Requisition	<b>BERYLLIUM, URINE</b> Methodology: Colorimetric / ICP/MS Set up: Thurs Report available : 3 days CPT Code: 82570,83018	Accompanies report	3 mL urine in an acid-washed plastic container. Avoid exposure to gadolinium based contrast media for 48 hours prior to collection Minimum: 1.1 mL
LAB BETA-2 GLY	BETA 2 GLYCOPROTEIN AB	<b>BETA-2 GLYCOPROTEIN</b> (QUEST 30340X) Methodology: EIA Set up: Mon-Sat Report available : Next day CPT Code: 86146(X3)	Accompanies report	3.0 mL serum (SS) Minimum: 1.5 mL
LAB BETA-2 MIC	BETA 2 MICROGLOBULIN	<b>BETA-2 MICROGLOBULIN</b> (QUEST 852) Methodology: Nephelometric Set up: Mon - Sat Report available : Next day CPT Code: 82232	Accompanies report	1.0 mL serum (R ) or 1.0 ml (no additive) Royal Blue top <b>ROOM TEMP</b> Overnight fasting is preferred Minimum: 0.5 mL
		<b>BETA HCG (Females) - See HCG, Beta-Quantitative</b>		
		<b>BETA HCG (Males ) - See Chorionic Gonadotropin, Quantitative</b>		
LAB BETAHYDROXY	BETA HYDROXYBUTYRATE	<b>BETA HYDROXYBUTYRATE</b> (QUEST 49182) Methodology: Enzymatic Set up: Sun-Thurs Report available : 4 days CPT Code: 82010	Accompanies report	1.0 mL serum (SS) Minimum: 0.3 mL
		<b>BETA STREP - See Streptococcus Group A Screen (Throat Only)</b>		
		<b>BETA STREP (Vaginal) - See Culture for Group B Strep</b>		
LAB BILE ACIDS	BILE ACIDS	<b>BILE ACIDS (Cholyglycine)</b> (QUEST 14801X) Methodology: Enzymatic Set up: Mon - Fri Report available : Next day CPT Code: 82239	Accompanies report	0.5 mL serum (SS) Draw after 8 hour fast Minimum: 0.2 mL
LAB BILID	BILIRUBIN DIRECT	<b>BILIRUBIN, DIRECT</b> Methodology: Colorimetric Set up: Daily Report available : Same day CPT Code: 82248	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) protect from light Minimum: 0.5 mL
		<b>BILIRUBIN INDIRECT - Order Bilirubin, Total and Bilirubin, Direct</b>		
LAB BILINEO	BILIRUBIN NEONATAL TOTAL	<b>BILIRUBIN, NEONATAL (TOTAL)</b> Intended for newborns 0 - 21 days Methodology: Colorimetric Set up: Daily Report available : Same day CPT Code: 82247	Accompanies report	1 full serum separator-microtainer tube; protect from light

LAB BILIT	BILIRUBIN TOTAL	<b>BILIRUBIN, TOTAL</b> Methodology: Colorimetric Set up: Daily Report available : Same day  CPT Code: 82247	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS); <b>protect from light</b>  Minimum: 0.5 mL
QUEST 289X Univ. Req.	Universal Requisition	<b>BILIRUBIN, AMNIOTIC FLUID</b> Methodology: Spectrophotometric Set up: Daily Report available : Next day  CPT Code: 82143	Accompanies report	4 mL amniotic fluid in sterile, leak-proof container <b>Protect from light</b>  Minimum: 3 mL
		<b>BILIRUBIN, QUALITATIVE, URINE Included in Urinalysis, Routine</b>		
LAB BK QUANT PL	BK QUANT PLASMA DNA PCR	<b>BK VIRUS DNA, QUANTITATIVE PCR</b> (QUEST 11274Z) Methodology: Real-time PCR Set up: Daily Report available : Next day  CPT Code: 87799	Accompanies report	0.7 mL plasma (L) <b>FROZEN</b>  Minimum: 0.3 mL
LAB BK QUANT UR	BK QUANT URINE DNA PCR	<b>BK VIRUS DNA, QUANTITATIVE PCR</b> (QUEST 16581X) Methodology: Real-time PCR Set up: Daily Report available : Next day  CPT Code: 87799	Accompanies report	0.7 mL random urine without preservative <b>FROZEN</b>  Minimum: 0.3 mL
LAB BK QUAL	BK QUAL DNA PCR	<b>BK VIRUS DNA, QUALITATIVE PCR, PLASMA</b> (QUEST 11351X) Methodology: Real-time PCR Set up: Daily Report available : Next day  CPT Code: 87798	Accompanies report	0.7 mL plasma (L) <b>FROZEN</b>  Minimum: 0.3 mL
QUEST 16553 Univ. Req.	Universal Requisition	<b>BK VIRUS DNA, QUALITATIVE PCR, URINE</b> Methodology: RT-PCR Set up: Daily Report available : Next day  CPT Code: 87798	Accompanies report	0.7 mL unpreserved, random urine in sterile, plastic, leakproof container <b>FROZEN</b>  Minimum: 0.3 mL
LAB BLASTO AB	BLASTOMYCES AB	<b>BLASTOMYCES ANTIBODY, COMPLEMENT FIXATION, SERUM</b> (QUEST 11908) Methodology: CF Set up: Mon - Fri Report available : 4 days  CPT Code: 86612	Accompanies report	1 mL serum (R) <b>Room Temp</b> Minimum: 0.1 mL
LAB BLEEDTIME	BLEEDING TIME	<b>BLEEDING TIME</b> Methodology: Simplate Performed as ordered Report Available: Same day  CPT Code: 85002	2.0 - 9.5 minutes	Performed by laboratory staff. <b>Must complete Bleeding Time Patient History form.</b>
BBK SPEC BB	LAB ONLY	<b>BLOOD BANK CONSULT</b> Ordered by Blood Bank staff as indicated by the consulting Pathologist.		
BBK BBHOLD	BLOOD BANK HOLD SPECIMEN	<b>BLOOD BANK HOLD</b> Ordered by nursing for possible Blood Bank orders.		6.0 mL whole blood (Pink)
BBK	POSTPARTUM HOLD SPECIMEN	<b>BLOOD BANK POST-PARTUM HOLD</b> Ordered by FMIJ for possible Blood Bank <b>BLOOD TYPE - See ABORH Group</b>		6.0 mL whole blood (Pink)
LAB BUN	BLOOD UREA NITROGEN	<b>BLOOD UREA NITROGEN (BUN)</b> Methodology: Enzymatic Set up: Daily Report available : Same day <b>Order BUNPRE or BUNPOST for Dialysis patients.</b>  CPT Code: 84520	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB BNP	BNP	<b>B-TYPE NATRIURETIC PEPTIDE (BNP)</b> Methodology: Chemiluminescence Set up: Daily Report available : Same day  CPT Code: 83880	< 100 pg/ml	1 mL whole blood (L) Whole blood may be stored at room temp or refrig for up to 24 hours prior to testing. Plasma may be stored for 8 hours at room temp or up to 24 hours refrig prior to testing.

LAB BFCELLCT OR BFCELLCTDIFF (diff if indicated)	BODY FLUID CELL COUNT -or- BF CELL CT WITH DIFF IF IND	<b>BODY FLUID CELL COUNT AND DIFFERENTIAL</b> Methodology: Microscopic exam, Cyto centrifugation if indicated. Set up: Daily Report available : Next day  CPT Code: cell count - 89050 diff - 89051	Accompanies report	2 mL fluid (L)
		<b>BODY FLUID CRYSTALS - POLARIZING MICROSCOPY - See Synovial Fluid Crystals Analysis</b>		
LAB BFHCT	HEMATOCRIT BODY FLUID	<b>HEMATOCRIT, MANUAL (PCV), BODY FLUID</b> <i>Order if spun Hct is requested.</i> Methodology: Centrifugation Set up: Daily Report available: Same day CPT: 85013	Accompanies report	3 mL fluid (L) Minimum: 1 mL
		<b>BONE RESORPTION MARKER - See Osteomark</b>		
QUEST 34966 Univ. Req.	Universal Requisition	<b>BORDETELLA PERTUSSIS/ PARAPERTUSSIS, DFA</b> Methodology: Direct Immunofluorescence Set up: Mon-Fri Report available : Next day  CPT Code: 87265x2	Accompanies report	Air-dry and heat-fix two slides from nasopharyngeal swab. <b>ROOM TEMP</b>
LAB BPERTUSSIS	B PERTUSSIS DNA	<b>BORDETELLA PERTUSSIS, DNA, QL RT-PCR</b> (CPAL 7000900) Methodology: DNA Amplification Set up: Mon - Sat Report available : Next day  CPT Code: 87798	Accompanies report	Nasopharyngeal swab collected in e-Swab transport medium
LAB BORD PERT	BORDETELLA PERTUSSIS (IGG,IgA)	<b>BORDETELLA PERTUSSIS IgG, IgA ANTIBODY, MAID</b> <i>Includes Pertussis toxin IgG, IgA and Filamentous Hemagglutinin Ag IgG, IgA</i> (QUEST 12966) Methodology: Multi-Analyte Immunodetection (MAID) Set up: Mon, Thurs Report available : 3 days  CPT Code: 88615(X4)	Accompanies report	1 mL serum (R) Minimum: 0.5 mL
		<b>BORRELIA BURGDORFERI - See Lyme Antibodies</b>		
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>B-RAF MUTATION ANALYSIS</b> Performed by CPAL Methodology: PCR and DNA sequencing Set up: Mon, Wed Report available: 3-5 days  CPT Code: 83907, 83892, 83891(X2), 83898(X2), 83904, 83909(X2), 83912, 88381, 81210	Accompanies report	One stained, cover slipped and marked slide and eight unstained (no cover slip) serial sections of paraffin embedded formalin fixed tissue on slides. The portion of tissue on slide to be sampled (tumor) for testing must be clearly indicated on the stained slide. Blocks will not be accepted.  Specimens in which no desired sampling area (tumor) is indicated will be returned to the client so that the proper region of interest can be indicated and resubmitted to CPAL.  Tissue type should be indicated (colon, lung, etc).

	<b>LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)</b>	<b>B-RAF V600 MUTATION TEST (MELANOMA ONLY)</b> Performed by CPAL Methodology: Cobas 4800 BRAF V600 Mutation Test Set up: Mon-Fri Report available: 3-5 days  CPT Code: 83907, 83892, 83891, 83898, 83896(X2), 83912, 88381, 83914, 81210	Accompanies report	One stained, cover slipped and marked slide and eight unstained (no cover slip) serial sections of paraffin embedded formalin fixed tissue on slides. The portion of tissue on slide to be sampled (tumor) for testing must be clearly indicated on the stained slide. An estimation of neoplastic cell content of the selected tumor area MUST be indicated.  Specimens in which no desired sampling area (tumor) is indicated will be returned to the client so that the proper region of interest can be indicated and resubmitted to CPAL.  Specimens should be transported and stored at room temperature.
		<b>BUN -See Blood Urea Nitrogen Order BUN PRE or BUN POST for Dialysis patients</b>		
<b>QUEST 8592</b> Univ. Req.	<b>Universal Requisition</b>	<b>BUPROPION (WELLBUTRIN)</b> <i>Includes Bupropion and Hydroxybupropion</i> Methodology: HPLC-MS/MS Set up: Mon,Wed,Fri Report available : 2 days  CPT Code: 80338	Accompanies report	1.0 mL serum (R) <b>FROZEN</b> Collect serum and remove from cells.
<b>QUEST 5022</b> Univ. Req.	<b>Universal Requisition</b>	<b>BUTABARBITAL</b> Methodology: GCMS Set up: Mon - Fri Report available : 4 days  CPT Code: 80345	Accompanies report	2.0 mL plasma (L) or serum (R). Collect as a trough just prior to next dose.  Minimum: 0.5 mL
<b>QUEST 4413X</b> Univ. Req.	<b>Universal Requisition</b>	<b>BUTALBITAL</b> Methodology: Chromatography Detection limit: 0.1 µg/mL Set up: Tues-Sat Report available : 3 days  CPT Code: 80345	Accompanies report	3.0 mL serum (R) <b>ROOM TEMP</b> Minimum: 1.0 mL
		<b>BUTISOL - See Butabarbital</b>		
		<b>C1 ESTERASE INHIBITOR - See Complement, C1 Esterase Inhibitor</b>		
		<b>C1q BINDING ASSAY - See Immune Complex Detection by C1q Binding Assay</b>		
		<b>C3b BINDING ASSAY (Raji Cell Replacement Assay) - See Immune Complex Detection by C3b Binding Assay</b>		
<b>LAB C-TELOPEPTIDE</b>	<b>COLLAGEN TYPE I C TELOPEPTIDE</b>	<b>C-TELOPEPTIDE (CTx)</b> (QUEST 17406) Methodology: Immunoassay Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 82523	Accompanies report	1 mL serum (SS) <b>FROZEN</b> A minimum of 12 hours fasting is required. Collect specimen in the morning (8-10 am). Collect specimen, allow blood to clot at room temperature, centrifuge and separate serum from cells. Freeze.  Minimum: 0.5 mL
<b>LAB CA-125</b>	<b>CA 125</b>	<b>CA-125</b> (CPAL 1750111) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 86304	0 - 21 U/mL Adult female	1 mL serum (SS) <b>FROZEN</b> Minimum: 0.4 mL
<b>LAB CA 19-9</b>	<b>CA 19 9</b>	<b>CA 19-9</b> (QUEST 4698) Methodology: Immunoassay Set up: Daily Report available: Next day  CPT Code: 86301	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
<b>LAB CA 27-29</b>	<b>CA 27 29</b>	<b>CA 27-29 (QUEST 29493X)</b> <i>Useful for for monitoring patients for metastatic breast cancer.</i> Methodology: Immunoassay Set up: Daily Report available: Next day  CPT Code: 86300	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL

LAB CADMIUM	CADMIUM BLOOD	<b>CADMIUM, BLOOD</b> (QUEST 299) Methodology: ICP-MS Set up: Mon - Fri pm Report available: 1 day  CPT Code: 82300	Accompanies report	4 mL EDTA whole blood (L or DB with EDTA)  Minimum: 2 mL
QUEST 672 Univ. Req.	Universal Requisition	<b>CADMIUM, URINE</b> <i>Includes creatinine.</i> Methodology: ICP-MS Set up: Tues, Thurs Report available: Next day  CPT Code: 82300, 82570	Accompanies report	7 mL random urine specimen collected in acid-washed container (supplied by Lab) <b>*second morning void</b> Minimum: 5 mL
QUEST 8887 Univ. Req.	Universal Requisition	<b>CADMIUM EXPOSURE PANEL</b> <i>Includes blood cadmium, urine cadmium, beta-2-microglobulin, urine creatinine.</i> Methodology: Various Set up: Tues - Sat am Report available: 3 days  CPT Code: 82232, 82300(X2), 82570	Accompanies report	4.0 mL EDTA whole blood (DB with EDTA)  <b>AND</b> 7 mL urine: Empty bladder, drink a large glass of water and collect urine sample in sterile container. <b>*2nd morning void preferred.</b> Aliquot one-half of specimen to an acid-washed container. Refrigerate urine samples.
LAB CAFFEINE	CAFFEINE, SERUM	<b>CAFFEINE</b> (QUEST 305) Methodology: Immunoassay Set up: Mon-Fri Report available: 2 Days  CPT Code: 80155	Accompanies report	1 mL serum (R) Collect as a trough just prior to next dose. <b>SS tubes will be rejected</b> Minimum: 0.2 mL
LAB CALCITONIN	CALCITONIN	<b>CALCITONIN</b> (QUEST 3822) Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 82308	Accompanies report	1 mL serum (R) <b>Frozen.</b> Overnight fasting is preferred. Minimum: 0.5 mL
LAB CA	CALCIUM	<b>CALCIUM</b> Methodology: Arsenazo III Set up: Daily Report available: Same day CPT Code: 82310	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Minimum: 0.5 mL
LAB UCACREA	URINE CA CREAT RATIO	<b>CALCIUM CREATININE RATIO</b> <i>Includes urine calcium and urine creatinine</i> Methodology: Colorimetric/Arsenazo III Set up: Daily Report available: Same day  CPT Code: 82310	See individual tests	5 mL urine
LAB CAIONIZ	IONIZED CALCIUM	<b>CALCIUM, IONIZED (FREE CALCIUM)</b> (QUEST 306) Methodology: ISE Set up: Daily Report available: Next day  CPT Code: 82330	Accompanies report	2 mL serum (SS); Tube must be filled completely. Let clot and spin immediately. Do not open tube. Ship unopened tube. <b>ROOM TEMP</b> Minimum: 0.6 mL
LAB UCA24	URINE CALCIUM 24HR	<b>CALCIUM, 24 HR URINE</b> Methodology: Arsenazo III Set up: Daily Report available: Same day  CPT Code: 82340, 81050	Accompanies report	0.5 mL aliquot of 24-hour urine collection preserved with 10 mL of 6 N HCl during collection. Specify total 24-hr volume on request form.  Minimum: 0.2 mL
LAB UCA	URINE CALCIUM RANDOM	<b>CALCIUM, URINE RANDOM</b> Methodology: Arsenazo III Set up: Daily Report available: Same day  CPT Code: 82310	Accompanies report	5.0 mL of random urine
LAB STONE ANAL	STONE ANALYSIS	<b>CALCULUS ANALYSIS (KIDNEY STONE)</b> (QUEST 30260) <i>Report includes a physical description (weight, size, shape, color, and surface appearance); fracturing to detect presence of nidus; microscopic semi-quantitative identification of compounds by crystalline structure using regular and polarized light.</i> Testing performed by Specialty Laboratories, Inc. Methodology: FTIR- Infa-Red Spectrophotometry Set up: Mon - Sat am Report available: 3 days  CPT Code: 82365	Not applicable	Stone in sterile, leak-proof container. Source/type of stone is required for all submissions. Stones originating from sources not related to kidney should be air-dried, then placed in a plastic tube or a urine collection cup. Do not use tape. Minute specimens may be placed in gelatin capsule.
		<b>CALIFORNIA ENCEPHALITIS GROUP - See Arbovirus Antibodies</b>		

LAB CALPROTECTIN	CALPROTECTIN, STOOL	<b>CALPROTECTIN, STOOL</b> (QUEST 16796) Methodology: IA Set up: Mon, Thurs Report available: 3 days  CPT Code: 83993	Accompanies Report	1 gram stool, unpreserved in sterile, plastic, leakproof container <b>FREEZE</b>  Minimum: 0.3 g
PATHOLOGY SENDOUT <b>CALR Mutation Analysis</b> (Order placed by Anatomic Pathology Dept.)	Send copy of original order	<b>CALR Mutation Analysis (Calreticulin)</b> (Sent to Neogenomics) Methodology: Molecular Set up: Varies Report available: 10 days	Accompanies report	Peripheral blood: 5 mL in EDTA tube. Bone marrow: 2 mL in EDTA tube
		<b>CAMPYLOBACTER PYLORI ANTIBODIES</b> - See Helicobacter pylori IgG Antibodies		
LAB CANDIDA AB	CANDIDA AB	<b>CANDIDA ALBICANS ANTIBODIES</b> (QUEST 7132) Methodology: ID Set up: Mon - Sat Report available: 3 days  CPT Code: 86628	None detected	1 mL serum (SS) or (R)  Minimum: 0.1 mL
LAB CARB	CARBAMAZEPINE	<b>CARBAMAZEPINE (TEGRETOL)</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80156	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.3 mL
QUEST 18948 Univ. Req.	Universal Requisition	<b>CARBAMAZEPINE, FREE</b> Methodology: LC/MS/MS Detection limit: 0.5 µg/mL Set up: Mon -Fri am Report available: 2 days  CPT Code: 80157	Accompanies report	2 mL serum (R) or sodium heparin plasma (Gn)  Minimum: 1.2 mL
LAB CARB EPOXIDE	CARBAM EPOXIDE	<b>CARBAMAZEPINE-10,11-EPOXIDE, SERUM/PLASMA (CARBATROL)</b> (Quest 36676) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 83789	Accompanies report	2 mL serum (R) Do not collect using SS tube or 2 mL plasma (L)  Minimum: 1 mL
LAB CO2	CARBON DIOXIDE	<b>CARBON DIOXIDE (Bicarbonate)</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 82374	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
		<b>CARBON MONOXIDE - See pH, venous</b>		
		<b>CARBOXYHEMOGLOBIN - See pH, venous</b>		
		<b>CARDIAC ENZYMES - See CPK, LDH, AST</b>		
		<b>CARDIOLIPIN - See Anti-Cardiolipin</b>		
LAB CARDIO IQ LIPID	CARDIO IQ AVANCED LIPID PANEL	<b>CARDIO IQ® ADVANCED LIPID PANEL</b> (QUEST 92145) Methodology: Varies Set up: Mon - Fri Report available: 6 days  CPT Code: 80061, 83704, 82172, 83695	Accompanies report	4 mL serum (R)  Minimum: 2 mL
LAB CAROTENE	CAROTENE	<b>CAROTENE</b> (QUEST 311) Methodology: HPLC Set up: Mon - Sat Report available: 2-3 days  CPT Code: 82380	Accompanies report	2 mL serum (SS) Overnight fasting is required. Send tube wrapped in aluminum foil to protect from light. <b>FREEZE</b> Minimum: 0.7 mL
LAB CARNITINE		<b>CARNITINE, FREE AND TOTAL</b> (QUEST 30299X) <b>Effective 10/8/15, this test has been discontinued by Quest and is no longer available</b>		
LAB CATE PLASMA	CATECHOLAMINES PLASMA	<b>CATECHOLAMINES, FRACTIONATED, PLASMA (NOREPINEPHRINE, EPINEPHRINE, AND DOPAMINE)</b> (QUEST 314X) Methodology: HPLC Set up: Mon, Wed, Fri Report available: 2 days  CPT Code: 82384	Accompanies report	4 mL plasma drawn in chilled tube (Gn) ; <b>FROZEN*</b> , Patient should fast for 12 hr and avoid tobacco, coffee, tea, alcohol, and strenuous exercise.  Minimum: 2.5 mL

LAB CATECHOLUR	CATECHOLAMINES 24 HR URINE	CATECHOLAMINES, FRACTIONATED, URINE (QUEST 318X) Includes Norepinephrine, epinephrine, dopamine. Methodology: HPLC Set up: Mon - Fri Report available: Next day  CPT Code: 82384	Accompanies report	10 mL aliquot of 24-hr urine preserved with 25 mL of 6 N HCl during collection. Specify total 24-hr volume on request form.  Minimum: 5.0 mL
		CAT SCRATCH DISEASE - See Bartonella Antibody Panel		
		CBC - See Complete Blood Count (CBC)		
LAB CCP	CCP AB CPAL	CCP ANTIBODY - CYCLIC CITRULLINATED PEPTIDE ANTIBODY (CPAL 3000317) Methodology: EIA Set up: Wed and Sat Report available: Next day  CPT Code: 86200	Accompaniesreport	1 mL serum (SS)  <b>FREEZE</b>
LAB CCP AB IGG	CCP AB IGG QUEST	CCP ANTIBODY - CYCLIC CITRULLINATED PEPTIDE ANTIBODY IgG (QUEST 11173) Methodology: Immunoassay Set up: Tues - Sat Report available: Next day  CPT Code: 86200	Accompaniesreport	1 mL serum (SS)  Minimum: 0.5 mL
LAB CEA	CEA	CEA (CARCINOEMBRYONIC ANTIGEN) Methodology: Chemilluminescence Set up: Daily Report available: Next Day  CPT Code: 82378	Serum: 0.0 - 3.1 ng/mL	1 mL serum (SS)
LAB CELIAC PAN	CELIAC AB PANEL 1	CELIAC DISEASE ANTIBODY PANEL (QUEST 65522) Panel includes Gliadin/Gluten IgG, IgA Antibodies, Tissue Transglutaminase IgA Antibody, and Reticulin IgA Antibody. Methodology: EIA/IFA Set up: Mon - Fri Report available: Next day  CPT Code: 83516(X3), 86255 [If Reticulin IgA screen is positive, a titer will be added at an additional charge (CPT 86256)]	Accompanies report	2 mL serum (SS) <b>FROZEN</b>  Minimum: 1 mL
LAB CELIAC PA2	CELIAC AB PANEL 2	CELIAC DISEASE ANTIBODY PANEL #2 (QUEST 79782) Panel includes Gliadin/Gluten IgG, IgA Antibodies, Tissue Transglutaminase IgA Antibody, and Reticulin IgG and IgA Panel. Methodology: EIA/IFA Set up: Mon - Fri Report available: Next day  CPT Code: 83516(X3), 86255(X2)	Accompanies report	2 mL serum (SS)  Minimum: 1 mL
LAB CELIAC PLUS	CELIAC PLUS PROMETHEUS	CELIAC PLUS (QUEST 18027) Referred to Prometheus (6301) Panel includes Celiac Genetics (HLA DQ2/DQ8) and Celiac Serology. Methodology: Various Set up: Mon - Fri Report available: 11 days  CPT Code: 81382(X2), 82784, 83520(X3), 86255	Accompanies report	2 mL serum (R) <b>and</b> 5 mL blood (L)  Minimum: 0.5 mL serum, 5ml whole blood
LAB CSFCELLCT and CSFCELLCTDIFF (diff if indicated)	CSF CELL COUNT -or- CSF CELL CT WITH DIFF IF IND	CELLCEPT - See Mycophenolic Acid CEREBROSPINAL FLUID CELL COUNT AND DIFFERENTIAL Methodology: Microscopic exam Set up: Daily Report available: Same day  CPT Code: cell count - 89050 diff - 89051	Accompanies report	Minimum: 1mL CSF
		CEREBROSPINAL FLUID CHLORIDE - See Chloride, CSF		

LAB IGG CSF	CSF IGG	<b>CEREBROSPINAL FLUID, IgG</b> (QUEST 6444) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 82784	Accompanies report	1 mL CSF (CSF must be clear)  Minimum: 0.5 mL CSF
LAB IGG SYN RATE	CSF IGG SYNTHESIS RATE	<b>CEREBROSPINAL FLUID , IgG SYNTHESIS RATE</b> (QUEST 13924) <i>Includes Synthesis Rate, CSF IgG, IgG CSF Index, Albumin serum.</i> Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 82040, 82042, 82784(X2)	Accompanies report	2 mL CSF <b>-and-</b> 1 mL serum (R)  Minimum: 1 mL CSF <b>-and-</b> 0.5 mL serum
LAB CSFPROT	CSF TOTAL PROTEIN	<b>CEREBROSPINAL FLUID, TOTAL PROTEIN</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84157	Accompanies report	1 mL CSF  Minimum: 0.5 mL CSF
LAB CERULO	CERULOPLASMIN	<b>CERULOPLASMIN</b> (QUEST 326) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 82390	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
QUEST 143172 Univ. Req.	Universal Requisition	<b>CHLAMYDIA PNEUMONIAE (TWAR) IgG ANTIBODIES</b> Methodology: MIA Set up: Mon - Sat Report available: Next day  CPT Code: 86631	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB CHLAM IGM	CHLAMYDIA PNEUMONIAE IGM SERUM	<b>CHLAMYDIA PNEUMONIAE (TWAR) IgM ANTIBODIES</b> (QUEST 38481X) Methodology: MIA Set up: Mon - Sat Report available: Next day  CPT Code: 86632	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
QUEST 37111X Univ. Req.	Universal Requisition	<b>CHLAMYDIA PNEUMONIAE ANTIBODY APNEL (IgG, IgA, IgM)</b> Methodology: IFA Set up: Mon - Sat Report available: Next day  CPT Code: 86631(X2), 86632	Accompanies report	1 mL serum (SS)  Minimum: 0.1 mL
QUEST 143312 Univ. Req.	Universal Requisition	<b>CHLAMYDIA SPECIES ANTIBODY PANEL (IgG, IgA, IgM)</b> Methodology: IFA Set up: Mon - Sat Report available: Next day  CPT Code: 86631(X6), 86632(X3)	Accompanies report	1 mL serum (R)  Minimum: 0.1 mL
LAB CHLAM AB G,A,M	CHLAMYDIA TRACHOMATIS AB GAM	<b>CHLAMYDIA TRACHOMATIS ANTIBODIES (IgG, IgA, IgM)</b> (QUEST 143262) Methodology: IFA Set up: Mon - Sat Report available: Next day  CPT Code: 86631(X2), 86632	Accompanies report	1 mL serum (SS)  Minimum: 0.1 mL
LAB CT CERV	CHLAMYDIA CERVICAL	<b>CHLAMYDIA TRACHOMATIS BY PCR for CERVICAL SPECIMEN</b> (CPAL 3009012) <i>NOTE: The DNA test for N. gonorrhoeae can be run from the same specimen (endocervical sources only). If both tests are desired, order STD PROBE Panel.</i> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87491	Negative	Recommended specimens: Female: Endocervical swab. Use kits for cervical swabs provided from CPAL.  <i>Specimens collected from other body sites will be rejected.</i>  **For collection and testing of specimens from non-genital see CHLAMCULT**

LAB CT CYTO	CHLAMYDIA THIN PREP	<b>CHLAMYDIA TRACHOMATIS BY PCR for THIN PREP</b> (CPAL 3009018) <b>NOTE: The DNA test for N. gonorrhoeae can be run from the same specimen . If both tests are desired, order STD PROBE Panel.</b> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87491	Negative	Recommended specimens: Female: THIN PREP VIAL.  <i>Specimens collected from other body sites will be rejected.</i>
LAB CT URINE	CHLAMYDIA URINE	<b>CHLAMYDIA TRACHOMATIS BY PCR for URINE SPECIMEN</b> (CPAL 3009014) <b>NOTE: The DNA test for N. gonorrhoeae can be run from the same specimen (endocervical or endourethral sources only). If both tests are desired, order STD PROBE Panel.</b> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87491	Negative	Recommended specimens: <b>Minimum 20 mL random urine</b>
LAB CT URETH	CHLAMYDIA URETHRAL	<b>CHLAMYDIA TRACHOMATIS BY SDA for URETHRAL SPECIMEN</b> <b>Test has been inactivated, please use CT URINE as an alternative</b>		
LAB CT VAG	CHLAMYDIA VAGINAL	<b>CHLAMYDIA TRACHOMATIS BY PCR for VAGINAL SPECIMEN</b> (CPAL 3009016) <b>NOTE: The DNA test for N. gonorrhoeae can be run from the same specimen (VAGINAL sources only). If both tests are desired, order STD PROBE Panel.</b> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87491	Negative	Recommended specimens: Vaginal swab. Use kits for vaginal swabs provided from CPAL.  **For collection and testing of specimens from non-genital see CHLAMCULT**
LAB CHLAMCULT	CHLAMYDIA CULTURE	<b>CHLAMYDIA TRACHOMATIS CULTURE</b> (QUEST 690X) Methodology: Culture Set up: Mon - Sat Report available: 3 days  CPT Code: 87110, 87140	No Chlamydia isolated	Endocervical swab, urethral swab, conjunctival swab, throat swab, nasal/nasopharyngeal swab, fresh/unfixed tissue or 3mL pelvic washing in VCM medium or equivalent.
QUEST 2106 Univ. Req.	Universal Requisition	<b>CHLORAMPHENICOL</b> Methodology: LC/MS/MS Set up: Tuesday Report available: 5 days  CPT Code: 82415	Accompanies report	Minimum: 1 mL serum (R or DB) or plasma (L). No SS tubes. Promptly centrifuge and separate serum/ plasma into a plastic, screw-cap vial.
QUEST 91123 univ. Req.	Universal Requisition	<b>CHLORDIAZEPOXIDE (LIBRIUM)</b> (Includes Chlordiazepoxide, Norchlordiazepoxide, N)ordiazepam) Methodology: LC/MS/MS Set up: Friday Report available: 6 days  CPT Code: 80346	Accompanies report	2 serum (R or DB). Collect at trough concentration, just before next dose. <b>Rejection criteria: SS tube, received room temperature</b>  Minimum: 1.0 mL
LAB CSF CL	CSF CHLORIDE	<b>CHLORIDE, CSF</b> (Quest 4004) Methodology: Coulometric Titration Set up: Mon-Fri afternoon Report available: Next day  CPT Code: 82438	Accompanies report	1 mL CSF, submit in a sterile, plastic, leakproof CSF tube, refrigerated  Minimum: 0.5 mL CSF
LAB CL	CHLORIDE	<b>CHLORIDE, SERUM</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 82435	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB UCL	URINE CHLORIDE RANDOM	<b>CHLORIDE, URINE</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 82436		20 mL random urine  Minimum: 5 mL
		<b>CHOLEDYL - See Theophylline</b>		
LAB CHOL	CHOLESTEROL	<b>CHOLESTEROL, TOTAL</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 82465	Desirable: Less than 200 mg/dL Borderline: 200-239 mg/dL Elevated: Greater than 240 mg/dL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL

		<b>CHOLINESTERASE AND DIBUCAINE NUMBER - See Dibucane Number and Cholinesterase</b>		
<b>QUEST 17430X</b> Univ. Req.	<b>Universal Requisition</b>	<b>CHOLINESTERASE, RBC</b> Methodology: Enzymatic Set up: Mon - Fri Report available: Next day  CPT Code: 82482	Accompanies report	5 mL whole blood (L) <b>AND</b> 1 mL EDTA plasma (L)  Draw 2 Lavender-top EDTA tubes. Spin one tube and separate plasma into plastic tube. Ship both whole blood and plasma aliquot. Specimen will be rejected if only whole blood is received. <b>Hemolyzed and icteric specimens are unacceptable</b>
LAB <b>CHOLIN</b>	<b>CHOLINESTERASE</b>	<b>CHOLINESTERASE, SERUM (Pseudocholinesterase)</b> (QUEST 37965) Methodology: Kinetic/Spectrophotometric Set up: Mon - Fri Report available: Next day  CPT Code: 82480	Accompanies report	1 mL serum (SS) Centrifuge and transfer serum specimens to clean, plastic, screw-cap vial. <b>Hemolyzed specimens are unacceptable</b>  Minimum: 0.5 mL
LAB (Urine) <b>HCGQUALU</b>	<b>HCG QUAL URINE</b>	<b>CHORIONIC GONADOTROPIN, URINE, QUALITATIVE (Pregnancy test)</b> Methodology: EIA Set up: Daily Report available: Same day  CPT Code: 84703	Accompanies report	10.0 mL of first morning urine  Minimum: 5.0 mL urine
LAB <b>HCGPROG</b> or <b>HCGQUAL</b>	<b>HCG QUAL PROGRESSIVE</b> or <b>HCG QUAL</b>	<b>CHORIONIC GONADOTROPIN, QUALITATIVE, PROGRESSIVE (Pregnancy test)</b> <i>(For HCGPROG, if qualitative is positive, a HCGQUANT will be performed at an additional charge.)</i> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 84703	Accompanies report	1.0 mL blood (Gn-Li (PST))  Minimum: 1.0 mL plasma
LAB <b>HCG CPAL</b>	<b>HCG TUMOR MARKER</b>	<b>CHORIONIC GONADOTROPIN, QUANTITATIVE (CPAL)</b> (CPAL 1754006) <b>CPAL has discontinued this test effective 8/1/14. See Beta hCG Quant (Quest 90378)</b>		
<b>BETA HCG QUANT</b>	<b>BETA HCG QUANT ONCOLOGY</b>	<b>BETA HCG QUANTITATIVE ONCOLOGY</b> (QUEST 90378) Methodology: Immunoassay Set up: Daily Report available: Next day  CPT Code: 84702	Accompanies report	1.0 mL serum (SST)  Minimum : 0.3 mL
LAB <b>CHROMIUM BLD</b>	<b>CHROMIUM BLOOD</b>	<b>CHROMIUM, BLOOD</b> (QUEST 6085) Methodology: ICP/MS Set up: Mon-Fri Report available: 2 days  CPT Code: 82495	Accompanies report	4 mL whole blood (DB EDTA) To avoid contamination, use powderless gloves. DO NOT ALIQUOT SPECIMEN. Draw one vacutainer of blood (1-2 mL) and discard. Draw second vacutainer (2-4 mL in royal blue, EDTA) for submission. Patient should refrain from taking mineral supplements, and multi-vitamin 3 days prior to specimen collection <b>Minimum : 2 mL</b>
<b>QUEST 11278X</b> Univ. Req.	<b>Universal Requisition</b>	<b>CHROMIUM, URINE</b> <i>Includes Creatinine</i> Methodology: Atomic Spectroscopy Set up: Tues, Thurs Report available: 7 days  CPT Code: 82495, 82570	Accompanies report	2 mL random urine specimen Collect and transport in acid washed, metal free, leak proof container. <b>Minimum : 0.5 mL</b>

LAB CHROMOGRANIN A	CHROMOGRANIN A	<b>CHROMOGRANIN A</b> (QUEST 16379) Methodology: Electrochemiluminescence Set up: Sun-Fri Report available: 3-5 days  CPT Code: 86316	Accompanies report	1 mL serum (SS)  Minimum: 0.3 mL
LAB CHR KAR BL	CHROMOSOME KARY BLOOD	<b>CHROMOSOME ANALYSIS, BLOOD</b> (QUEST 14596) <b>This test may assist with the detection of common chromosome abnormalities.</b> Methodology: Culture, Microscopy, Karyotype Set up: Mon-Sat AM Report available: 10 days  CPT Code: 88230, 88262	Accompanies report	3-5 mL whole blood in sodium heparin tube (Gn) <b>ROOM TEMP</b>  Minimum: 1.0 mL Note: Specimen viability decreases during transit. Send to reference laboratory as soon as possible.
LAB CHROMOSOME ANAL	CHROMOSOME ANALYSIS, TISSUE	<b>CHROMOSOME ANALYSIS, TISSUE</b> (QUEST 14593) Methodology: Culture, Microscopy, Karyotype Set up: Mon-Sun AM Report available: 15 days  CPT Code: 88233, 88262	Accompanies report	Tissue Sample minimum 2 x 3 mm Submitted in Hank's solution. Instructions: Contact Lab for media, Genetics requisition form, and preferred tissue sites.  Minimum: 2 x 3 mm
LAB CU INDEX	CHRONIC URTICARIA INDEX	<b>CHRONIC URTICARIA (CU) INDEX™*</b> (QUEST 16838) Methodology: Cell culture, Immunoassay Set up: Tues, Thurs Report available: 3 days  CPT Code: 86343	Accompanies report	1.5 mL serum @ Patients taking calcineurin inhibitors should stop medication for 72 hrs prior to draw. <b>SS tubes will be rejected</b>  Minimum: 1.0 mL
LAB CITRATE24U	URINE CITRATE 24HR	<b>CITRATE, URINE 24 HR</b> (QUEST 11315X) <b>24hr urine w/o Creatinine</b> Methodology: Enzymatic, SP Set up: Mon - Fri Report available: Next day  CPT Code: 82507	Accompanies report	10 mL aliquot of 24-hr urine collection with no preservative.  Minimum: 1 mL
QUEST 6422 Univ. Req.	Universal Requisition	<b>CK-ISOENZYME ELECTROPHORESIS</b> Methodology: Electrophoresis Set up: Mon - Fri, Sun Report available: Next day  CPT Code: 82550, 82552	Accompanies report	2 mL serum (SS) <b>FREEZE</b>  Minimum: 1 mL
LAB CKMB	CREATINE KINASE MB	<b>CK-MB</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day <b>If CK MB only if indicated is requested, order CKMB IF INDICATED</b>  CPT Code: 82553	<0.3 - 6.3 ng/mL	4.0 mL blood (Gn-Li (PST)) Spin down within 2 hours and remove plasma.
QUEST 30013 Univ. Req.	Universal Requisition	<b>CLOMIPRAMINE (ANAFRANIL)</b> <b>Includes desmethylclomipramine.</b> Methodology: LC/MS/MS Set up: Mon - Fri Report available: Next day  CPT Code: 80335	Accompanies report	2 mL serum (R ) Collect at steady-state trough concentration. Should be collected >12 hrs after dose. <b>No SS tubes.</b>  Minimum: 1.5 mL
LAB CLONAZEPAM	CLONAZEPAM	<b>CLONAZEPAM (KLONOPIN)</b> (QUEST 340) Methodology: LC/MS/MS Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 80346	Therapeutic: 30 - 60 ng/mL	2 mL serum (DB, R); Collect at trough concentration, immediately before next dose. <b>Protect from light. No SS tubes. FREEZE</b>  Minimum: 1.0 mL
QUEST 90854 Univ. Req.	Universal Requisition	<b>CLORAZEPATE (TRANZENE)</b> Methodology: LC/MS/MS Set up: Fri am Report available: 8 days  CPT Code: 80346	Accompanies report	2 mL serum (R). <b>No SS tubes Frozen</b> Minimum: 1 mL
MIC CDIFSC	C DIFFICILE SCREEN	<b>CLOSTRIDIUM DIFFICILE RAPID TOXIN A AND B DETECTION, MAY REFLEX TO PCR</b> Methodology: EIA Set up: Daily in afternoon Report available: Next day  CPT Code: 87324X2	None detected.	Stool: liquid, loose or soft Stool; specimen should be collected in a plain (no preservative) container and kept refrigerated. Hard/Formed stools will be rejected. Minimum: 1ml. <b>Repeat testing during the same episode of diarrhea is of limited value and is not recommended.</b>

MIC CDIFPCR	C DIFFICILE PCR	<b>CLOSTRIDIUM DIFFICILE BY PCR</b> Methodology: PCR Set up: Daily Report available: 24-48 hours  CPT Code: 87493	None detected	Stool: liquid, loose or soft Stool; specimen should be collected in a plain (no preservative) container and kept refrigerated. Hard/Formed stools will be rejected. <b>Repeat testing during the same episode of diarrhea is of limited value and is not recommended.</b>
MIC CLOTEST	CLOTEST FOR HELICOBACTER	<b>CLOTEST</b> Methodology: Urease Set up: Mon - Fri Report available: 24 hours  CPT Code: 87081	Negative	Tissue specimen imbedded in the CLOTEST test strip and submitted to the Laboratory within 30 minutes of collection. CLOTEST test strips are available from the Laboratory.
LAB CLOZAPINE	CLOZAPINE	<b>CLOZAPINE (CLOZARIL)</b> Includes Norclozapine (QUEST 1769) Methodology: LC/MS/MS Set up: Mon - Fri am Report available: Next day  CPT Code: 80159	Accompanies report	2 mL serum (R ) <b>FROZEN</b> <b>(SS tubes will be rejected)</b>  Minimum: 1 mL
		<b>CLUE CELLS - Order Wet Prep and Gram Stain and note "Check for Clue Cells" and deliver to Microbiology upon completion of Wet Prep.</b>		
		<b>CO<sub>2</sub> -See Carbon Dioxide (Bicarbonate)</b>		
LAB COAGMIX	COAGULATION MIXING STUDY	<b>COAG MIXING STUDIES</b> Methodology: Plasma from abnormal protime/aPTT mixed proportionately with normal plasma and tested using optical clot detection. Set up: As ordered Report available: 8 hours  CPT Code: 85611	Accompanies report  <b>Test invalid on patients taking anticoagulants.</b>	2 mL plasma (LB); <b>FROZEN</b> if not tested within 2 hours.
LAB COCCID	COCCIDIOIDES AB	<b>COCCIDIOIDES IMMITIS ANTIBODIES</b> (QUEST 3412) Methodology: CF Set up: Mon - Fri Report available: 2 days  CPT Code: 86635	Accompanies report	1 mL serum (R) <b>ROOM TEMP</b>  Minimum: 0.2 mL
QUEST 0392 Univ. Req.	Universal Requisition	<b>CODEINE, QUANTITATIVE BY GCMS</b> Methodology: GCMS Detection limit: 50 ng/mL Set up: Tues, Fri Report available: 4 days  CPT Code: 80361	Accompanies report	5 mL serum (DB) or (R) <b>No SS tubes</b>  Minimum: 2.5 mL
QUEST 19826X Univ. Req.	Universal Requisition	<b>COENZYM Q10</b> Referral test for QUEST Methodology: HPLC Set up: Daily Report available: 2 days  CPT Code: 82542	Accompanies report	1.0 mL serum (R) <b>FREEZE and protect from light.</b> Patient should fast 8-12 hrs before collection. Patient may have water.
		<b>COLD AGGLUTININ - See Mycoplasma Pneumoniae IgM</b>		
		<b>COLLAGEN CROSSLINKED N-TELOPEPTIDE -See Osteomark</b>		
		<b>COLLAGEN PROFILE - Order Sed Rate, ANA screen, Rheumatoid Factor, and CRP</b>		
LAB C1 EST	C1 ESTERASE INHIBITOR	<b>COMPLEMENT, C1 ESTERASE INHIBITOR</b> (QUEST 298) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 86160	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB C1 INHIB	C1 INHIBITOR FUNCTIONAL	<b>COMPLEMENT, C1 ESTERASE INHIBITOR, FUNCTIONAL</b> (QUEST 23042) Methodology: Immunoassay Set up: Tues, Fri Report available: Next day  CPT Code: 86161	Accompanies report	1 mL serum (R); <b>FREEZE</b> Freeze serum within 1 hour of collection. <b>No SS tubes.</b>  Minimum: 0.2 mL
QUEST 433X Univ. Req.	Universal Requisition	<b>COMPLEMENT, C2</b> Methodology: RID Set up: Mon, Wed Report available: 5 days  CPT Code: 86160	Accompanies report	1 mL serum (R or SS) Separate serum within 1 hour of time drawn, refrigerate Minimum: 0.1 mL

LAB C3	C3 COMPLEMENT	<b>COMPLEMENT, C3</b> (CPAL 3000470) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 86160	Accompanies report	1 mL serum (SS) <b>Note: If CPAL specimen pickup is &gt;24 hours, please freeze serum.</b>  Minimum: 0.5 mL
LAB C4	C4 COMPLEMENT	<b>COMPLEMENT, C4</b> (CPAL 3000475) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 86160	Accompanies report	1 mL serum (SS) <b>Note: If CPAL specimen pickup is &gt;24 hours, please freeze serum.</b>  Minimum: 0.5 mL
QUEST 354X Univ. Req.	Universal Requisition	<b>COMPLEMENT, C5</b> Methodology: RID Set up: Mon - Fri Report available: 3 days  CPT Code: 86160	Accompanies report	1 mL serum (SS) Centrifuge within 2 hour of collection and transfer serum to clean, screw capped, plastic vial. Minimum: 0.1 MI
LAB COMP PRO I	COMPLEMENT PROFILE I	<b>COMPLEMENT PROFILE 1</b> (QUEST 5412) <b>Includes: C1 Esterase Inhibitor, C3, C4, and Ch50</b> Methodology: Enzymatic, Nephelometric, Turbidimetric Set up: Monday, Saturday Report available: Next day  CPT Code: 83520, 86160(X2), 86162		1 mL serum (SS), <b>FROZEN</b> Draw blood from fasting patient. Centrifuge within 30 minutes of collection. Transfer serum to plastic, screw-capped vial. Freeze.  Minimum: 0.5 mL
QUEST 300X Univ. Req.	Universal Requisition	<b>COMPLEMENT PROPERDIN, FACTOR B</b> Methodology: Nephelometric Set up: Tues, Thurs, Sat Report available: 3 days  CPT Code: 83883	Accompanies report	1 mL serum (SS), <b>FROZEN</b> Serum should be separated within 2 hrs of time of collection.  Minimum: 0.5 mL
LAB CH50	CH50 COMPLEMENT TOTAL	<b>COMPLEMENT, TOTAL, CH50 UNITS</b> (QUEST 618) Methodology: Liposome Set up: Mon - Sat Report available: Next day  CPT Code: 86162	Accompanies report	1 mL serum (R), <b>FROZEN</b> Centrifuge serum within 1 hour of collection. Transfer serum to plastic, screw-capped vial. Freeze.  Minimum: 0.2 mL
LAB CBC	CBC WITH AUTO DIFF	<b>COMPLETE BLOOD COUNT (CBC), WITH DIFF</b> Methodology: Hematology analyzer Set up: Daily Report available: Same day  Note: If indicated, a manual WBC Differential will be performed and the charge adjusted in compliance with HCFA compliance guidelines.  <b>Order CBCDIFF if physician requests CBC and manual diff regardless of auto diff results.</b>  CPT Code: CBC - 85025 CBCDIFF - 85025, 85007	Accompanies report	4 mL blood (L) If greater than a 24 hour delay is expected in submitting the specimen a. Maintain at <b>ROOM TEMP</b> b. Submit a peripheral blood smear in addition to the blood specimen.  Minimum: 2 mL
LAB CBCNODIF	CBC NO DIFF	<b>COMPLETE BLOOD COUNT NO DIFFERENTIAL</b> Methodology: Sysmex XE-2100 Set up: Daily Report available: Same day  CPT Code: 85027	Accompanies report	4 mL blood (L) Maintain at <b>ROOM TEMP.</b>  Minimum: 2 mL
LAB COMP	COMPREHENSIVE METABOLIC PANEL	<b>COMPREHENSIVE METABOLIC PANEL</b> <b>Includes: Albumin, Alk Phos, Bilirubin Total, Calcium, Creatinine, Electrolytes, Glucose, SGOT (AST), SGPT (ALT), Total Protein, Urea Nitrogen (BUN).</b> Methodology: Various Set up: Daily Report available: Same day  CPT Code: 80053	See individual tests	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB COPPER	COPPER	<b>COPPER</b> (QUEST 363) Methodology: AS, ICP/MS Set up: Mon-Fri Report available: 1 day  CPT Code: 82525	Accompanies report	2.0 mL plasma (DK BLUE, EDTA) Separate serum or plasma from cells within 2 hours. Transfer separated serum/plasma to a plastic acid washed or metal free vial.  Minimum: 0.7 mL

LAB COPPER 24HR	URINE COPPER 24HR	<b>COPPER , 24 HOUR URINE</b> (QUEST 365) Methodology: ICP/MS Set up: Mon - Fri Report available: Next day  CPT Code: 82525	Accompanies report	7 mL aliquot of 24-hour urine no preservative. Place aliquoted specimen in an acid-washed or metal-free plastic container. 24-hour volume required. Minimum: 3 mL
QUEST 15319 Univ. Req.	Universal Requisition	<b>COPPER, URINE</b> <i>Includes creatinine</i> Methodology: ICP/MS Set up: Mon - Fri Report available: Next day  CPT Code: 82525, 82570	Accompanies report	7 mL urine collected in acid-washed container  Minimum: 3 mL
		<b>COPROPORPHYRIN and UROPORPHYRIN - See Porphyrins, Fractionated, Urine</b>		
BBK CORD	CORD BLOOD SCREEN	<b>CORD BLOOD SCREEN</b> <i>Includes ABORH and DAT</i> Methodology: Hemagglutination Set up: Daily Report available: Same day  CPT Code: 86900, 86880	Accompanies report	4 mL blood (Pink)  Minimum: 1 mL
LAB CORONARY PROF	CORONARY RISK PROFILE	<b>CORONARY RISK PROFILE</b> (QUEST 0372) <i>Includes Cholesterol, HDL Cholesterol, Triglycerides, LDL, Total Cholesterol/HDL, Cholesterol ratio calculation, VLDL calculation.</i> Methodology: Various Set up: Daily Report available: Varies with assay  CPT Code: 82465, 83718, 84478	Accompanies report	2 mL serum (SS) Drawn after 12 - 14 hours fast  Minimum: 1 mL
		<b>CORTISOL SUPPRESSION - See Dexamethasone Suppression</b>		
LAB CORTISOL	CORTISOL	<b>CORTISOL, SERUM TOTAL</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 82533	AM (8 a.m.): 6 - 23 µg/dL PM (8 p.m.): <10 µg/dL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  For level comparison, blood specimens should be drawn at 8 a.m. and 8 p.m.
LAB CORTIS UR	URINE CORTISOL 24HR	<b>CORTISOL, URINARY FREE</b> (QUEST 11280X) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 4 days  CPT Code: 82530	Accompanies report	2.0 mL aliquot of 24-hr urine, <b>FROZEN</b> Specify total 24-hr volume on request form.  Minimum: 2 mL
QUEST 6736X Univ. Req.	Universal Requisition	<b>CORTOSYN STIMULATION (ADRENAL INSUFFICIENCY PROFILE)</b> <i>4 cortisol levels: Baseline, 30, 60 AND 90 minutes post cortrosyn administration.</i> Methodology: Immunoassay Set up: Daily Report available: Next day  CPT Code: 82533(X4)	Accompanies report	4 serum (SS) samples, 1 mL each, one drawn as baseline, one drawn 30 minutes post administration, and one drawn 60 minutes post administration and one drawn 90 minutes post administration of Cortrosyn. Record date and time of collection on each specimen.  Minimum: 0.5 mL EACH
QUEST 936Z Univ. Req.	Universal Requisition	<b>COUMADIN</b> Methodology: HPLC Detection limit: 0.01 µg/mL Set up: Mon, Wed, Fri Report available: 2 days  CPT Code: 80299	Accompanies report	3.0 mL plasma EDTA (DB) Centrifuge and immediately separate plasma from the cells.  Minimum: 1.2 mL
QUEST 37071 Univ. Req.	Universal Requisition	<b>COXIELLA BURNETII (Q fever) Antibodies (IgG,IgM), with Reflex to Titers</b> Methodology: IFA Set up: Tues,Wed,Sat Report available: 4 days  CPT Code: 86638(X4) [If screens are positive, titer will be performed at an additional charge (CPT 86638: per titer)]	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
LAB COX B AB	COXSACKIE B AB	<b>COXSACKIE VIRUS B ANTIBODY PANEL (B1 - B6)</b> (QUEST 4022) Methodology: CF Set up: Mon - Fri Report available: 2 days  CPT Code: 86658(X6)	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL

		<b>COXSACKIE VIRUS CULTURE - See Enterovirus Culture</b>		
LAB C-PEPTIDE	C PEPTIDE	<b>C-PEPTIDE</b> (CPAL 1750126) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 84681	Accompanies report	1 mL serum (SS) <b>FROZEN</b> Patient should be fasting before collection.  Minimum: 0.5 mL
LAB CPK	CREATINE KINASE	<b>CPK (Creatine Phosphokinase)</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 82550	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
		<b>CPK ISOENZYMES - See CK MB or Creatinine Phosphokinase Isoenzyme Electrophoresis</b>		
		<b>C- PROTEIN - See Protein C</b>		
LAB CRP	CRP	<b>C-REACTIVE PROTEIN QUANT</b> Methodology: Turbidimetric Set up: Mon - Sat Report available: Same day  CPT Code: 86140	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB CRPSENS	CRP CARDIAC	<b>C-REACTIVE PROTEIN HIGHLY SENSITIVE (CARDIO CRP)</b> Methodology: Turbidimetric Set up: Daily Report available: same day  CPT Code: 86141	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
QUEST 4451 Univ. Req.	Universal Requisition	<b>CREATINE KINASE ISOENZYMES (CK ISOENZYMES) WITH TOTAL CK</b> Includes : Total CK, CK-BB, CK-MB, CK-MM Methodology: Spectrophotometry Set up: Sun - Fri Report available: 2 days  CPT Code: 82550, 82552	Accompanies report	2 mL serum (SS) <b>Frozen</b>  Minimum: 1.0 mL
LAB CREAT	CREAT	<b>CREATININE, SERUM or PLASMA</b> Includes GFR Methodology: Colormetric Set up: Daily Report available: Same day Order <b>CREATART</b> for arterial blood (studies only), <b>CREATVEN</b> for venous samples (studies only), <b>CREATPRE</b> or <b>CREATPOST</b> for Dialysis patients.  CPT Code: 82565	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB CREATPERI	CREATININE PERITONEAL FLUID	<b>CREATININE, Peritoneal Fluid</b> Methodology: Colormetric Set up: Daily Report available: Same day  CPT Code: 82565	Accompanies report	1 ml sterile fluid  Minimum: 0.5 mL
LAB UCREAT12 or UCREAT	URINE CREATININE 12 HR -or- URINE CREATININE RANDOM	<b>CREATININE, URINE (12 hr or random)</b> Methodology: Colormetric Set up: Daily Report available: Same day  CPT Code: 82570	None available	10 mL urine, collected without preservatives  Minimum: 1 mL
LAB UCREAT24	URINE CREATININE 24HR	<b>CREATININE 24 HR UR</b> Methodology: Colormetric Set up: Daily Report available: Same day  CPT Code: 82570	600 - 2000 mg/24 hr	10 mL urine, collected without preservatives, refrigerate during collection
LAB CREATCL	CREATININE CLEARANCE URINE	<b>CREATININE CLEARANCE</b> Serum creatinine must be ordered and drawn at some time during the 24 hr collection Methodology: Colormetric Set up: Daily Report available: Same day  CPT Code: 82575	100 - 180 mL/min	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) -and- 20 mL aliquot of 24-hr urine, collected without preservatives; refrigerate during collection. Certain preservatives can be used; see Appendix A. Specify total 24-hr volume on request form NOTE: The blood specimen must be drawn at some point during the 24-hr urine collection including up to 2 hours before or after urine collection is completed.

BBK LRPRBC	LEUKOREduced PRBCS	<b>CROSSMATCH FOR PACKED CELLS</b> Methodology: Tube Agglutination Set up: As requested Report available: Same day  CPT Code: 86920		6.0 mL whole blood (Pink)  Patient and specimen must be tagged with a unique identification number band.
LAB CRYOFIBRIN	CRYOFIBRINOGEN	<b>CRYOFIBRINOGEN (QUEST 376)</b> Methodology: Cryoprecipitation Set up: Sun - Fri Report available: 3 days  CPT Code: 82585	Accompanies report	Minimum: 6 mL citrated plasma (LB) <b>ROOM TEMP</b>  Fasting sample is required. Collect blood into 3 LB tubes. Place immediately in 37°C water bath. Centrifuge in centrifuge carriers prewarmed to 37°C at 3000 rpm for a minimum of 10 minutes. Separate plasma from cells, avoiding transfer of red cells, into plastic transport tube.  Minimum: 3 mL
LAB CRYOGLOB	CRYOGLOBULIN QUALITATIVE	<b>CRYOGLOBULINS, QUALITATIVE, ANALYSIS (QUEST 1012)</b> Methodology: Visual Inspection Set up: Daily Report available: 4 days  CPT Code: 82595	Accompanies report	5.0 mL serum (R ) <b>ROOM TEMP</b> After collection, allow specimen to clot at 37°C for 3-60 minutes. Centrifuge clotted tube in a pre-warmed centrifuge. Pour serum into a plastic, screw-capped vial. Minimum: 2.5 mL
QUEST 4003 Univ. Req.	Universal Requisition	<b>CRYOGLOBULINS, QUANTITATIVE</b> Methodology: Visual Inspection Set up: Daily Report available: 4 days  CPT Code: 82595	Accompanies report	6.0 mL serum (R ) <b>ROOM TEMP</b> Allow serum to clot for 1 hr in 37°C heat block. After clotting, centrifuge in prewarmed centrifuge (run centrifuge for 10 minutes prior to adding specimen) for 10 minutes. Decant serum into screw-capped vial. Note: no other tests can be added to the sample; cryoglobulin evaluation only.
LAB CRY AG CSF -or- LAB CRY AG SER	CSF CRYPTOCOCCAL AG -or- CRYPTOCOCCAL AG SERUM	<b>CRYPTOCOCCAL ANTIGEN WITH REFLEX TO TITER (QUEST 11196)</b> Methodology: Latex Agglutination Set up: Daily Report available: Next day  CPT Code: 86403 (86406 if titer indicated)	Accompanies report	2.0 mL serum (SS) or CSF  Minimum: 0.5 mL
QUEST 30429 Univ. Req.	Universal Requisition	<b>CRYPTOCOCCAL ANTIBODIES</b> Methodology: Agglutination Set up: Mon - Sat Report available: 2 days  CPT Code: 86403	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB CRYPTO	CRYPTOSPORIDIUM STOOL	<b>CRYPTOSPORIDIUM, FECAL (QUEST 2134)</b> <i>Also detects Isospora and Cyclospora</i> Methodology: Smear Set up: Daily Report available: Next day  CPT Code: 87015, 87206	Accompanies report	Random stool, collected in container with 10% formalin OR Total-Fix <b>Unpreserved stool is unacceptable.</b>
		<b>CRYSTALS (BODY FLUID) - See Synovial Fluid Crystals Analysis</b>		
		<b>CSF, CYTOLOGIC EXAMINATION - See Cytology, Body Fluids</b>		
		<b>CSF, INDIA INK PREP - See India Ink Preparation</b>		
		<b>CSF GAMMA GLOBULIN - See Protein Electrophoresis, Cerebrospinal Fluid</b>		
		<b>CSF IgG SYNTHESIS - See Cerebrospinal Fluid, IgG Synthesis Rate</b>		
MIC WOUNDCULT	WOUND CULTURE	<b>CULTURE, ABSCESS, WOUND, OR OTHER SITE (INCLUDES GRAM STAIN)</b> A charge will be added for each organism identification and sensitivity that is indicated. Methodology: Culture Set up: Sun - Sat Report available: Preliminary 1-2 day Final 2-5 days  CPT Code: 87070, 87205	No growth	Send aerobic culturette (with 2 swabs inserted). Specify specimen source and specimen description. NOTE: Aerobic swabs do not support growth of anaerobic organisms. If anaerobes are suspected, order a Culture, Anaerobic and submit an additional specimen in an anaerobic culture tube.

<p>MIC WOUND+STAPHPCR</p>	<p>WOUND CULTURE PLUS STAPH PCR</p>	<p><b>WOUND CULTURE + STAPH PCR FOR SKIN AND SOFT TISSUE SOURCES (INCLUDES GRAM STAIN)</b> A charge will be added for each organism identification and sensitivity that is indicated. Methodology: Culture/PCR Set up: Sun - Sat Report available:PCR same day; Culture: Preliminary 1-2 day Culture: Final 2-5 days  CPT Code: 87070, 87205, 87640, 87641</p>	<p>Culture: No growth Staph PCR: Not detected</p>	<p>Send aerobic culturette (with 2 swabs inserted). Specify specimen source and specimen description. NOTE: Aerobic swabs do not support growth of anaerobic organisms. If anaerobes are suspected, order a Culture, Anaerobic and submit an additional specimen in an anaerobic culture tube.</p>
<p>MIC AFBCULT</p>	<p>AFB CULTURE</p>	<p><b>CULTURE, ACID-FAST (TB)</b> <i>Includes AFB smear.</i> If culture positive, identification will be performed by PCR at CPAL laboratory if indicated. Methodology: Culture Set up: Mon - Sat Report available: 8 weeks (negative, preliminary at 2, 4 and 6 weeks)  CPT Code: 87116, 87153</p>	<p>No acid-fast bacilli isolated</p>	<p>Primary specimen (sputum, or 5 mL aliquot of first morning urine, tissue and body fluids).  If TB is isolated or special request, sensitivities will be sent out to reference laboratory on positive isolates.</p>
<p>MIC AFBSURG</p>	<p>AFB SURGICAL CULTURE</p>	<p><b>CULTURE, ACID-FAST (TB) SURGICAL</b> <i>Includes AFB smear.</i> If culture positive, identification will be performed by PCR at CPAL laboratory if indicated. Methodology: Culture Set up: Mon - Sat Report available: 8 weeks (negative, preliminary at 2, 4 and 6 weeks)  CPT Code: 87116, 87153</p>	<p>No acid-fast bacilli isolated</p>	<p>Primary specimen (sputum, or 5 mL aliquot of first morning urine, tissue and body fluids).  If TB is isolated or special request, sensitivities will be sent out to reference laboratory on positive isolates.</p>
		<p><b>CULTURE, ACID-FAST (TB), BLOOD - See Culture, Mycobacterium, Blood)</b></p>		
		<p><b>CULTURE, ADENOVIRUS - See Adenovirus Culture</b></p>		
<p>MIC AERSURG</p>	<p>AEROBIC SURGICAL CULTURE</p>	<p><b>CULTURE,AEROBIC SURGICAL (INCLUDES GRAM STAIN)</b> A charge will be added for each organism identification and sensitivity that is indicated. Methodology: Culture Set up: Sun - Sat Report available:Preliminary 1-2 day Final 2-5 days  CPT Code: 87070</p>	<p>No growth</p>	<p>Send aerobic culturette (with 2 swabs inserted). Specify specimen source and specimen description. NOTE: Aerobic swabs do not support growth of anaerobic organisms. If anaerobes are suspected, order a Culture, Anaerobic and submit an additional specimen in an anaerobic culture tube.</p>
<p>MIC ANACULT</p>	<p>ANAEROBIC CULTURE</p>	<p><b>CULTURE, ANAEROBIC</b> All material from sites not harboring indigenous (normal) flora is suitable for anaerobic culturing. Any specimen contaminated with "normal flora" will not be cultured for anaerobes. A charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available:Preliminary 2-3 day Final: 7-9 days  CPT Code: 87075</p>	<p>Varies according to site and specimen</p>	<p>Specimen collected and submitted in anaerobic transport media (available from Lab).</p>
<p>MIC ANASURG</p>	<p>ANAEROBIC SURGICAL CULTURE</p>	<p><b>CULTURE, ANAEROBIC SURGICAL</b> All material from sites not harboring indigenous (normal) flora is suitable for anaerobic culturing. Any specimen contaminated with "normal flora" will not be cultured for anaerobes. A charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available:Preliminary 2-3 day Final: 7-9 days  CPT Code: 87075</p>	<p>Varies according to site and specimen</p>	<p>Specimen collected and submitted in anaerobic transport media (available from Lab).</p>

<p>MIC BLDCULT -or- BLDCULTPED</p>	<p>BLOOD CULTURE / BLOOD CULTURE, PEDIATRICS</p>	<p><b>CULTURE, BLOOD</b> A charge will be added for each organism identification and sensitivity if indicated. Methodology: Culture (BacTec) Set up: Daily Report available: Preliminary 2 days Final : 5-7 days Positives are called immediately <u>Blood culture (adults)</u>: 1 set contains 1 aerobic and 1 anaerobic bottle <u>Blood culture (pediatrics)</u>: only contains 1 pediatric bottle  CPT Code: 87040</p>	<p>No growth</p>	<p>5 - 10 mL blood in both an aerobic and anaerobic blood culture bottle -or- Minimum: 1 mL blood in pediatric blood culture bottle</p>
<p>LAB C BLD QUAN</p>	<p>QUANTITATIVE BLOOD CULTURE</p>	<p><b>CULTURE, BLOOD QUANTITATIVE</b> Collected at WellSpan Ephrata Community Hospital and specimen referred to York Hospital for testing. Methodology: Culture Set up: Daily Report available: 5 days  CPT Code: 87040</p>	<p>No growth</p>	<p>Two (2) isolator Tubes, each containing 5-10 mL of blood collected using aseptic technique. One tube should be collected from indwelling line and a second, separate tube via venipuncture. Label both tubes with the following information: a. Patient name and location b. Date/time of collection c. "FOR QUANTITATIVE BLOOD CULTURE" d. Collection site (catheter or vein)  Specimens must be packaged for transport and delivered to York Hospital within 16 hours of collection. Hold at <b>ROOM TEMPERATURE</b> until delivery.</p>
<p>MIC CAMPYCULT</p>	<p>CAMPYLOBACTER CULTURE</p>	<p><b>CULTURE, CAMPYLOBACTER</b> A charge will be added for each organism identification. Methodology: Culture Set up: As requested Report available: Preliminary 1-3 day Final 3-5 days  CPT Code: 87081</p>	<p>No Campylobacter isolated</p>	<p>Random fresh stool submitted in Cary-Blair Transport Media.  Minimum: 1 g</p>
<p>MIC CTCULT</p>	<p>CATHETER TIP CULTURE</p>	<p><b>CULTURE, CATHETER TIP</b> A charge will be added for each organism identification and susceptibility when indicated. Total parenteral nutrition (TNP) status of the patient will be requested at time of order placement. Methodology: Semiquantitative Culture Set up: Daily Report available: 1-4 days  CPT Code: 87070</p>	<p>&lt;15 colony forming units of microorganisms, unless otherwise clinically indicated</p>	<p>Hold distal end of catheter over a sterile container, cut the cath tip with sterile scissors and drop the last 2-3 inches into the container. Do <u>not</u> add liquid to container.</p>
		<p><b>CULTURE, CHLAMYDIA TRACHOMATIS - See Chlamydia trachomatis Culture</b></p>		
<p>QUEST 2107 Univ. Req.</p>	<p>Universal Requisition</p>	<p><b>CULTURE, CLOSTRIDIUM DIFFICILE</b> NOTE: This assay does not detect the presence of C. difficile toxin in stool specimens. For toxin assay order C DIF. Methodology: Culture Set up: Daily Report available: 4 days  CPT Code: 87081</p>	<p>None detected</p>	<p>5 g stool in clean, dry container <b>FROZEN</b> Minimum: 1 g</p>
<p>MIC CSFCULT</p>	<p>CSF CULTURE</p>	<p><b>CULTURE, CSF (INCLUDES GRAM STAIN)</b> A charge will be added for each organism identification and sensitivity when indicated. An additional charge will be added for the Gram Stain. Methodology: Culture, Gram Stain Set up: Daily Report available: Preliminary 1-2 day Final 3-5 days  CPT Code: 87070</p>	<p>No growth and no organisms observed</p>	<p>CSF in sterile container</p>
		<p><b>CULTURE, EAR, or EYE - See Culture, Wound</b></p>		

MIC STOOLCULT	STOOL CULTURE AND SHIGALIKE TOX	<p><b>CULTURE for ENTERIC PATHOGENS (STOOL)- + SHIGA-LIKE TOXIN</b> Includes Salmonella, Shigella , and Campylobacter cultures, and screen for toxin produced by E. coli O157:H7 and other EHEC.</p> <p>A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: Preliminary 1-3 day Final 3-5 days</p> <p>CPT Code: 87045, 87046, 87899(X2)</p>	No Salmonella or Shigella isolated and no organisms seen resembling Campylobacter.	Random fresh stool submitted in Cary-Blair Transport Media.  Minimum: 1 g
		<b>CULTURE, ENTEROVIRUS - See Enterovirus Culture</b>		
		<b>CULTURE, FECES - See Culture for Enteric Pathogens (Stool)</b>		
LAB BFCULT	BODY FLUID CULTURE	<p><b>CULTURE, FLUID</b> Includes cultures from sterile fluids other than CSF (pleural, synovial fluids, semen, etc.).</p> <p>If positive, a charge will be added for each organism identification and sensitivity. Methodology: Culture Set up: Daily Report available: Preliminary 1-3 day Final 3-5 days</p> <p>CPT Code: 87070</p>	No growth	Body fluid in sterile container. Specify specimen source, culture site and pertinent history. If an anaerobic culture is requested on the same specimen, in addition to the aerobic culture, <b>DO NOT REFRIGERATE THE SPECIMEN.</b>
LAB CFUNGBLD	FUNGAL BLOOD CULTURE	<p><b>CULTURE, FUNGUS, BLOOD (QUEST 4606X)</b> If positive, a charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available: 30 days (negative preliminary at 2 weeks)</p> <p>CPT Code: 87103</p>	No fungus isolated	5.0 mL Blood in Bactec® Myco/F Lytic aerobic blood bottle, <b>ROOM TEMP Effective 9/14/09 - Green top Sodium Heparin is not longer acceptable.</b>  Minimum: 3 mL
MIC FUNGUSCULT	FUNGUS CULTURE	<p><b>CULTURE, FUNGUS (INCLUDES KOH PREP)</b> Identification performed by PCR at the CPAL laboratory if indicated. Methodology: Culture Set up: Daily Report available: 3-6 weeks (negative preliminary at 1 week)</p> <p>CPT Codes: 87101, 87153</p>	No fungus isolated	Primary specimen in sterile container or culturette with swabs.
MIC CSFFUNG	CSF FUNGUS CULTURE	<p><b>CULTURE, FUNGUS, CSF (INCLUDES INDIA INK)</b> Identification performed by PCR at CPAL laboratory if indicated. Methodology: Culture Set up: Daily Report available: 3-6 weeks(negative preliminary at 1 week)</p> <p>CPT Code: 87101, 87153</p>	No fungus isolated	1.0 mL CSF in a sterile container
MIC FUNGUSSURG	FUNGUS SURGICAL CULTURE	<p><b>CULTURE, FUNGUS SURGICAL (INCLUDES KOH PREP)</b> Identification performed by PCR at CPAL laobootory if indicated. Methodology: Culture Set up: Daily Report available: 3-6 weeks (negative preliminary at 1 week)</p> <p>CPT Code: 87101, 87153</p>	No fungus isolated	Primary specimen in sterile container or culturette with swabs.

MIC GCCULT	NEISSERIA GONORRHOEAE CULTURE	<b>CULTURE, GONOCOCCUS (GC)</b> Includes beta-lactamase testing, if positive. A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: 3-5 days  See also - Neisseria gonorrhoeae, DNA probe as alternative for cervical, urethral, or urine testing only  CPT Code: 87081	No Neisseria gonorrhoeae isolated	Can be used for specimens from any body site except for urine.  Inoculated medium (Transgrow, Thayer-Martin), maintained at warm temperature and delivered to the Lab within 2 hours of collection. Keep bottle upright when collecting specimen and inoculating medium. Replace bottle cap immediately.
MIC GBSCREEN	GROUP B STREP SCREEN	<b>CULTURE, GROUP B STREP (GBS)</b> A charge will be added for an organism identification and sensitivity if indicated and/or requested. Methodology: Culture Set up: Daily Report available: 24 - 72 hours  CPT Code: 87081	No Group B Strep isolated  <b>Requisition must indicate penicillin allergy status (yes or no)</b>	Transport swab from appropriate perianal source. Swab will be placed in enhancement media (LIM Broth or Todd Hewitt Broth) and incubated in CO <sub>2</sub> at 35C when received in Lab.
		<b>CULTURE, HERPES SIMPLEX VIRUS - See Herpes Simplex Virus (HSV) Culture</b>		
LAB UACULTIF	UA CULTURE IF INDICATED	<b>CULTURE IF INDICATED (URINE)</b> If UA shows positive Leukocyte Esterase, or positive Nitrite, or if microscopic examination reveals the presence of bacteria or greater than 5 WBC/hpf, then the urine culture will be performed and charged.	Not indicated	5 mL freshly voided urine in sterile container. Specify specimen source.  Minimum: 3 mL
LAB LEGIONELLA CULT	LEGIONELLA PNEUMOPHILA CULTURE	<b>CULTURE, LEGIONELLA PNEUMOPHILA (QUEST 960)</b> Methodology: Culture Set up: Mon-Fri night Report available: 10 days CPT Code: 87081 (A charge will be added for each identification)	No Legionella isolated	Lung Biopsy or Aspirate: Place in sterile container Sputum: Pt to gargle with water then cough to collect; Tissue: Add small amount of sterile, non-bacteriostatic, distilled water to prevent drying, if necessary. Do not add saline.  <b>REFRIGERATE</b>
LAB C AFB BLD	AFB BLOOD CULTURE	<b>CULTURE, MYCOBACTERIUM, BLOOD (QUEST 4161)</b> Methodology: Continuous Blood Culture System Set up: Daily Report available: 6-8 weeks  CPT Code: 87116 (If positive, a charge will be added for each organism identification.)	No acid-fast bacilli isolated	5.0 mL Blood in Bactec® Myco/F Lytic aerobic blood bottle <b>Effective 9/14/09 - Green top Sodium Heparin is not longer acceptable.</b> <b>ROOM TEMP</b>  Minimum: 1 mL
LAB MYCO CULT	MYCOPLASMA HOMINIS CULTURE	<b>CULTURE, MYCOPLASMA HOMINIS (QUEST 3888)</b> Methodology: Culture Set up: Daily Report available: 10 days  CPT Code: 87109	Accompanies report	Urogenital, respiratory, body fluids, tissues, wounds, urine semen or CSF in VCM or M4 viral transport medium  Specify source at time of order.
LAB MYCO-UREA CULT	MYCO HOMINIS UREAPLASMA CULT	<b>CULTURE, MYCOPLASMA HOMINIS / UREAPLASMA (QUEST 7503)</b> Methodology: Culture Set up: Daily Report available: 10 days  CPT Code: 87109	Accompanies report	Urogenital, respiratory, body fluids, tissues, wounds, urine in VCM viral transport medium MART not acceptable. Specify source at time of order.
		<b>CULTURE, PARAINFLUENZA VIRUS - See Parainfluenza Virus Culture</b>		
MIC SPUCULT	SPUTUM CULTURE	<b>CULTURE, SPUTUM (INCLUDES GRAM STAIN)</b> (Includes bronchoscopy) A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: 2-5 days  CPT Code: 87070	Normal respiratory flora	Primary specimen : sputum, bronch washes or trach secretions.

MIC MRSASUR	MRSA SURVEILLANCE CULTURE	<b>CULTURE, R/O MRSA</b> A charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available: 2-4 days  CPT Code: 87081	No Methicillin Resistant Staph Aureus isolated	Transport swab. Specify culture source and body site.
MIC VRECULT	VRE SURVEILLANCE CULTURE	<b>CULTURE, R/O VRE</b> A charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available: 2-4 days  CPT Code: 87081	No Vancomycin Resistant Enterococci isolated	Transport swab. Specify culture source and body site.
MIC THCULT -or- MIC NOSECULT	THROAT CULTURE -or- NOSE CULTURE	<b>CULTURE, THROAT or NOSE</b> A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: 1-4 days  CPT Code: 87070	Normal respiratory flora	Send transport swab. Specify culture source and body site.
		<b>CULTURE, TUBERCULOSIS - See Culture, Acid-fast (TB)</b>		
QUEST 5499 Univ. Req.	Universal Requisition	<b>CULTURE, UREAPLASMA UREALYTICUM (T-strain Mycoplasma)</b> Methodology: Culture Set up: Daily Report available: 10 days  CPT Code: 87109 (If positive, this procedure progresses to a Ureaplasma identification for an additional charge.)	Accompanies report	Swab (urogenital specimen) or sterile fluid (1 mL minimum) or tissue or respiratory samples (1 mL minimum) preferred or pellet (urine) acceptable; all in M4 Transport Medium
MIC URCULT	URINE CULTURE	<b>CULTURE, URINE</b> Sensitivities are not performed on mixed cultures of three or more organisms. A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: 2-4 days  CPT Code: 87086	Negative	5 mL aseptically collected urine in sterile container or transfer into vacutainerC&S preservative urine transport tube. Specify specimen source.  Minimum: 3 mL in sterile cup or 4mL in transport tube.
MIC GENCULT	GENITAL CULTURE	<b>CULTURE, UROGENITAL</b> A charge will be added for each organism identification and sensitivity when indicated. Methodology: Culture Set up: Daily Report available: 2-4 days  CPT Code: 87070	Normal urogenital flora and no beta-streptococci isolated	Send transport swab. Specify culture source and body site.
QUEST 935 LAB	Universal Requisition	<b>CULTURE, VIBRIO (QUEST 935)</b> Methodology: Culture, Aerobic Isolation and Identification Procedures Set up: Daily Report available: 3-6 days  CPT Code: 87046 (A charge will be added for each organism identification.)	No Vibrio isolated	3.0 grams fresh random stool collected in Cary-Blair <b>ROOM TEMP</b>  Minimum: 1 g
MIC YECULT	YEAST CULTURE	<b>CULTURE, YEAST (INCLUDES GRAM STAIN)</b> A charge will be added for each organism identification. Methodology: Culture Set up: Daily Report available: 5-7 days  CPT Code: 87102	No yeast isolated	Send aerobic culturette (with 2 swabs inserted). Specify specimen source and description.
LAB YERSINIA	YERSINIA CULTURE	<b>CULTURE, YERSINIA (QUEST 4487X)</b> Methodology: Culture and Identification Procedures Set up: Daily Report available: 3 days  CPT Code: 87046 (A charge will be added for each organism identification and sensitivity.)	No Yersinia isolated	3 grams fresh random stool collected in Cary-Blair <b>ROOM TEMP</b>  Minimum: 1 g

QUEST 400 Univ. Req.	Universal Requisition	<b>CYANIDE</b> (Nitroprusside therapy should be monitored with thiocyanate, test code 879X THIOCYANATE). Methodology: Colorimetric Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 82600	Accompanies report	10 mL whole blood (Gn)  Minimum: 1 mL
		<b>CYCLIC AMP - See AMP Cyclic</b>		
		<b>CYCLIC CITRULLINATED PEPTIDE ANTIBODY - See CCP</b>		
		<b>CYCLOSPORA - See Cryptosporidium, fecal</b>		
LAB CYCLOSPOR	CYCLOSPORINE	<b>CYCLOSPORINE, BLOOD</b> (QUEST 8812) Methodology: Immunoassay Set up: Daily Reprt available: 2 days  CPT Code: 80158	Accompanies report	2 mL whole blood (L) Collect as a trough 12 hours after last dose.  Minimum: 1 mL
LAB CYSTIC FIB	CYSTIC FIBROSIS SCREEN	<b>CYSTIC FIBROSIS CARRIER SCREEN</b> (QUEST 140841) Methodology: PCR Set up: Daily Reprt available: 7 days  CPT Code: 81220	Accompanies report	4 mL EDTA whole blood (L); <b>ROOM TEMP</b>  Minimum: 3 mL
LAB CYSTINE UR	URINE CYSTINE 24HR	<b>CYSTINE, URINE (24 HR)</b> (QUEST 6016) Methodology: LC/MS Set up: Tues, Thurs Reprt available: 5 days  CPT Code: 82131	Accompanies report	2 mL aliquot of 24-hr urine, no preservatives; Specify total volume. Please note if patient is in pentacillamine therapy <b>FREEZE</b>  Minimum: 5 mL
LAB CYSTINE RAN UR	URINE CYSTINE RANDOM	<b>CYSTINE, RANDOM URINE</b> (QUEST 6017) Includes creatinine Methodology: LC/MS Set up: Tues, Thurs Reprt available: 5 days	Accompanies report	1.8 mL of random urine, no preservative <b>FREEZE</b>  Minimum: 0.5 mL
LAB GYN	LAB ONLY	<b>CYTOLOGY, CERVICAL/VAGINAL SMEAR ( THIN PREP or PAP SMEAR)</b> Papanicolaou-stained smears are examined microscopically for detection of fungus, Trichomonas, viral changes, and cellular changes indicating inflammatory, dysplastic, and/or neoplastic lesions.	No atypical or abnormal cells detected. Method of reporting; Bethesda System.	Smear collected material on one or more slides and sprayed <b>IMMEDIATELY</b> with cytologic fixative. Do NOT allow slides to air dry. PATIENT'S NAME must be written on frosted end of slide. Place slides in slide folder and seal with scotch tape. Submit specimen together with a CYTOLOGY REQUEST FORM with all pertinent patient history and information completed on the form. A signed Advanced Beneficiary Notice is required when a Cytology (Pap Smear) is ordered on an outpatient covered by Medicare. Medicare limits payment to one routine screen every two years.
LAB GYN	LAB ONLY	<b>CYTOLOGY, VAGINAL SMEAR(PAP SMEAR) WITH MI (MATURATION INDEX)</b>	Preovulatory: 0/40/60 Post Ovulatory: 0/70/30 Perimenopausal: 0/80/20 Post menopausal: 50/50/0	Vaginal wall smear collected as in cervical/vaginal pap smear above. Label "vaginal" on slide with patient name.

LAB CYTO ORD	CYTOLOGY ORDER	<p><b>CYTOLOGY, BODY FLUIDS - GENERAL</b> (Bronchial, esophageal, gastric, colonic, etc., brushings; breast cyst fluid; cerebrospinal fluid; ovarian cyst fluid; voided urine)</p> <p>Depending on the type of specimen received, a variety of preparations are made, including direct smears, cytopins, etc. Papanicolaou-stained smears are examined microscopically for cellular changes indicating benign, inflammatory, dysplastic, and/or neoplastic lesions and are also examined for detection of organisms and viral changes (herpes CMV, etc.). For breast cyst aspiration: multiple specimens without sites specified will be pooled and processed. When multiple sites are specified, specimens will be processed separately. <b>WHEN JUDGED NECESSARY OR USEFUL, A CELL BLOCK WILL BE PERFORMED AT AN ADDITIONAL CHARGE.</b></p>	No atypical or abnormal cells detected.	<p>See pages CYTOLOGY section in the first section of the manual for specific collection instructions.</p> <p>Submit a completed CYTOLOGY REQUEST FORM with the specimen.</p>
LAB CYTO ORD	CYTOLOGY ORDER	<p><b>CYTOLOGY, FINE NEEDLE ASPIRATION, GENERAL</b> (Thyroid, lymph node, solid breast mass, liver, lung, etc.) Examination of fluid and tissue fragments obtained by fine needle aspiration is performed using cytologic techniques and stains.</p>	No atypical or abnormal cells detected.	<p>Smears made at the time of procedure must be labeled and spray fixed or immersed in ethanol <b>IMMEDIATELY</b> upon spreading. Liquid specimens may be submitted in Saccomanno Solution (available in the laboratory) or in capped syringe without needle. Consult laboratory.</p> <p>Submit a completed CYTOLOGY REQUEST FORM with the specimen.</p>
LAB CMV CULT	CMV CULTURE	<p><b>CYTOMEGALOVIRUS (CMV) CULTURE</b> (QUEST 842) Methodology: Rapid culture Set up: Daily Report available: 5 days  CPT Code: 87254</p>	Negative	Bronchial brushing or washing in sterile container; throat washing in sterile container; throat swab in M4; urine in sterile container. <b>PLEASE NOTE:</b> CMV culture is no longer performed on blood or biopsy specimens (7/6/10)
LAB CMV PCR	CMV DNA PCR	<p><b>CYTOMEGALOVIRUS DNA QUANT PCR</b> (QUEST 10600) Methodology: RT-PCR Set up: Daily Report available: 1 day  CPT Code: 87497</p>	Accompanies report	1 mL EDTA whole blood (L) or 10 mL random urine <b>REFRIGERATED</b> or 2 mL body fluid <b>FROZEN</b> Minimum: 0.5 mL EDTA whole blood
LAB CMVIGG	CMV IGG ANTIBODY	<p><b>CYTOMEGALOVIRUS IgG ANTIBODIES</b> (CPAL 3001430) Methodology: Chemiluminescent Set up: Mon-Fri Report available: Next day  CPT Code: 86644</p>	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB CMV IGM	CMV IGM ANTIBODY	<p><b>CYTOMEGALOVIRUS IgM ANTIBODIES</b> (CPAL 3001440) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86645</p>	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB CMVGRP	CMV IGG/IGM GROUP	<p><b>CYTOMEGALOVIRUS IgG/IgM ANTIBODIES</b> (CPAL 3001425) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86644,86645</p>	Accompanies report	2 mL serum (SS) Minimum: 1.0 mL
LAB DDIMER	DDIMER	<p><b>D-DIMER</b> Methodology: Immunoturbidimetric Set up: Daily Report available: Same day  CPT Code: 85379</p>	0 - 500 ng/mL	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB)
		<b>DALMANE - See Flurazepam</b>		

QUEST 219 Univ. Req.	Universal Requisition	<b>DELTA-AMNIOLEVULINIC ACID (ALA)</b> Methodology: Colorimetric Set up: Mon, Wed, Fri Report available: 2 days  CPT Code: 82135	0.00 - 0.54 mg/dL	24-hr urine, preserved with 25 mL 6N HCl  -or- 2 mL aliquot of 24-hr urine, collected same as above. Specify total volume. <b>Wrap container in aluminum foil to protect from light</b>  Minimum: 1 mL
QUEST 93256 Univ. Req.	Universal Requisition	<b>DENGUE FEVER ANTIBODIES (IgG, IgM)</b> Methodology: Immunoassay Set up: Tues-Sat Report available: 1-3 days  CPT Code: 86790(X2)	Accompanies report	1 mL serum (R )  Minimum: 0.5 mL
		<b>DEPAKENE - See Valproic Acid</b>		
		<b>DEPAKOTE - See Valproic Acid</b>		
LAB DESIP	DESIPRAMINE	<b>DESIPRAMINE</b> (QUEST 412) <b>Included when imipramine is ordered.</b> Methodology: LC/MS/MS Detection limit: 5 ng/mL Set up: Mon - Fri Report available: 1 day  CPT Code: 80335	Accompanies report	3.0 mL serum (R )  Minimum: 1.2 mL  Collect at steady-state trough concentration. Specimens should be collected >12 hrs after dose.
LAB DHEA DIREC	DHEA DIRECT	<b>DHEA (DEHYDROEPIANDROSTERONE)</b> (QUEST 19894X) Methodology: LC/MS/MS Set up: Sun - Fri Report available: 6 days  CPT Code: 82626	Accompanies report	1 mL serum (R ) <b>SS tubes will be rejected.</b>  Minimum: 0.5 mL
LAB DHEA SULF	DHEA SULFATE	<b>DHEA SULFATE (DEHYDROEPIANDROSTERONE SULFATE), DHEA-S</b> (CPAL 1750222) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 82627	Accompanies report	1 mL serum (SS) <b>FROZEN</b>  Minimum: 0.5 mL
QUEST 30543X Univ. Req.	Universal Requisition	<b>11-DESOXYCORTISOL</b> Methodology: LC/MS/MS Set up: Tues Report available: 3 days  CPT Code: 82634	Accompanies report	1 mL serum (R) Separate serum after clotting. Ship serum refrigerated or frozen. An early morning specimen is preferred. <b>SS tubes will be rejected.</b> Minimum: 0.25 mL
LAB DEXAMETH	DEXAMETHASONE SUPPRESSION TEST	<b>DEXAMETHASONE SUPPRESSION (DST), 1 specimen</b> (QUEST 20472) <b>Includes Cortisol</b> Methodology: IA Set up: Daily Report available: Next day  CPT Code: 82533	Accompanies report	1 mL serum (SS) The ordering physician should administer 1 mg Dexamethasone between 11pm and midnight. Draw serum for cortisol testing between 7-9am the next morning. Mark all tubes with date/time drawn.  Minimum: 0.5 mL
LAB DIAB PAN (Order Group)	LAB ONLY	<b>DIABETES PANEL</b> <b>Includes Glycohemoglobin, random urine Microalbumin, and Lipid Panel.</b> Methodology: See individual tests Set up: See individual tests Report available: See individual tests  CPT Code: 83036, 82043, 80061	Accompanies report	3 mL (L) <b>AND</b> 4 mL (SS) <b>AND</b> 10 mL random urine
LAB DIAZEPAM	DIAZEPAM	<b>DIAZEPAM (VALIUM) AND METABOLITES</b> (QUEST 12936) <b>Includes Nordiazepam, Oxazepam, Temazepam</b> Methodology: LC/MS/MS Set up: Mon-Sat Report available: 5 days  CPT Code: 80346	Accompanies report	1 mL serum (R). <b>No SS tubes.</b> Promptly centrifuge and separate serum into plastic, screw-capped vial. Minimum 0.4 mL
LAB DIBU-CHOL	CHOLINESTERASE WITH DIBUCAINE	<b>CHOLINESTERASE, SERUM, WITH DIBUCAINE INHIBITION</b> (QUEST 7961) Methodology: Kinetic Spectrophotometric Set up: Mon-Fri Report available: Next day  CPT Code: 82480, 82638	Accompanies report	1.0 mL serum (SST)  Minimum: 0.5 mL

LAB DIFF	MANUAL DIFFERENTIAL	<b>DIFFERENTIAL, WBC (MANUAL)</b> Methodology: Microscopic examination Set up: Daily Report available: Same day  CPT Code: 85007	Accompanies report	Peripheral smear prepared from fresh blood -or- 4 mL blood (L)  Minimum: 1 mL
QUEST 417Z Univ. Req.	Universal Requisition	<b>DIGITOXIN</b> Methodology: Immunoassay Detection limit: 5 ng/mL Set up: Tues,Thurs Report available: 4 days  CPT Code: 80299	Therapeutic: 10 - 30 ng/mL	1 mL serum (R )  Minimum: 0.25 mL
LAB DIG	DIGOXIN	<b>DIGOXIN</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80162	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) collected during the post-distributive phase which occurs between 8 and 24 hr after any dose  Minimum: 0.5 mL
LAB DHT	DIHYDRO-TESTOSTERONE	<b>DIHYDROTOSTERONE (DHT)</b> (QUEST 90567) Methodology: LC/MS/MS Set up: Sun-Thurs Report available: 4 days  CPT Code: 80327	Accompanies report	1.0 mL serum (R)  Minimum: 0.6 mL
		<b>1,25-DIHYDROXY VITAMIN D - See Vitamin D, 1,25-Dihydroxy</b>		
		<b>DILANTIN - See Phenytoin</b>		
LAB RUSS VIPER	RUSSEL VIPER VENOM TIME	<b>DILUTE RUSSELL'S VIPER VENOM TME</b> (QUEST 33693) Methodology: Clot detection Set up: Mon-Sat Report available: Next day  CPT Code: 85613	Accompanies report	Minimum: 2 mL <b>FROZEN</b> citrated plasma (LB) 1) Draw plain red top tube and discard or use for other testing 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes.  Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE IMMEDIATELY</b>
		<b>DIPHENYLHYDANTOIN - See Phenytoin</b>		
LAB DIPHTH ANTITOX	DIPHTHERIA ANTITOXOID AB	<b>DIPHTHERIA ANTITOXOID ANTIBODY</b> (QUEST 4865) Methodology: ELISA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86648	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL. <b>Reject gross hemolysis, gross lipemia, gross icterus.</b>
BBK DAT	DIRECT COOMBS	<b>DIRECT COOMBS</b> Methodology: Tube agglutination Set up: Daily Report available: Same day  CPT Code: 86880		6.0 mL whole blood (Pink)
LAB DISACCHARIDASES	DISACCHARIDASES	<b>DISACCHARIDASES</b> (QUEST 19701) <b>Includes Lactase, Sucrase, Maltase, Palatinase</b> Methodology: Spectrophotometric Set up: Tues-Sat Morning Report available: 3 days  CPT Code: 84311(X4)	Accompanies report	5 mg Biopsy Specimen. Instructions: 5 mg small bowel biopsy collected in a 2 mL cryovial polypropylene screw-cap tube; <b>MUST be frozen</b> within 2 hours of collection.  Minimum: 2 mg biopsy specimen
LAB DISOPYRAMIDE	DISOPYRAMIDE	<b>DISOPYRAMIDE</b> (QUEST 7772) Methodology: Immunoassay Detection limit: 0.5 µg/mL Set up: Mon - Sat Report available: Next day  CPT Code: 80299	Accompanies report	1 mL serum (DB, R). <b>No SS tubes</b> Centrifuge and immediately separate serum from the cells into plastic, screw-capped vial. Minimum: 0.5 mL
		<b>DISSEMINATED INTRAVASCULAR COAGULATION (DIC)</b> Always ordered STAT Order: Prottime, PTT, Platelet count, Fibrinogen, Fibrin Split Products		2.7 mL blood (LB) 5 mL blood (L) See individual tests for collection notes. Some tests must be delivered to Lab promptly.
QUEST 16326 Req.	Univ. Universal Requisition	<b>DNA ANALYSIS FOR FRAGILE X SYNDROME</b> - Xsense Fragile X w/reflex & Chromosome Analysis Methodology: Multiple Set up: Varies with assay Report available: 21 days  CPT Code: 81243, 88230, 88262	Interpretation accompanies report	5mL whole blood sodium heparin - <b>AND</b> - 5ml whole blood EDTA  Minimum: 1mL sodium heparin - <b>AND</b> - 3mL EDTA

QUEST 900604 Univ. Req		<b>COMPLETE ATAXIA EVALUATION</b> Effective 6/1/15, Quest has discontinued this test. There is no recommended alternative.		
		<b>DOPAMINE - See Catecholamine</b>		
LAB DOXEPIN	DOXEPIN	<b>DOXEPIN</b> (QUEST 894) Includes desmethyldoxepin Methodology: LS/MS/MS Detection limit: 5 mcg/L Set up: Mon - Fri Report available: 2 day  CPT Code: 80335	Accompanies report	3.0 mL serum (R ). No SS tubes  Minimum: 1.5 mL  If medication is taken at bedtime, draw blood 10 - 12 hours later. For a more frequent dosage schedule, draw blood just before receiving medication.
LAB DPD	DPD GENE MUTATION	<b>DPD GENE MUTATION (DIHYDROPYRIMIDINE DEHYDROGENASE GENE)</b> (QUEST 15538) Methodology: PCR, Single Nucleotide Primer Extension Set up: Mon , Thurs Report available: 9 days  CPT Code: 81400	Accompanies report	5 mL EDTA blood (L) <b>ROOM TEMP</b>  Minimum: 3 mL
LAB DRG SCR IN	DRUG SCR INFANT MECONIUM	<b>INFANT DRUG SCREEN, CONFIRMED</b> (QUEST 17437X) Methodology: Enzyme-Linked Immunoabsorbent Assay Set up: Mon-Sat Report available: 3 days  CPT Code: G0479		5.0 gram fresh meconium
LAB DRGSCR INFANT U	DRUG SCREEN INFANT URINE	<b>INFANT DRUG ABUSE SCREEN, URINE</b> (QUEST 26717) Includes amphetamines, cocaine metabolite, marijuana, opiate metabolites, PCP Methodology: Immunoassay Set up: Mon-Fri Report available: Next day  CPT Code: G0479	None detected	20 mL urine, submitted in a plastic leakproof container. Minimum: 5 mL.
QUEST 2287101 Univ. Req	Universal Requisition	<b>DRUG ABUSE SCREEN, INFANT,BREAST MILK</b> Includes Amphetamines, Cocaine Metabolites, Marijuana, Opiates, PCP. Methodology: Enzyme-Linked Immunoabsorbent Assay Set up: Mon - Sat Report available: 3 days  CPT Code: G0479	None detected	5 mL breast milk in a plastic container. Minimum: 1 mL
LAB DRGSCST	URINE DRUG SCREEN STAT	<b>DRUG SCREEN STAT (9 panel)</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: G0479		25 mL urine
LAB DRGSC5	DRUG SCR 5 PANEL URINE	<b>DRUG SCREEN 5 PANEL</b> This test was discontinued effective 11/3/14. There is no recommended alternative.		

LAB DRUG ABUSE SCR	DRUG ABUSE 5 PANEL SERUM	<b>DRUG ABUSE SCREEN - 5 (SERUM) NO CONFIRMATORY TESTING PERFORMED</b> (QUEST 22872) Includes amphetamines, cocaine metabolites, marijuana, opiates, PCP Methodology: ELISA Set up: Mon - Sat Report available: 2 days  CPT Code: G0479	Accompanies report	5 mL serum (R )  Minimum: 1 mL
<b>WORKPLACE DRUG TESTING</b>				
LAB DRG PRF UN	DRUG PROFILE 1 UNCONFIRMED	<b>DRUG PROFILE #1, UNCONFIRMED 10 DRUGS</b> (QUEST 19237) Drugs tested: Amphetamines, Barbiturates, Benzaodiazepines, Cocaine Metabolites, Marijuana Metabolites, Methadone, Methaqualone, Opiate Metabolites, PCP,  Methodology: Immunoassay, GCMS Set up: Mon - Friday morning Report available: 3 days  CPT Code: G0479 plus confirmatory CPT Codes if screen is positive		30 mL urine
LAB PROF#1CONF	DRUG PROFILE 1 CONFIRMATION	<b>DRUG PROFILE #1, CONFIRMED 10 DRUGS</b> (QUEST 19027) Drugs tested: Amphetamines, Barbiturates, Benzaodiazepines, Cocaine Metabolites, Marijuana Metabolites, Methadone, Methaqualone, Opiate Metabolites, PCP, Propoxyphene Methodology: Immunoassay, GCMS Set up: Mon - Friday morning Report available: 3 days  CPT Code: G0479 plus confirmatory CPT Codes if screen is positive		30 mL urine
		<b>CLINICAL TOXICOLOGY</b> The following drug screens are intended to support the diagnosis and treatment of patients who are suspected of drug abuse.		
QUEST 18367 Univ. Req.	Universal Requisition	<b>DRUG ABUSE SCREEN with ALCOHOL, ETHYL</b> Includes tests listed under "Drug Abuse Screen , Urine" plus urine ethanol. Methodology: EMIT/ GCMS/ GC/ FPIA Set up: Daily Report available: 2 days  CPT Code: G0479		25 mL urine  Minimum: 10 mL
LAB TOX SCR B	TOXICOLOGY SCREEN BLOOD	<b>TOXICOLOGY SCREEN , SERUM</b> (QUEST 2991)  This test has been discontinued, the recommended alternatives are GEN TOX WB (Quest 91358 Drug Test, General Toxicology, Whole Blood) or GEN TOX SER (Quest 91360 Drug Test, General Toxicology, Serum)		8 mL serum or plasma (DB or R or L)  Minimum: 2 mL
LAB TOX SCR G	TOXICOLOGY SCREEN GASTRIC	<b>TOXICOLOGY SCREEN, GASTRIC CONTENTS</b> (QUEST 17481X) Test has been discontinued, the recommended alternative is GEN TOX UR (Quest 91359 Drug Test, General Toxicology, Urine)		25 mL gastric contents  Minimum: 5 mL
LAB TOX SCR UR	TOXICOLOGY SCREEN URINE	<b>TOXICOLOGY SCREEN, URINE</b> (QUEST 299) Test has been discontinued, the recommended alternative is GEN TOX UR (Quest 91359 Drug Test, General Toxicology, Urine)		50 mL urine  Minimum: 10 mL
		<b>EB VIRUS - See Epstein-Barr Virus Antibodies</b>		
LAB EHR CHAFF	E CHAFFEENSIS AB IGG IGM	<b>EHRlichia CHAFFEENSIS ANTIBODIES, IgM and IgG</b> (QUEST 34271X) Methodology: IFA Set up: Mon - Fri Report available: Next day  CPT Code: 86666(X2)	Accompanies report	1.0 mL serum (R)  Minimum: 0.2 mL
LAB ELASTASE	PANCREATIC ELASTASE 1 FECAL	<b>PANCREATIC ELASTASE-1, FECAL</b> (Quest 14693) Methodology: IA Set up: Tues, Thurs Report available: 2 days  CPT Code: 82656	Accompanies report	1 gram stool in sterile, plastic container  Minimum: 0.3 g

LAB LYTES	ELECTROLYTES	<b>ELECTROLYTES, SERUM</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 80051	See individual analytes	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB FECAL OSMO GAP	OSMOTIC GAP FECES	<b>ELECTROLYTES, FECAL (Osmotic Gap)</b> (QUEST 17263) <b>Includes Sodium, Potassium and Fecal Osmo Gap.</b> Methodology: Flame photometric Set up: Mon - Fri Report available: Next day  CPT Code: 84302, 84311	Accompanies report	10ml aliquot 24-hr fecal collection or 10 gram random stool specimen <b>FROZEN</b>
LAB ULYTES	URINE ELECTROLYTES	<b>ELECTROLYTES, URINE</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 84300, 84133, 82436	No reference ranges for random urine specimens.	20 mL random urine  Minimum: 1 mL
		<b>ELECTROPHORESES - See Immunofixation</b>		
		<b>EMA - See Tissue Transglutaminase</b>		
		<b>ENA - See Tissue Transglutaminase</b>		
LAB ANTI-ENDO	ANTI ENDOMYSIAL AB	<b>ENDOMYSIAL ANTIBODY SCREEN</b> (QUEST 15064) Methodology: IFA Set up: Mon - Fri Report available: Next day CPT Code: 86255 [If abnormal, titer will be performed at an additional charge (CPT 86256)]	Accompanies report	1 mL serum (R)  Minimum: 0.3 mL
LAB ENT HIS AB	ENTAMOEBIA HISTOLYTICA AB	<b>ENTAMOEBIA HISTOLYTICA IgG, ELISA</b> (QUEST 34278X) Methodology: EIA Set up: Wed, Sat Report available: 5 days  CPT Code: 86753	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>ENCEPHALITIS - See Arbovirus</b>		
		<b>ENTAMOEBIA HISTOLYTICA - See Ova &amp; Parasites</b>		
		<b>ENTEROBIUS VERMICULARIS DETECTION - See Pinworm Exam</b>		
LAB ENTERO CULT	ENTEROVIRUS CULTURE	<b>ENTEROVIRUS CULTURE</b> (QUEST 2647) Includes culture for Echoviruses, Group B and some Group A Coxsackie viruses, enteroviruses 68-71 and polioviruses 1-3. Methodology: IFA/ Rapid Culture Set up: Daily Report available: 8 days  CPT Code: 87254 (If positive, a charge will be added for organism identification.)	Accompanies report	Body fluids to be submitted in Microtest M4 medium (blue or red label), must be mixed with an equal amount of the M4 transport medium. Do not place small volumes of fluid directly into the tube as this causes over-dilution of the specimen. <b>PREFERRED:</b> 3mL fresh stool, or 3 mL brochial lavage/wash, or 3 mL throat swab, or 3 mL vesicle fluid/scrappings, or 3 mL conjunctival swab, submitted in M4, refrigerated -or- 1mL CSF, submitted in a sterile, leakproof container <b>ACCEPTABLE:</b> 3mL CSF in M4
LAB ENTERO CSF	CSF ENTEROVIRUS PCR	<b>ENTEROVIRUS PCR (CSF)</b> (QUEST 15082X) Methodology: RT-PCR Set up: Daily Report available: 1 day  CPT Code: 87498	Not detected	1 mL CSF <b>FROZEN</b>
LAB TOTEOS	TOTAL EOSINOPHIL COUNT	<b>EOSINOPHIL COUNT</b> Methodology: Sysmex XE-2100 Set up: Daily Report available: Next day  CPT Code: 85004	0 - 450/cu mm	5 mL blood (L)  Minimum: 1 mL
LAB EOSNAS	NASAL EOSINOPHIL COUNT	<b>EOSINOPHILS, NASAL SMEAR</b> Methodology: Microscopic exam Set up: Mon - Fri Report available: 24 - 48 hours  CPT Code: 89190	<20% of total WBC seen per high power field	2 nasal smears, air dried, and labeled with patient name.
LAB UEOS	URINE EOSINOPHIL COUNT	<b>EOSINOPHILS, URINE</b> Methodology: Microscopic exam Set up: Mon - Fri Report available: 24 - 48n hours  CPT Code: 89050	No eosinophils seen	Random urine  Minimum: 1 mL

<b>EPINEPHRINE - See Catecholamines</b>				
<b>QUEST 14972</b> Univ. Req.	<b>Universal Requisition</b>	<b>EPSTEIN-BARR IGA</b> Methodology: IFA Set up: Mon - Fri Report available: 3 days  CPT Code: 86665	Accompanies report	1 mL serum (R) Minimum: 0.25 mL
<b>LAB</b> <b>EBV EARLY AG</b>	<b>EBV EARLY (D) ANTIGEN</b>	<b>EPSTEIN-BARR VIRUS IGG ANTIBODIES TO EARLY ANTIGEN D</b> (CPAL 3001340) Assays for antibodies to Diffuse (D) Early Antigens Methodology: Chemiluminescence Set up: Mon - Fri Report available: Next day  CPT Code: 86663	Accompanies report	0.5 mL serum (SS) Minimum: 0.2 mL
<b>LAB</b> <b>EBNA IgG</b>	<b>EBNA IgG</b>	<b>EPSTEIN-BARR VIRUS IGG ANTIBODIES TO NUCLEAR ANTIGENS</b> (CPAL 3001310) Present in over 90% of healthy adults. Antibodies to EBV-NA1 usually appear at 6-8 weeks after infection with EBV and persist for life. Therefore, the presence of VCA antibodies in the absence of EBV-NA1 antibodies can be indicative of recent infection, while the presence of antibodies to both antigens suggests past infection. Methodology: Chemiluminescence Set up: Mon - Fri Report available: Next day  CPT Code: 86664	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
<b>LAB</b> <b>VCA IgG</b>	<b>VCA IgG</b>	<b>EPSTEIN-BARR VIRUS IGG ANTIBODIES TO VIRAL CAPSID ANTIGENS (EBV-VCA IgG)</b> (CPAL 3001320) Can confirm heterophile-negative EBV-associated infectious mononucleosis (which occurs in approximately 10% of adult patients and in a higher frequency for children and infants). EBV antibodies can persist for life and over 90% of healthy adults have VCA antibodies. Therefore, the demonstration of seroconversion or presence of IgM antibodies to VCA or the presence of VCA antibodies in the absence of EBV-NA1 antibodies is particularly important in the assessment of current or recent infection. Methodology: Chemiluminescence Set up: Mon - Fri Report available: Next day  CPT Code: 86665	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL

LAB EBV IgM	EBV IgM	<b>EPSTEIN-BARR VIRUS IgM ANTIBODIES TO VIRAL CAPSID ANTIGENS (EBV-VCA IgM)</b> (CPAL 3001330) Can confirm heterophile-negative infectious mononucleosis. Presence of IgM anti-VCA antibodies can indicate recent primary infection with EBV. Methodology: Chemiluminescence Set up: Mon - Fri Report available: Next day  CPT Code: 86665	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB EBV PANEL 1	EPSTEIN BARR VIRUS PANEL 1	<b>EPSTEIN-BARR VIRUS AB PANEL 1</b> (CPAL 3001350) EBNA IGG VCA IgG EBV IgM Designed to assist in the discrimination of recent or current infection from the past exposure of 6-8 weeks or more. Methodology: EIA Set up: Mon - Fri Report available: Next day	Accompanies report	2 mL serum (SS) Minimum: 1 mL
LAB EBV PANEL 2	EPSTEIN BARR VIRUS PANEL 2	<b>EPSTEIN-BARR VIRUS AB PANEL 2</b> (CPAL 3001360) EBNA IGG VCA IGG EBV IGM EA (D) IGG An extended panel designated to assist in the discrimination of recent or current infection from the past exposure of 6-8 weeks or more ( see Epstein-Barr Panel 1) and to detect elevated titers of anti-VCA and anti-EBV-FA	Accompanies report	2 mL serum (SS) Minimum: 1 mL
LAB EBV PANEL 3	EPSTEIN BARR VIRUS PANEL 3	<b>EPSTEIN-BARR VIRUS AB PANEL 3</b> (CPAL 3001370) EBNA IGG VCA IGG Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86664,86665	Accompanies report	2 mL serum (SS) Minimum: 1 mL
LAB EBV PANEL 4	EPSTEIN BARR VIRUS PANEL 4	<b>EPSTEIN-BARR VIRUS AB PANEL 4</b> (CPAL 3001380) EBNA IGG VCA IGG EA (D) IGG Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86663, 86664,86665	Accompanies report	2 mL serum (SS) Minimum: 1 mL
LAB EBV PANEL 5	EPSTEIN BARR VIRUS PANEL 5	<b>EPSTEIN-BARR VIRUS AB PANEL 5</b> (CPAL 3001390) VCA IGG EBV IGM Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86665 (X2)	Accompanies report	2 mL serum (SS) Minimum: 1 mL
LAB EBV QUANT	EBV QUANT BY PCR	<b>EPSTEIN-BARR VIRUS DNA, QN PCR</b> (QUEST 10186X) Methodology: Real-time PCR Set up: Daily morning Report available: Next day  CPT Code: 87799	Accompanies report	1 mL plasma (EDTA)      Separate plasma from cells within 2 hours of collection. Transfer plasma to sterile, plastic, screw-capped tubes and refrigerate.  Minimum: 0.3 mL
		<b>ERYTHEMA CHRONICUM MIGRANS - See Lyme Antibody</b>		
		<b>ERYTHROCYTE PROTOPORPHYRIN - See Zinc Protoporphyrine (ZPP)</b>		

LAB ERYTHRO	ERYTHROPOIETIN	ERYTHROPOIETIN, EIA (EPO) (QUEST 427) Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 82668	Accompanies report	1 mL serum (SS) <b>ROOM TEMP</b> Due to diurnal variation, it is recommended that specimens be collected between 7:30am and noon.
		<b>ESTERASE INHIBITOR, C1 - See Complement, C1 Esterase Inhibitor</b>		
LAB ESTRADIOL	ESTRADIOL	ESTRADIOL, 17 BETA (CPAL 1750031) Methodology: Chemiluminescence Set up: Mon - Sat Report available: 24 hours  CPT Code: 82670	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB ESTRADIOL ULTRA	ESTRADIOL ULTRASENSITIVE	ESTRADIOL, ULTRASENSITIVE (QUEST 30289) Methodology: LC/MS/MS Set up: Sun - Fri Report available: 4 days  CPT Code: 82670	Accompanies report	0.5 mL serum (R)  Minimum: 0.2 mL
LAB ESTRADIOL FREE	ESTRADIOL FREE	ESTRADIOL, FREE (QUEST 36169) <i>Includes Free Estradiol and Estradiol</i> Methodology: LS/MS/MS Set up: Mon, Wed Report available: 3-9 days  CPT Code: 82670(X2)	Accompanies report	2.5 serum (R ) <b>No SS tubes.</b> <b>FROZEN</b> Minimum: 1.5 mL
LAB ESTRIOL	ESTRIOL	ESTRIOL, UNCONJUGATED (QUEST 34883X) Methodology: LC/MS/MS Set up: Sun - Fri Report available: 4 days  CPT Code: 82677	Accompanies report	0.5 mL serum (R) <b>SST tubes unacceptable</b>  Minimum: 0.3 mL
LAB ESTROGENS,FR	ESTROGENS FRACTIONATED	ESTROGENS, FRACTIONATED (QUEST 36742) <i>Includes Estrone, Estradiol Ultrasensitive and Estriol</i> Methodology: LC/MS/MS Set up: Sun - Fri Report available: 7-9 days  CPT Code: 82671	Accompanies report	2.5 mL serum (R). <b>No SS tubes</b>  Minimum: 1.5 mL
LAB ESTROG TOT	ESTROGEN TOTAL	ESTROGEN, TOTAL (QUEST 439) Methodology: Extraction, RIA Set up: Mon - Fri Report available: Next day  CPT Code: 82672	Accompanies report	2.0 mL serum (SS)  Minimum: 1 mL
LAB ESTRONE	ESTRONE	ESTRONE, LC/MS/MS (QUEST 23244) Methodology: LC/MS/MS Set up: Sun - Fri Report available: 4 days  CPT Code: 82679	Accompanies report	0.5 mL serum (R) <b>No SS tubes.</b> Minimum: 0.25 mL
		<b>ETHANOL (Ethyl Alcohol) - See Alcohol, Ethyl</b>		
LAB ETHOSUXI	ETHOSUXIMIDE	ETHOSUXIMIDE (ZARONTIN) (QUEST 3852) Methodology: Immunoassay Set up: Mon - Sat Report available: Next day  CPT Code: 80299	Accompanies report	1 mL plasma (L) or serum (R). <b>No SS tubes.</b> <b>Collect</b> as a trough, just prior to next dose.  Minimum: 0.5 mL
QUEST 1381 Univ. Req.	Universal Requisition	ETHYLENE GLYCOL Methodology: GC Detection limit: 10 mcg/mL Set up: Mon - Fri Report available: 4 days  CPT Code: 82693	Accompanies report	3 mL whole blood (Gy)  Minimum: 1 mL

QUEST 462X Univ. Req.	Universal Requisition	<b>EUGLOBILIN CLOT LYSIS</b> Methodology: Clot Dissolution Set up: Wed Report available: 2 days  CPT Code: 85360	Accompanies report	Minimum: 2 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000rpm for 10 minutes.  Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE</b> immediately in a -70C freezer.
	<b>LABNEXUS ORDER ONLY</b> (Order placed by Anatomic Pathology Dept.)	<b>EXON12</b> (Performed at CPAL) Methodology: Sanger Sequencing Set up: Mon-Fri Report available: 1-2 days  CPT Code: 83891,83898x2, 83904, 83912, 81403	Accompanies report	6.0 mL EDTA whole blood refrigerated or 3.0 mL Bone Marrow refrigerated
		<b>EXTRACTABLE NUCLEAR ANTIGENS - See Anti-ENA</b>		
LAB FACTOR II	FACTOR II	<b>FACTOR II (QUEST 331)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85210	Accompanies report	1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (<10,000/mcL). Freeze immediately and ship on dry ice.
LAB FACT II MU	FACTOR II MUTATION DNA	<b>FACTOR II MUTATION, DNA (PROTHROMBIN) (G20210A)</b> (CPAL 7000270) Methodology: Real time PCR w/ melting curve analysis Set up: Mon, Tues, Thurs Report available: 4 days  CPT Code: 83890, 83896, 83898, 83912, 81240	Accompanies report	5 mL whole blood EDTA (L) or ACD (Y) tubes. <b>ROOM TEMP</b>
LAB FACT V	FACTOR V	<b>FACTOR V ACTIVITY (QUEST 29183)</b> Methodology: Clotting assay Set up: Mon - Fri Report available: 7 days  CPT Code: 85220	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (<10,000/mcL). Freeze immediately and ship on dry ice.
LAB FACTOR V	FACTOR V MUTATION LEIDEN	<b>FACTOR V MUTATION GENOTYPE (LEIDEN) (CPAL 7000250)</b> Includes Prothombin Geno mutation. Individuals with either the heterozygous or homozygous genotype for Factor V Mutation are at increased risk for venous thrombosis and pulmonary embolism. Methodology: Real time PCR w/ melting curve analysis Set up: Mon,Tues, Thurs Report available: 4 days  CPT Code: 81241	Accompanies report	5 mL whole blood EDTA (L) or ACD (Y) tubes. <b>ROOM TEMP</b>

<p>LAB FACT VII</p>	<p>FACTOR VII</p>	<p><b>FACTOR VII (QUEST 29193)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85230</p>	<p>Accompanies report</p>	<p>Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice. <b>Note:</b> Do not store specimen at 2-8°C as the Factor VII in the sample may be activated at this temperature range.</p>
<p>LAB FACT 8</p>	<p>FACTOR VIII</p>	<p><b>FACTOR VIII (INCLUDED IN VON WILLEBRAND PANEL) (QUEST 8353)</b> Methodology: Clotting assay Set up: Mon - Fri Report available: Next day  CPT Code: 85240</p>	<p>Accompanies report</p>	<p>Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice.</p>
<p>LAB FACT IX</p>	<p>FACTOR IX</p>	<p><b>FACTOR IX (QUEST 29133)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85250</p>	<p>Accompanies report</p>	<p>Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice.</p>
<p>LAB FACT X</p>	<p>FACTOR X</p>	<p><b>FACTOR X ACTIVITY (QUEST 29203)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85260</p>	<p>Accompanies report</p>	<p>Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice.</p>
<p>LAB FACT XI</p>	<p>FACTOR XI</p>	<p><b>FACTOR XI ACTIVITY (QUEST 29143)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85270</p>	<p>Accompanies report</p>	<p>Minimum 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice.</p>
<p>LAB FACT XII</p>	<p>FACTOR XII</p>	<p><b>FACTOR XII ACTIVITY (QUEST 362X)</b> Methodology: Photometric Clot Detection Set up: Mon - Fri Report available: Next day  CPT Code: 85280</p>	<p>Accompanies report</p>	<p>Minimum 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Centrifuge light blue-top tube for 15 min at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid WBS/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (&lt;10,000/mcL). Freeze immediately and ship on dry ice.</p>

LAB FACT XIII	FACTOR XIII SCREEN	<b>FACTOR XIII</b> (QUEST 42033) Referral test for QUEST. Methodology: Solubility Set up: Mon - Fri Report available: 5 days  CPT Code: 85291	Accompanies report	Minimum 1 mL <b>FROZEN</b> citrated plasma (LB) Instructions: Draw light blue-top tube(s). Fill to complete volume, and mix well. Centrifuge 2000 x g for 10 minutes. Remove plasma to a plastic tube using a plastic pipette. Centrifuge again. Pipette the platelet-poor plasma into clean, plastic, screw-capped vial(s). Freeze and ship frozen
LAB FACT EXT	EXTRINSIC PATHWAY FACTOR ASSAY	<b>FACTOR, EXTRINSIC PATHWAY ASSAY (Factors II, V, VII, and X)</b> (QUEST 29163) Please submit a separate vial for each special coagulation assay ordered. Methodology: Clotting Assay Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 85210, 85220, 85230, 85260	Accompanies report	Minimum: 2mL <b>FROZEN</b> citrated plasma (LB) Instructions: Draw light blue-top tube(s). Fill to complete volume, and mix well. Centrifuge 2000 x g for 10 minutes. Remove plasma to a plastic tube using a plastic pipette. Centrifuge again. Pipette the platelet-poor plasma into clean, plastic, screw-capped vial(s). Freeze and ship frozen.
		<b>FACTOR -VON WILLEBRAND FACTOR ANTIGEN - See Von Willebrand Factor Antigen</b>		
		<b>FARMER's LUNG - See Hypersensitivity Pneumonitis</b>		
LAB FF 72 HR	FECAL FAT 72 HR	<b>FAT, FECAL, FRACTIONATION</b> (QUEST 13217) Methodology: Gravimetric Set up: Mon - Thurs Report available: 5 days  CPT Code: 82710	Accompanies report	24, 48 or 72-hr fecal collection: specimen will be processed <b>ONLY</b> if submitted in preweighed feces container, <b>FROZEN</b> .  Minimum: 3 g
LAB FAT SCR	FECAL FAT SCR	<b>FAT, FECAL (QUALITATIVE)</b> (QUEST 3967X) Methodology: Stain Set up: Mon - Fri Report available: Next day  CPT Code: 82705	Accompanies report	5 gm of freshly-passed stool in clean, leak-proof, screw-cap plastic container  Minimum: 1 g stool
QUEST 449X Univ. Req.	Universal Requisition	<b>FATTY ACIDS, FREE</b> Methodology: SP, Enzymatic Set up: Mon, Thurs Report available: 3 days  CPT Code: 82725	Accompanies report	1.0 mL serum (SS) <b>FROZEN</b> Overnight fasting is preferred. Serum should be removed from cells immediately after collection. Minimum: 0.3 mL
QUEST 11290 Univ. Req.	Universal Requisition	<b>FECAL IMMUNOCHEMICAL TEST (InSure®)</b> Methodology: Immunochromatography Set up: Daily Report available: Next day  CPT Code: 82274	Accompanies report	Fecal specimen collected from toilet water and brushed on InSure FOBT test card
LAB FELBAMATE	FELBAMATE	<b>FELBAMATE (FELBATOL)</b> (QUEST 3081) Methodology: LC/MS/MS Set up: Tues, Fri Report available: 4 days  CPT Code: 80299	Accompanies report	1 mL serum (R). <b>No SS tubes</b> Optimum time to collect sample: 1 hour before next dose.  Minimum: 0.5 mL
		<b>FEP - See Zinc Protoporphyrin</b>		
LAB FERRITIN	FERRITIN	<b>FERRITIN</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 82728	Accompanies report	1 mL blood (Gn-Li (PST)) or 1mL serum (SS)  Minimum: 0.5 mL
BBK FETALSCR	FETAL SCREEN QUALITATIVE	<b>FETAL CELL SCREEN</b> Methodology: Tube agglutination Set up: Daily Report available: Next day  CPT Code: 85461	Negative	4 mL blood (L or Pink)
		<b>FETAL CELL STAIN - See Kleihauer-Betke</b>		
		<b>FETAL LUNG MATURITY - See Lecithin</b>		
LAB FSP	FIBRIN SPLIT PRODUCTS	<b>FIBRIN SPLIT PRODUCTS</b> Methodology: Agglutination Set up: Daily Report available: Same day  CPT Code: 85362	< 5 µg/ml	Minimum: 1 mL citrated plasma (LB). Centrifuge and <b>freeze</b> plasma if testing will be delayed more than 8 hours.

LAB <b>FIBRINOGEN</b>	<b>FIBRINOGEN</b>	<b>FIBRINOGEN, QUANTITATIVE</b> Methodology: Optical detection clotting assay Set up: Daily Report available: Same day  CPT Code: 85384	Accompanies report	2.7 mL blood (LB), tube must be filled to the blue line indicated on the label. -or- 1 mL <b>FROZEN</b> citrated plasma.
PATHOLOGY SENDOUT <b>FISH</b> (Order placed by Anatomic Pathology Dept.)	<b>Send copy of original order</b>	<b>FISH</b> (Sent to Neogenomics) Methodology: FISH Set up: Varies Report available: Varies	Accompanies report	Peripheral Blood: 2-5 mL sodium heparin tube. EDTA tube is acceptable. Call Lab for other acceptable specimen types
LAB <b>FETALFIBRON</b>	<b>FETAL FIBRONECTIN</b>	<b>FIBRONECTIN, FETAL</b> Methodology: Immunoassay Set up: Daily Report available: 2 hours after receipt of specimen  CPT Code: 82731	Accompanies report	Collection kits available from the Laboratory. Collection instructions included in the kit.
		<b>FIFTH DISEASE - See Parvovirus</b>		
<b>QUEST 34168</b> Univ. Req.	<b>Universal Requisition</b>	<b>FILARIASIS IgG ANTIBODY (IgG4)</b> Referral test for Quest Methodology: Elisa Set up: Wed Report available: Next day  CPT Code: 86682		1 mL serum (R or SS)
		<b>FINE NEEDLE ASPIRATION - See Cytology, Fine Needle Aspiration, General</b>		
		<b>FISH - See Chromosome, FISH (BCR-ABL)</b>		
		<b>FISH, URINE - See Urovysion</b>		
LAB <b>TACROLIMUS</b>	<b>TACROLIMUS</b>	<b>TACROLIMUS, FK506, PROGRAF</b> (CPAL 3500100) Methodology: Immunoassay Set up: Mon - Sat Report available: Next day  CPT Code: 80197	Accompanies report	2 mL EDTA whole blood (L), refrigerated  Minimum: 1.0 mL
LAB <b>FLECAINIDE</b>	<b>FLECANIDE</b>	<b>FLECAINIDE (TAMBOCOR)</b> (QUEST 5309) Methodology: LC/MS/MS Set up: Tues, Thurs Report available: 6 days  CPT Code: 80299	Accompanies report	2 mL serum (R ) <b>No SS tubes.</b> Optimum time to collect sample: 1 hr before next dose  Mimimum: 0.5 mL
LAB ONLY <b>FLM</b>	<b>LAB Orderable only; use Universal Requisition</b>	<b>FLM-TDX - FETAL LUNG MATURITY</b> Rapid quantitative assay for the ratio of surfactant to albumin in amniotic fluid for the assessment of fetal lung maturity. Available on a STAT basis at Lancaster General Laboratories. Methodology: fluorescent polarization assay Set up: On request Report available: Phone report available from LGH on completion  CPT Code: 83663	Accompanies report	2 mL amniotic fluid
	<b>LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)</b>	<b>FLOW CYTOMETRY</b> (Sent to CPAL) Methodology: Flow Cytometry Set up: Mon-Sat Report available: within 24 hours		Order through LabNexus. Storage/Acceptable specimens for Immunophenotyping are : <u>Room</u> Temperature specimens: Bone Marrow Aspirates and Peripheral blood (EDTA). Refrigerated specimens: CSF, Effusions, Surgical biopsies and Fine needle aspirate biopsies. Storage/Acceptable specimen for PNH: EDTA whole blood stored at room temperature. Order must include date of collection, reason for request, specimen source and any pertinent history.
		<b>FLU DIRECT IF - See Influenza Virus, Types A &amp; B, Direct IF Test</b>		
		<b>FLUID ANALYSIS - See Synovial Fluid Analysis</b>		
		<b>FLUORESCENT ANTINUCLEAR ANTIBODIES - See Antinuclear Antibodies</b>		
		<b>FLUORESCENT TREPONEMAL ANTIBODIES - See FTA-ABS</b>		

LAB FLUORIDE	FLUORIDE	FLUORIDE (QUEST 10203) Methodology: ISE Detection limit: 0.02 mg/L Set up: Tues, Thurs Report available: 4 days  CPT Code: 82735	Accompanies report	4 mL plasma (Gn) stored in a plastic container  Minimum: 2.5 mL
QUEST 8389 Univ. Req.	Universal Requisition	FLUOXETINE (PROZAC) (Includes norfluoxetine) Methodology: LC/MS/MS Set up: Thurs Report available: 2 days  CPT Code: 83789	Accompanies report	1 mL serum (DB, R) or 1 mL plasma (L). <b>No SS tubes</b> Collect as steady-state trough concentration. Specimen should be collected >12 hrs after dose.  Minimum: 0.5 mL
QUEST 12935 Univ. Req.	Universal Requisition	FLURAZEPAM AND METABOLITES SCREEN (Includes Desalkylflurazepam, Flurazepam and Hydroxy-ethylflurazepam) Methodology: ELISA Set up: Mon-Sat Report available: 3 days  CPT Code: 80346	Accompanies report	4 mL plasma (L)  Minimum: 0.8 mL
QUEST 30529 Univ. Req.	Universal Requisition	FLUVOXAMINE (LUVOX) Referral test for Quest. Methodology: GC Set up: Tues, Thurs Report available: 5 days  CPT Code: 80332	Accompanies report	3 mL serum (R) or plasma (L) <b>ROOM TEMP</b> <b>No SS tubes</b> Minimum: 1.2 mL
LAB FOLATE	FOLIC ACID	FOLIC ACID, SERUM Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 82746	Accompanies report	1 mL blood (Gn-Li (PST)) or 1mL serum (SS) (Stable 8 hrs refrigerated or frozen)  Minimum: 0.5 mL
QUEST 14178 Univ. Req.	Universal Requisition	FOLATE, RBC Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 82747	Accompanies report	1 mL whole blood (L) <b>Room Temp</b> Both a HCT and folate will be performed on this tube. Do not freeze as this will affect the HCT. <a href="#">Foil wrap samples to protect from light.</a> <b>Note: HCT must be performed within 48 hours. Only draw specimens Sunday-Thursday.</b>  Minimum: 0.2 mL
LAB FSH	FOLLICLE STIMULATING HORMONE	FOLLICLE STIMULATING HORMONE (FSH), SERUM Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 83001	Accompanies report	1 mL serum (SS)
QUEST 36087X Univ. Req.	Universal Requisition	FOLLICLE STIMULATING HORMONE (FSH) ULTRA (3 <sup>RD</sup> GENERATION) Methodology: ECLIA Set up: Mon, Thurs Report available: 3 days  CPT Code: 83001		0.5 mL serum (R)  Minimum: 0.3 mL
		FRAGILE X DNA ANALYSIS - See DNA Analysis for Fragile X		
LAB FRAN TUL	FRANCISELLA TULARENSIS AB	FRANCISELLA TULARENSIS ANTIBODIES, TUBE TEST (QUEST 116982) Methodology: Agglutination Set up: Mon - Fri Report available: 3 days  CPT Code: 86000	< 1:20 Comparison of acute and convalescent titers is of greatest diagnostic value.	1 mL serum (SS) <b>FROZEN</b> Minimum: 0.5 mL
		FREE DILANTIN - See Phenytoin, Free		
		FREE ERYTHROCYTE PROTOPORPHYRINS - See Zinc Protoporphyrin		
		FREE ESTRADIOL - See Estradiol, Free		
		FREE FATTY ACIDS - See Fatty Acids, Free		
		FREE KAPPA&LAMBDA WITH K/L RATIO, SERUM - See Kappa & Lambda, Free with Ratio, Serum		
		FREE T3 - See FT3		
		FREE T4 - See T4, Free		

BBK FFP	FRESH FROZEN PLASMA	<b>FFP - FRESH FROZEN PLASMA</b> Includes ABORh and antibody screen. Methodology: Hemeagglutination Set up: Daily Report available: Same day  CPT Code: 86900, 86901, 86850 + product		6.0 mL whole blood (Pink) properly labeled with Blood Bank armband
LAB FRUCT	FRUCTOSAMINE	<b>FRUCTOSAMINE (QUEST 8340)</b> Methodology: Colorimetric Set up: Mon - Fri Report available: Next day  CPT Code: 82985	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>FRUCTOSE, SEMINAL - See Seminal Fructose</b>		
LAB FTA	FTA	<b>FTA-ABS (Fluorescent Treponemal Antibodies, Absorbed)</b> (CPAL 3000130) Methodology: IFA Set up: Mon, Thurs Report available: Next day  CPT Code: 86780	Nonreactive	1 mL serum (SS) <b>FROZEN</b>  Minimum: 0.5 mL
QUEST 17088X Univ. Req.	Universal Requisition	<b>FTA-ABS, CSF</b> Methodology: IFA Set up: Mon-Fri Report available: 4 days  CPT Code: 86780	Accompanies report	1 mL CSF
		<b>FTA-ABS, IgM - See Treponema pallidum IgM Antibodies</b>		
LAB FUN AB PAN	FUNGAL AB PANEL	<b>FUNGAL ANTIBODY PANEL 1, ID</b> Includes Histoplasma, Blastomyces, Coccidioides and Aspergillus (QUEST 7649X) Methodology: ID Set up: Mon - Sat Report available: 6 days  CPT Code: 86606(X3), 86612, 86635, 86698	Accompanies report	2 mL serum (R) <b>ROOM TEMP</b>  Minimum: 1 mL
		<b>FUNGUS CULTURE - See Culture, Fungus</b>		
MIC KOH	KOH PREPARATION	<b>FUNGUS SMEAR (KOH PREP)</b> Methodology: Potassium hydroxide Set up: Daily Report available: 1-2 days  CPT Code: 87210	None detected	Minimum: Primary specimen (i.e. hair, nail, skin scrapings, or other) in sterile specimen container -or- Smear in a slide folder, labeled with patient name.
MIC SCABIES	SCABIES	<b>KOH (SCBS) FUNGUS SMEAR (SCABIES)</b> Methodology: Calcofluor white stain and/or Potassium hydroxide Set up: Daily Report available: Same day  CPT Code: 87210	None detected	Minimum: Primary specimen (i.e. hair, nail, skin scrapings, or other) in sterile specimen container -or- Smear in a slide folder, labeled with patient name
		<b>G-6-PD - See Glucose -6-Phosphate Dehydrogenase</b>		
		<b>GAD - See Glutamic Acid Decarboxylase</b>		
LAB GABAPENTIN	GABAPENTIN / NEURONTIN	<b>GABAPENTIN (NEURONTIN)</b> (QUEST 3557) Methodology: LC/MS/MS Set up: Mon - Fri Report available: Next day  CPT Code: 80171	Accompanies report	1 mL plasma (L). <b>No SS tubes</b> <b>Separate plasma from cells as soon as possible.</b> Draw sample 2 hours after last dose.  Minimum: 0.5 mL
		<b>GAMMA GLOBULIN CONCENTRATIONS (CEREBROSPINAL FLUID) - See Protein Electrophoresis, Cerebrospinal Fluid</b>		
		<b>GAMMA GLOBULIN CONCENTRATIONS (SERUM) - See Immunoglobulins G, A, and M</b>		
LAB GGT	GGT	<b>GAMMA-GLUTAMYL TRANSFERASE (GGT)</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 82977	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL

QUEST 37654 Univ. Req.	Universal Requisition	<b>GAMMA-HYDROXYBUTYRIC ACID SCREEN</b> Methodology: GC/MS Set up: Tues, Thurs Report available: 4 days  CPT Code: 82486	Accompanies report	6 mL plasma EDTA (L)  Minimum: 2.4 mL
LAB GQ1b AB	<b>GANGLIOSIDE GQ1b IGG AB</b>	<b>GANGLIOSIDE GQ1b ANTIBODY (IgG), EIA</b> (QUEST 34144) Methodology: EIA Set up: Mon, Wed Report available: 4 days  CPT Code: 83520	Accompanies report	1.0 mL serum (R) Overnight fasting is preferred.  Minimum: 0.2 mL
QUEST 10945X Univ. Req.	Universal Requisition	<b>GARAMYCIN - See Gentamicin</b> <b>GASTRIC ANALYSIS, SINGLE SPECIMEN</b> <i>Includes Free and Total.</i> Methodology: Titration Set up: Mon - Fri Report available: Next day  CPT Code: 82930	Accompanies report	7 mL gastric fluid  Minimum: 5 mL
See <a href="http://questdiagnostics.com">questdiagnostics.com</a> Univ. Req.	Universal Requisition	<b>GASTRIC ANALYSIS PROFILE, 5 SPECIMENS</b> Methodology: Titration Set up: Mon - Fri Report available: Same day	Accompanies report	7 mL gastric fluid for each sample  Minimum: 5 mL
LAB GAS PARIET	<b>GASTRIC PARIETAL AB</b>	<b>GASTRIC PARIETAL CELL ANTIBODY</b> (QUEST 209) Methodology: ELISA Set up: Tues, Thurs Report available: Next day  CPT Code: 83516	Accompanies report	1.0 mL serum (R)  Minimum: 0.3 mL
MIC GASOCC	<b>GASTROCCULT</b>	<b>GASTROCCULT - GASTRIC OCCULT BLOOD</b>  Set up: Daily Report available: Same day  CPT Code: 82271	Accompanies report	Sterile container
LAB GASTRIN	<b>GASTRIN</b>	<b>GASTRIN</b> (QUEST 478) Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 82941	Accompanies report	1 mL serum (SS) <b>FROZEN</b> Overnight fasting for a minimum of 12 hrs is required. <b>Reject criteria: thawed specimens, gross hemolysis, gross lipemia, grossly icteric</b>  Minimum: 0.5 mL
		<b>GBM ANTIBODIES - See Anti-Glomerular Basement Membrane Antibodies</b>		
		<b>GBS CULTURE - See Culture Group B Strep</b>		
		<b>GC PROBE - See Neisseria gonorrhoeae by PCR</b>		
LAB GENTP	<b>GENTAMICIN PEAK</b>	<b>GENTAMICIN, PEAK</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80170	Therapeutic: Peak (Draw 30 minutes post-infusion): 4.0 - 8.0 µg/mL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB GENT	<b>GENTAMICIN RANDOM</b>	<b>GENTAMICIN, RANDOM</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80170		1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB GENTT	<b>GENTAMICIN TROUGH</b>	<b>GENTAMICIN, TROUGH</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80170	Therapeutic: Trough (Draw 30 minutes before next scheduled dose): < 2.0 µg/mL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB GEN TOX UR	<b>GENERAL TOXICOLOGY, URINE</b>	<b>DRUG TEST, GENERAL TOXICOLOGY, URINE</b> (QUEST 91359) Methodology: LC/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 80198, G0483	Accompanies report	5 mL urine in a plastic, leakproof container ( <b>Room temp</b> ) -or- 5ml dialysis fluid or gastric fluid submitted in a plastic, leakproof container ( <b>Room temp</b> )  Minimum: 1 mL

LAB GEN TOX SER	GENERAL TOXICOLOGY, SERUM	<b>DRUG TEST, GENERAL TOXICOLOGY, SERUM</b> (QUEST 91360) Methodology: LC/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 80198, G0483	Accompanies report	3 mL serum (R) <b>(Room temp)</b> Minimum: 1 mL
LAB GEN TOX WB	GENERAL TOXICOLOGY, WHOLE BLD	<b>DRUG TEST, GENERAL TOXICOLOGY, WHOLE BLOOD</b> (QUEST 91358) Methodology: LC/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 80198, G0483	Accompanies report	3 mL whole blood (EDTA) <b>(Room temp)</b> Minimum: 1 mL
		<b>GHB - See Gamma-Hydroxy-Butyric Acid</b>		
LAB GIARDIA IGG	GIARDIA LAMBLIA IGG ANTIBODIES	<b>GIARDIA LAMBLIA IgG ANTIBODIES</b> (QUEST 35162) Referral test for Quest Methodology: IFA Set up: Mon - Sat Report available: 4 days  CPT Code: 86674	Accompanies report	1 mL serum (R or SS)  Minimum: 0.5 mL
LAB GIAR ANTIG	GIARDIA LAMBLIA AG STOOL	<b>GIARDIA SPECIFIC ANTIGEN-65</b> (QUEST 8625) Methodology: EIA Set up: Daily Report available: 3 days  CPT Code: 87329	Accompanies report	10.0 grams stool in sterile, leakproof container - <b>FROZEN</b> --OR- 10.0g stool submitted in Cary-Blair media - Refrigerate --OR- 10.0g stool submitted in Total-Fix container - <b>ROOM TEMP</b>
		<b>GIEMSA STAIN - See Malarial Smear</b>		
		<b>GLIADIN/GLUTEN ANTIBODIES - See Anti-Gliadin/Gluten</b>		
		<b>GLOMERULAR FILTRATION RATE - Included in Creat</b>		
LAB GLUCAGON	GLUCAGON PLASMA	<b>GLUCAGON, PLASMA</b> (QUEST 519) Methodology: Extraction, RIA Set up: Tues, Fri Report available: 5 days  CPT Code: 82943	Accompanies report	3 mL plasma (L) <b>FROZEN</b> Overnight fasting is required. Minimum: 1.1 mL  <b>Moderate or gross icterus unacceptable</b>
LAB GLUCPP	GLU 2HR POST PRANDIAL	<b>GLUCOSE 2HR POST PRANDIAL</b> Methodology: Hexokinase Set up: Daily Report available: Same day  CPT Code: 82947	There are no ADA guidelines available for this test.	1 ml blood (Gn -Li (PST)). Draw 2 hours after meal.
LAB G6PD	G6PD	<b>GLUCOSE-6-PHOSPHATE DEHYDROGENASE (G-6-PD), QUANTITATIVE</b> (QUEST 500) Methodology: Ultra-violet, Kinetic Set up: Mon - Fri Report available: Next day  CPT Code: 82955	Accompanies report	1 mL whole blood (L)  Minimum: 0.5 mL
LAB CSFGLUC	CSF GLUCOSE	<b>GLUCOSE, CEREBROSPINAL FLUID</b> Methodology: Hexokinase Set up: Daily Report available: Same day  CPT Code: 82945	Accompanies report	1 mL CSF  Minimum: 0.5 mL:
LAB GLUCOSE	GLUCOSE	<b>GLUCOSE, SERUM OR PLASMA</b> Methodology: Hexokinase Set up: Daily Report available: Same day  CPT Code: 82947	Accompanies Report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) centrifuged within 2 hours of collection.
LAB BFGLUC	GLUCOSE BODY FLUID	<b>GLUCOSE, FLUID</b> Performed at York Hospital Methodology: Hexokinase Set up: Daily Report available: Next day  CPT Code: 82945	Accompanies report	2 mL fluid, no preservative

LAB GTT1HR	GLUCOSE TOLERANCE HR	<p><b>GLUCOSE TOLERANCE TESTS</b> Administer 50 g of Glucola and collect specimen at the appropriate time intervals. Label tubes with the specimen number and specimen time, e.g.</p> <p>Outpatient glucose tolerance tests are administered by appointment at WellSpan Ephrata Medical Laboratories. Call 738-6336 to schedule appointments.</p> <p>CPT Code: 82950</p>		<p>1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) centrifuged within 1 hour of collection.</p> <p>Minimum: 1 mL</p>
LAB GTT2HR	GLUCOSE TOLERANCE HR	<p><b>GLUCOSE TOLERANCE TESTS</b> Collect fasting (baseline) specimen. Administer 75 g of Glucola and collect specimens at the appropriate time intervals. Label tubes with the specimen number and specimen time, e.g.</p> <p>Specimen 1, fasting Specimen 2, 1 hr Specimen 3, 2 hr</p> <p>Submit all specimens with one request form and indicate number of specimens. Outpatient glucose tolerance tests are administered by appointment at WellSpan Ephrata Medical Laboratories. Call 738-6336 to schedule appointments.</p> <p>CPT Code: 82951</p>		<p>1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) centrifuged within 1 hour of collection.</p> <p>Please identify specimens as to time of draw.</p> <p>Minimum: 1 mL</p>
LAB GTT3HR	GLUCOSE TOLERANCE 3HR	<p><b>GLUCOSE TOLERANCE TESTS</b> Collect fasting (baseline) specimen. Administer 75 g of Glucola(100g for pregnant women) and collect specimens at the appropriate time intervals. Label tubes with the specimen number and specimen time, e.g.</p> <p>Specimen 1, fasting Specimen 2, 1 hr Specimen 3, 2 hr Specimen 4, 3hr</p> <p>Submit all specimens with one request form and indicate number of specimens. Outpatient glucose tolerance tests are administered by appointment at WellSpan Ephrata Medical Laboratories. Call 738-6336 to schedule appointments.</p> <p>CPT Code: 82951,82952</p>		<p>1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) centrifuged within 1 hour of collection.</p> <p>Please identify specimens as to time of draw.</p> <p>Minimum: 1 mL</p>
LAB GAD-65 AB	GLUTAMIC ACID DECARBOXYLASE AB	<p><b>GLUTAMIC ACID DECARBOXYLASE -65 ANTIBODY (GAD)</b> (QUEST 34878) Methodology: Radiobinding Assay Set up: Tues, Thurs Report available: Next day</p> <p>CPT Code: 86341</p>	Accompanies report	<p>0.2 mL serum (R or SS)</p> <p>Minimum: 0.1 mL</p>
LAB GLUTAMIC IGE	GLUTAMIC ACID IGE	<p><b>GLUTAMIC ACID IgE</b> (QUEST 18725) Methodology: Hytec288 ELISA Set up: Mon - Fri Report available: 5 days</p> <p>CPT Code: 86003</p>	Accompanies report	<p>1.0 mL serum (R )</p> <p>Minimum: 0.4 mL</p>
		<b>GLUTAMIC OXALACETIC TRANSAMINASE (GOT) - See Aspartate Transaminase (AST)</b>		
		<b>GLUTAMIC PYRUVIC TRANSAMINASE (GPT) - See Alanine Transaminase (ALT)</b>		
		<b>GLUTATHIONE - Refer ordering physician to Great Smoky Mountain Lab at 1-800-522-4762 for kit.</b>		
		<b>GLYCATED PROTEINS - See Fructosamine</b>		
LAB GLYCO	GLYCOHEMPGLOBIN /HGBA1C	<p><b>GLYCOHEMOGLOBIN, TOTAL</b> (CPAL 1750002) Methodology: HPLC Set up: Mon - Sat Report available: Next day</p> <p>CPT Code: 83036</p>	4.3 - 6.1 %	2 mL blood (L)

LAB GRH	GONADOTROPIN RELEASING HORMONE	<b>GONADOTROPIN RELEASING HORMONE</b> (QUEST 91903) Methodology: Enzyme Linked Immunesorbent Immunoassay Extraction Set up: Tues Report available: 7 days  CPT Code: 83727	Accompanies report	3.0 mL serum (R) <b>FREEZE</b>  Minimum: 1 mL
MIC GS	GRAM STAIN	<b>GRAM STAIN SMEAR</b> Methodology: Stain Set up: Daily Report available: Same day  CPT Code: 87205	Accompanies report	Send swab (culturette), or tissue/ fluid in sterile container. Please specify site of specimen collection and associated clinical symptoms.
LAB GROWTH HOR	GROWTH HORMONE	<b>GROWTH HORMONE</b> (QUEST 521) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 83003	Accompanies report	1 mL serum (R) <b>FROZEN</b> Random growth hormone collection should be performed on fasting patients who have rested at least 30 minutes prior to collection.  Minimum: 0.3 mL
LAB HAE TYPE B	HAEMOPHILUS INFLUENZA B IGG AB	<b>HAEMOPHILUS INFLUENZAE TYPE B ANTIBODY (IgG)</b> (QUEST 35135) Methodology: EIA Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 86684	Accompanies report	1.0 mL serum (R)  Minimum: 0.2 mL <span style="color: red;">Reject gross hemolysis, gross lipemia, gross icterus.</span>
LAB HALDOL	HALOPERIDOL	<b>HALOPERIDOL (HALDOL)</b> (QUEST 564) Methodology: LC/MS/MS Set up: Mon,Wed,Fri Report available: 4 days  CPT Code: 80173	Accompanies report	1.0 mL serum (DB, R) Collect sample 11 - 17 hours after last dose. <span style="color: red;">SS tube unacceptable.</span> Minimum: 0.5 mL
LAB HAPTO	HAPTOGLOBIN	<b>HAPTOGLOBIN</b> (CPAL 3000460) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 83010	32 - 225 mg/dL	1 mL serum (SS)
LAB HCGQUANT	HCG QUANT	<b>hCG, Beta - QUANTITATIVE</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 84702	Accompanies report	1 ml blood (Gn -Li (PST))  Minimum: 1.0 mL
		<b>hCG, ONCOLOGY - See Chorionic Gonadotropin, Quantitative (CPAL)</b>		
LAB HDL	HDL CHOLESTEROL	<b>HDL CHOLESTEROL</b> Methodology: Homogeneous Assay Set up: Daily Report available: Same day  CPT Code: 83718	Accompanies report	1 ml blood (Gn -Li (PST)) or 2 mL serum (SS)  Minimum: 0.5 mL
LAB HE4	HE4	<b>HE4, OVARIAN CANCER MONITORING (HUMAN EPIDIDYMIS PROTEIN 4)</b> (QUEST 16500) Methodology: CMIA Set up: Mon,Wed,Fri Report available: 5 days  CPT Code: 86305	Accompanies report	0.5 mL serum (R) Sample collected in red-top tube must be allowed to clot for at least 30 minutes but no longer than 1 hr.  Minimum: 0.3 mL
LAB HVYMTLGRP	HEAVY METALS GROUP BLOOD	<b>HEAVY METALS GROUP, BLOOD</b> <span style="color: orange;">Includes arsenic, lead, and mercury</span> (QUEST 5991) Methodology: ICP-MS Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 82175, 83655, 83825	Accompanies report	10 mL whole blood (DB with EDTA)  Minimum: 5 mL
LAB HVYMETGRUR	HEAVY METALS GROUP RANDOM UR	<b>HEAVY METALS GROUP, RANDOM URINE</b> (QUEST 7207) <span style="color: orange;">Includes quantitative arsenic, mercury, delta- aminolevulinic acid, and creatinine.</span> Appropriate for industrial and environmental screening. Methodology: ICP/MS Set up: Daily Report available: 3 days  CPT Code: 82135, 82175, 83825	Accompanies report	100 mL aliquot of random urine submitted in an acid-washed, metal- free container

LAB HVYMETGR 24HOUR	HEAVY METALS GROUP 24HR URINE	<b>HEAVY METALS GROUP, URINE WITH CREATININE, 24 HOUR URINE</b> (QUEST 7206) Includes quantitative arsenic, mercury, delta-aminolevulinic acid, and creatinine. Appropriate for industrial and environmental screening. Methodology: ICP-MS Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 82175,82135,83825,82570	Accompanies report	100 mL aliquot of 24-hr urine preserved with 25 mL 50% acetic acid submitted in an acid-washed, metal-free container
LAB HEINZ BODY	HEINZ BODY PRECIPITATION	<b>HEINZ BODY PRECIPITATION</b> (QUEST 7881) Methodology: Microscopic exam Set up: Mon - Sat Report available: Next day  CPT Code: 85441	Accompanies report	2.0 mL whole blood (L). <span style="float: right;">Must</span> be tested within 24 hours. <b>ROOM TEMP</b>  Minimum: 1 mL
LAB HELICO AG	H PYLORI AG STOOL	<b>HELICOBACTER PYLORI ANTIGEN, EIA STOOL</b> (QUEST 34838) Methodology: EIA Set up: Daily Report available: 1-4 days  CPT Code: 87338	Accompanies report	0.5 gram fresh random stool, <b>FREEZE</b> <b>Watery, diarrheal stool; stool in preservative will be rejected</b> Minimum: 0.5 gram
		<b>HELICOBACTER PYLORI ANTIGEN, EIA STOOL</b> (QUEST 34838) Methodology: EIA Set up: Daily Report available: 1-4 days  CPT Code: 87338		
LAB HELICO AB	H PYLORI AB SERUM	<b>HELICOBACTER PYLORI IgG ANTIBODIES</b> (CPAL 3001170) Methodology: EIA Set up: Mon & Thurs Report available: Same day  CPT Code: 86677	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB HELICO AB IGM	H PYLORI IGM AB SERUM	<b>HELICOBACTER PYLORI IgM ANTIBODIES</b> <b>Effective 10/19/2015, test is no longer available at Quest. There is no recommended alternative.</b>		
		<b>HELPER AND SUPPRESSOR T LYMPHOCYTES - See Leukocyte Markers / Flow Cytometry in Appendix D</b>		
LAB MHCT	MICRO HEMATOCRIT (SPUN)	<b>HEMATOCRIT, MANUAL (PCV), BLOOD</b> Order if spun Hct is requested. Methodology: Centrifugation Set up: Daily Report available: Same day  CPT Code: 85013	Accompanies report	3 mL blood (L) Minimum: 1 mL
LAB BFHCT	HEMATOCRIT BODY FLUID	<b>HEMATOCRIT, MANUAL (PCV), BODY FLUID</b> Order if spun Hct is requested. Methodology: Centrifugation Set up: Daily Report available: Same day  CPT Code: 85013	Accompanies report	3 mL fluid (L) Minimum: 1 mL
LAB HEMOCHROM	HEMOCHROMATOSIS DNA MUTATION	<b>HEMOCHROMATOSIS DNA MUTATION, C282Y, H63D, PCR</b> (QUEST 35079X) Methodology: PCR Set up: Tues, Thurs, Sat Report available: 7 days  CPT Code: 81256	Accompanies report	5.0 mL whole blood EDTA (L) <b>ROOM TEMP</b> Minimum: 3.0 mL
Univ. Req.	Universal Requisition	<b>HEMATOLOGY CONSULT</b> <b>Peripheral smear to be reviewed by Pathologist</b>		Draw 5 mL whole blood (L). Send to Hematology with copy of order.  Two thin, monolayer blood smears labeled with patient name and forward to pathologist.
		<b>HEMOGLOBIN A<sub>1c</sub> - See Glycohemoglobin, Total</b>		

LAB HEMOGLO A2	HEMOGLOBIN A2	<b>HEMOGLOBIN A2, QUANTITATIVE</b> (QUEST 4581) Methodology: HPLC Set up: Mon - Fri Report available: Next day  CPT Code: 83021	Accompanies report	5 mL whole blood (L)  Minimum: 0.5 mL
QUEST 513X Univ. Req.	Universal Requisition	<b>HEMOGLOBIN F</b> Methodology: HPLC Set up: Mon - Fri Report available: Next day  CPT Code: 83021	Accompanies report	5 mL whole blood (L)  Minimum: 0.5 mL
		<b>HEMOGLOBIN, URINE - See Urinalysis</b>		
LAB H&H	HEMOGLOBIN & HEMATOCRIT	<b>HEMOGLOBIN &amp; HEMATOCRIT</b> Methodology: Sysmex XE-2100 Set up: Daily Report available: Same day  CPT Code: 85018, 85014	Accompanies report	4 mL blood (L) Maintain at <b>ROOM TEMP.</b>  Minimum: 2 mL
		<b>HEMOGLOBIN PHENOTYPE- See Hemoglobinopathy Evaluation</b>		
LAB HEMOELECT	HEMOGLOBIN ELECTROPHORESIS	<b>HEMOGLOBINOPATHY EVALUATION W/O HEMOGRAM</b> (QUEST 135651) Methodology: HPLC/Electrophoresis Set up: Mon - Fri Report available: 1 - 5 days  CPT Code: 83021	Accompanies report	5.0 mL whole blood (L) <b>ROOM TEMP</b>  Minimum: 0.5 mL
QUEST 518 Univ. Req.	Universal Requisition	<b>HEMOSIDERIN STAIN, URINE</b> Methodology: Stain Set up: Mon-Fri Report available: 2 days  CPT Code: 83070	Accompanies report	30 mL first morning urine <b>with one Boric Acid tablet</b> Minimum: 20 mL
		<b>HEPARIN INDUCED PLATELET AGGREGATION STUDY - See Platelet Aggregation, Heparin Induced</b>		
LAB HEPATIC	HEPATIC PANEL	<b>HEPATIC FUNCTION PANEL</b> Includes Albumin, Alkaline Phosphatase, AST, ALT, Total Bilirubin, Direct Bilirubin and Total Protein Methodology: Various Set up: Daily Report available: Same day  CPT Code: 80076	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB HEP A TOT	HEP A TOTAL IGG IGM AB	<b>HEPATITIS A ANTIBODY, TOTAL (Anti-HAV, Total)</b> (CPAL 3000540) Includes IgG and IgM Methodology: Elisa Set up: Mon - Fri Report available: Next day  CPT Code: 86708	Negative	1.0 mL serum (SS)
LAB HEP A IGM	HEP A IGM AB	<b>HEPATITIS A IgM ANTIBODY (Anti-HAV, IgM)</b> (CPAL 3000530) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86709	Non-reactive	1.0 mL serum (SS)
LAB HEP B TOT	HEP B CORE TOTAL AB	<b>HEPATITIS B CORE ANTIBODY, TOTAL (Anti-HBC, Total)</b> (CPAL 3400070) Methodology: EIA Set up: Mon - Sat Report available: Next day  CPT Code: 86704	Non-reactive	1.0 mL serum (SS)
LAB HEP B IGM	HEP B CORE IGM AB	<b>HEPATITIS B CORE IgM ANTIBODY (Anti-HBC, IgM)</b> (CPAL 3000515) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86705	Non-reactive	1.0 mL serum (SS)

LAB HEP BE AB	HEPATITIS BE AB	HEPATITIS Be ANTIBODY (Anti-Hbe) (CPAL 3400160) Methodology: EIA Set up: Tues, Fri Report available: Next day  CPT Code: 86707	Negative	0.5 mL serum (SS) <b>FREEZE</b>  Minimum: 0.2 mL
LAB HEP BE ANT	HEPATITIS BE AG	HEPATITIS Be ANTIGEN (HBeAg) (CPAL 3400170) Methodology: EIA Set up: Tues, Fri Report available: Next day  CPT Code: 87350	Negative	0.5 mL serum (SS) <b>FREEZE</b>  Minimum: 0.3 mL
LAB HEP B ANTI	HEP B SURFACE AB	HEPATITIS B SURFACE ANTIBODY (Anti-HBs) (CPAL 1750042) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day <b>For post vaccine screens</b>  CPT Code: 86706	Negative	1.0 mL serum (SS)
LAB HBSAG CPAL	HBSAG	HEPATITIS B SURFACE ANTIGEN (HBsAg) (CPAL 3400050) Methodology: EIA Set up: Mon - Sat Report available: Next day  CPT Code: 87340	Non-reactive	2.0 mL serum (SS) or 2.0mL plasma (L)
LAB HEP B DNA	HEPATITIS B DNA VIRAL LOAD QUANT	HEPATITIS B VIRUS DNA, QUANTITATIVE, VIRAL LOAD (QUEST 8369) Methodology: PCR Set up: Mon - Fri Report available: Next day  CPT Code: 87517	Accompanies report	3 mL EDTA plasma (L) collected in 2 EDTA lavender tubes <b>FROZEN</b> Centrifuge within 6 hours and immediately <b>freeze</b> plasma .  Minimum: 2.5 mL
LAB ONLY HEP PRO B (Order group)	CHECK ORDER SETS	<b>COMPREHENSIVE HBV PROFILE</b> Performed at CPAL Includes: Anti-HBc IgM Anti-HBc Total Anti-HBs HBsAg  To aid in the diagnosis of acute, chronic, or immune HBV status.  CPT Code: 86704, 86705, 86706, 87340		6 mL serum (SS) <b>AND</b> 5 mL plasma (L)  Minimum: 5 mL
LAB ONLY HEP A,B,C (Order group)	CHECK ORDER SETS	<b>HEPATITIS PROFILE, VIRAL A,B,C</b> Performed at CPAL Anti-HAV IgM Anti-HAV Total Anti-HBc IgM Anti-HBc Total Anti-HBs HbsAg Anti-HCV  CPT Code: 86704, 86705, 86706, 87340, 86709, 86708, 86803		5 mL serum (SS) <b>AND</b> 5 mL plasma (L)  Minimum: 5 mL
LAB ONLY HEP B,C (Order group)	CHECK ORDER SETS	<b>HEPATITIS PROFILE B,C</b> Performed at CPAL HbsAg Anti-HCV Anti-HBc IgM  CPT Code: 86705, 87340, 86803		5 mL serum (SS) <b>AND</b> 5 mL plasma (L)  Minimum: 5 mL
LAB ONLY HEP BC CHR (Order group)	CHECK ORDER SETS	<b>HEPATITIS CHRONIC PROFILE (B+C)</b> Performed at CPAL HEP C (Hepatitis C Ab) HEP B TOT (Hepatitis B Core Ab) HEP B ANTI (Hepatitis B Surface Ab) HBSAG CPAL (Hepatitis B Surface Ag) Currently we are seeing orders for this profile from Arthritis & Rheumatology.  CPT Code: 86803, 86704, 86706, 87340		5 mL serum (SS)  Minimum: 4 mL

LAB ONLY HEP CHR WS (Order group)	CHECK ORDER SETS	<p><b>HEPATITIS CHRONIC PANEL WELLSPAN</b>  <b>Performed at CPAL</b>  <b>HEP C (Hepatitis C Ab)</b>  <b>HEP B TOT (Hepatitis B Core Ab)</b>  <b>HEP B IGM (Hepatitis B Core IgM)</b>  <b>HEP BE ANT (Hepatitis BE Ag)</b>  <b>HBSAG CPAL (Hepatitis B Surface Ag)</b>  <b>Use for Hepatitis Chronic Panel orders from WellSpan Family Medicine-Manheim and other WellSpan facilities.</b></p> <p><b>CPT Code: 86803, 86704, 86705, 87350, 87340</b></p>		<p>6.5 mL serum (SS)</p> <p>Minimum: 5 mL</p>
LAB ONLY HEP PRO IM (Order group)	CHECK ORDER SETS	<p><b>HEPATITIS PROFILE IMMUNE STATUS</b>  <b>Performed at CPAL</b>  <b>Anti-HAV Total</b>  <b>Anti-Hbs</b>  <b>Anti-HBc IgM</b></p> <p>CPT Code: 86708, 86706, 86704</p>		<p>5 mL serum (SS)</p> <p>Minimum: 5 mL</p>
LAB ONLY ACUTE HEP (Order group)	CHECK ORDER SETS	<p><b>COMPLETE ACUTE/CHRONIC VIRAL HEPATITIS PROFILE</b>  <b>Performed at CPAL</b>  <b>Anti-HAV IgM</b>  <b>Anti-HBc IgM</b>  <b>Anti-HCV</b>  <b>HbsAg</b></p> <p>To aid in the diagnosis of acute HAV and acute or chronic HBV, HCV, and HDV infections.</p> <p>CPT Code: 80074</p>		<p>3 mL serum (SS)  AND  5 mL plasma (L)</p> <p>Minimum: 1.5 mL</p>
LAB HEP C	HEP C AB	<p><b>HEPATITIS C VIRUS ANTIBODY (Anti-HCV)</b>  (CPAL 3400090)  Methodology: Chemiluminescent  Set up: Mon - Sat  Report available: Next day</p> <p>CPT Code: 86803</p>	Non-reactive	1.0 mL serum (SS)
LAB HEP C HEPT	HEP C RNA PCR	<p><b>HEPATITIS C VIRUS HEPTIMAX, RNA</b>  (QUEST 35645)  Please only order this test if Heptimax is specified. Otherwise order HEP C QUAN.  Methodology: PCR  Set up: Daily  Report available: 2 days</p> <p>CPT Code: 87522</p>	Accompanies report	<p>3.0 mL plasma (L) collected in <u>two</u> EDTA tubes  Separate plasma from whole blood within 24 hours of collection by centrifugation. Transfer to a plastic screw-cap vial and freeze.  Minimum: 1 mL</p>
LAB HEP C QUAL	HEP C RNA QUALITATIVE	<p><b>HEPATITIS C VIRUS RNA, QUALITATIVE</b>  (QUEST 37273)  Methodology: Transcription Mediated-Amplification  Set up: Mon,Wed,Fri  Report available: 2-5 days</p> <p>CPT Code: 87521</p>	Accompanies report	<p>2 mL EDTA plasma (L) <b>FROZEN</b>  Plasma must be separated and frozen within 6 hours of collection Minimum: 0.6mL</p>
LAB HEP C QUAN	HEP C PCR VIRAL LOAD QUANT	<p><b>HEPATITIS C VIRUS QUANTITATIVE VIRAL LOAD</b>  (CPAL 3399945)  Standard range quantitative  Methodology: Real Time PCR  Set up: Tues &amp; Thurs  Report available: 72 hours</p> <p>CPT Code: 87522</p>	Accompanies report	<p>2 mL EDTA plasma (L), seperated from cells and <b>FROZEN IMMEDIATELY</b></p>
LAB HEP C GENO	HEP C GENOTYPE	<p><b>HEPATITIS C GENOTYPING</b>  (CPAL 7000600)  Methodology: RT-PCR  Set up: Tues, Thurs  Report available: Next day</p> <p>CPT Code: 87902</p>	Accompanies report	<p>2.0 mL EDTA (L) plasma (<b>Frozen</b>)  Plasma must be separated and frozen within 6 hours of collection</p>
LAB HEP D AB	HEP D AB	<p><b>HEPATITIS D ANTIBODY, TOTAL</b>  (QUEST 14592)  Performed at Focus Diagnostics, Inc.  Methodology: EIA  Set up: Mon, Thurs  Report available: 3 days</p> <p>CPT Code: 86692</p>	Accompanies report	<p>1.0 mL serum (SS)</p> <p>Minimum: 0.5 mL</p>

LAB HEP E AB	HEPATITIS E IGG IGM AB	HEPATITIS E ANTIBODIES (IGG, IGM) (QUEST 15085) Performed at Focus Diagnostics, Inc. Methodology: ELISA Set up: Mon, Thurs Report available: 3 days  CPT Code: 86790(X2)	Accompanies report	1.0 mL serum (R)  Minimum: 0.2 mL
QUEST 36583X Univ. Req.	Universal Requisition	HEPATITIS E VIRUS (HEV) IGG ANTIBODY Methodology: ELISA Set up: Mon, Thurs Report available: 3 days  CPT Code: 86790	Accompanies report	0.5 mL serum (R or SS)  Minimum: 0.1 mL
QUEST 36582X Univ. Req.	Universal Requisition	HEPATITIS E VIRUS (HEV) IGM ANTIBODY Methodology: ELISA Set up: Mon, Thurs Report available: 3 days  CPT Code: 86790	Accompanies report	0.5 mL serum (R or SS)  Minimum: 0.1 mL
QUEST 6865 Univ. Req	Universal Requisition	HEROIN METABOLITES-FREE (UNCONJUGATED) Includes Morphine-Free, 6-Monoacetyl- morphine-Free, and Diacetylmorphine-Free Methodology: GCMS Set up: Mon-Fri Report available: 6 days  CPT Code: 80356		2.0 mL serum (R) no gel Promptly centrifuge and separate serum into plastic, screw-capped vial. <b>SS tubes is unacceptable</b>  Minimum: 0.4 mL
LAB HERPES 6 ANTIB	HERPES VIRUS 6 IGG IGM AB	HERPESVIRUS 6 ANTIBODIES (IgG, IgM) (QUEST 23982) Methodology: IFA Set up: Mon - Fri Report available: 4 days  CPT Code: 86790(X2)	Accompanies report	0.5 mL serum (R or SS)  Minimum: 0.1 mL
LAB HERPES 6 DNA	HERPES VIRUS 6 DNA PCR QUAL	HERPESVIRUS VIRUS 6 DNA, QUALITATIVE RT-PCR (QUEST 16001) Methodology: RT-PCR Set up: Daily Report available: 1 day  CPT Code: 87532	Accompanies report	1 mL serum (SS) Allow blood to clot at room temperature and separate serum within 2 hrs of collection. Transfer serum to plastic, screw-capped container.  Minimum: 0.3 mL
QUEST 2725 Univ. Req.	Universal Requisition	HERPES SIMPLEX VIRAL CULTURE WITH REFLEX TO TYPING Methodology: Rapid Culture Set up: Daily Report available: 2 days (Typing: 3-5 days)  CPT Code: 87255 [If virus is isolated, typing will be performed at an additional charge (CPT Code: 87140x2)]	Accompanies report	<u>Preferred:</u> Nasal/nasopharyngeal swab, endocervical swab, eye swab or lesion aspirate swab, urethral swab, vaginal swab, rectal mucosa swab (without feces) or throat swab collected in VCM tube or equivalent. <u>Acceptable:</u> 3 mL Bronchial lavage/wash or nasopharyngeal lavage/wash or fresh (unfixed) tissue collected in VCM or equivalent or sterile screw capped container.
LAB HSV-VZV CULT	HERPES SIMPLEX VZV RAPID CULT	HERPES SIMPLEX / VARICELLA-ZOSTER VIRUS, RAPID CULTURE (QUEST 16829) Methodology: Rapid Culture Set up: Daily Report available: 5 days  CPT Code: 87254(X2)	Accompanies report	<u>Preferred:</u> 2-3 mL biopsy specimens, conjunctiva, body fluid, bronchial lavage/wash, or tracheal aspirates (M4- Multiuse Viral Transport Medium) <u>Acceptable:</u> tissue specimen, body fluid, bronchial lavage/wash, or tracheal aspirates in sterile container. <b>Note: effective 8/4/14, CSF no longer acceptable</b>
LAB HERP SIMP	HERPES SIMPLEX TYPING 1 AND 2	HERPES SIMPLEX VIRUS TYPING (QUEST 2066) Methodology: Rapid Culture with Typing Set up: Mon, Wed, Fri Report available: 12 days  CPT Code: 87140	Accompanies report	Available by telephone request upon isolation of the agent from any of the virus cultures.
LAB HERPES PCR	HERPES 1 AND 2 DNA QUAL	HERPES VIRUS 1/2 PCR (QUEST 34257X) Methodology: RT-PCR Set up: Daily Report available: Next Day  CPT Code: 87529(X2)	Accompanies report	<u>Preferred:</u> 1 swab in M4 or viral transport; 1 swab submitted in VCM <u>Alternative:</u> 1 mL body fluids; 1 mL frozen urine; 1mL serum (SS)

LAB HSV1-2 IGG	HERPES 1/2 IGG	<b>HERPES SIMPLEX VIRUS (1 AND 2) IgG ANTIBODIES</b> (CPAL 3001445) Methodology: Chemiluminescent Set up: Mon - Sat Report available: Next day  CPT Code: 86695, 86696	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB HSV IGM AB	HERPES 1/2 ANTIBODY IGM	<b>HERPES SIMPLEX VIRUS 1/2 ANTIBODIES IGM, REFLEX TO TITER</b> (QUEST 90849) Methodology: IFA Setup: Mon-Sat Report available: 3 days CPT code: 86695,86696 [If screen is positive, titer will be performed at additional charge (HSV1: CPT code 86695) (HSV2: CPT code 86696)]	Accompanies report	1 ml serum (R) <b>Room temperature</b>  Minimum: 0.3 mL
LAB HERP CULT	HERPES SIMPLEX 1 AND 2 CULTURE	<b>HERPES SIMPLEX VIRUS (HSV) CULTURE</b> (QUEST 2692X) Methodology: Centrifuge Enhanced Culture, Histochemical stain Set up: Daily Report available: Next day  CPT Code: 87255 <i>If Culture with reflex to typing is needed, please see Quest 2725 Herpes Simplex Viral Culture with Reflex to Typing.</i>	Negative	Place specimens in M4-Multiuse Viral Transport Medium immediately upon collection. Remedies should be avoided before specimen collection.  -Nasopharyngeal swab, endocervical swab, eye swab or lesion aspirate swab, urethral swab, vaginal swab, rectal mucosa swab (without feces) or throat swab collected in VCM tube or equivalent.  3mL Bronchial lavage/wash or Nasopharyngeal lavage/wash or fresh(unfixed) tissue collected in VCM or equivalent or strile screw capped container.
QUEST 34282X Univ. Req.	Universal Requisition	<b>HERPESVIRUS 6 ANTIBODIES (IgG, IgM)</b> Methodology: IFA Set up: Mon-Fri Report available: 4 days  CPT Code: 86790(X2)	Accompanies report	0.5 mL serum (SS)  Minimum: 0.1 mL
LAB HSV 1-2 DNA CSF	CSF HERPES 1 AND 2 DNA PCR	<b>HSV 1/2 DNA PCR CSF (CPAL)</b> (CPAL 7000650) Methodology: RT-PCR  CPT Code: 87529(X2)	Accompanies report	1 mL CSF (0.5 ml Minimum) Swab submitted in viral transport media. Refrigerate.
LAB HSV1 IGG	HSV1 IGG	<b>HERPES SIMPLEX VIRUS TYPE -1 SPECIFIC IgG ANTIBODY</b> (CPAL 3001450) Methodology: Chemiluminescent Set up: Mon - Sat Report available: Next day  CPT Code: 86695	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
LAB HSV2 IGG	HSV2 IGG	<b>HERPES SIMPLEX VIRUS TYPE -2 SPECIFIC IgG ANTIBODY</b> (CPAL 3001460) Methodology: Chemiluminescent Set up: Mon - Sat Report available: Next day  CPT Code: 86696	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
		<b>HERPES ZOSTER VIRUS ANTIBODIES - See Varicella-Zoster Virus</b>		
LAB HETEROPHIL	HETEROPHIL	<b>HETEROPHIL (MONOSPOT)</b> Methodology: Latex agglutination Set up: Daily Report available: Same day  CPT Code: 86308	Negative	1 mL serum (SS, R) or plasma (L)  Minimum: 0.5 mL
		<b>hGH - See Growth Hormone</b>		
		<b>5-HIAA - See 5-Hydroxyindoleacetic Acid</b>		
		<b>HIPA - See Platelet Aggregation</b>		
		<b>HISS - See Humoral Evaluation Post</b>		
QUEST 36586X Univ. Req.	Universal Requisition	<b>HISTAMINE, PLASMA</b> Methodology: RIA Set up: Tues, Fri Report available: 3 days  CPT Code: 83088	Accompanies report	1 mL EDTA plasma (L) <b>FROZEN</b> Centrifuge immediately and freeze plasma in a plastic vial.  Minimum: 0.5 mL

LAB HISTAMINE URINE	URINE HISTAMINE 24HR	<b>HISTAMINE, 24 HR URINE</b> (QUEST 15869) Methodology: Immunoassay Set up: Tues, Fri Report available: 3 days  CPT Code: 83088	Accompanies report	4 mL aliquot of 24 hr urine preserved with 10 mL 6N HCL.  Minimum: 2 mL
LAB HISTO AG UR.	URINE HISTOPLASMA AG	<b>HISTOPLASMA GALACTOMANNAN ANTIGEN, URINE</b> (QUEST 91212) Methodology: Immunoassay Set up: Mon-Fri Report available: 4 days  CPT Code: 87385	Accompanies report	10 mL random urine  Minimum: 1 mL
QUEST 938X Univ. Req.	Universal Requisition	<b>HISTOPLASMA ANTIBODY, COMPLEMENT FIXATION</b> <i>Includes antibodies to Yeast and Mycelial antigens.</i> Methodology: CF Set up: Mon - Fri Report available: 2 days  CPT Code: 86698(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB HISTO AB	HISTOPLASMA AB ID	<b>HISTOPLASMA ANTIBODIES, IMMUNODIFFUSION</b> (QUEST 526X) Methodology: ID Set up: Tues,Thurs,Sat Report available: 3 days  CPT Code: 86698	Accompanies report	1 mL serum (SS)  Minimum: 0.1 mL
QUEST 37094X Univ. Req.	Universal Requisition	<b>HISTOPLASMA CAPSULATUM ANTIBODY PANEL</b> <i>Includes Histoplasma antibody, serum and Histoplasma Capsulatum Antibodies (H and M bands)</i> Methodology: ID and CF Set up: Mon - Sat Report available: 6 days  CPT Code: 86698(X3)	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB MVISTA HISTO AG	HISTOPLASMA AG QUANT	<b>MVista™ HISTOPLASMA QUANTITATIVE ANTIGEN EIA</b> (QUEST 58792) Methodology: EIA Set up: Mon - Fri Report available: 1-2 days  CPT Code: 87385	Accompanies report	2 mL urine or 2 mL serum (R or SS) or 2 mL CSF or 2 mL broncheal lavage/wash or 2 mL plasma (L)  Specify specimen type at time of order.  Minimum: 1.5 mL <b>Ship Monday-Thursday only</b>
LAB HIV-1 GENOTYPE	HIV 1 GENOTYPE	<b>HIV-1 GENOTYPING, DNA SEQUENCING</b> (QUEST 11509) Methodology: DNA sequencing, RT-PCR Set up: Mon - Fri Report available: 7 days  CPT Code: 87900, 87901	Accompanies report	4 mL plasma (L) <b>FROZEN</b> Separate plasma within 6 hours of collection. Transfer plasma to plastic screw-capped vial and ship frozen on dry ice.  Minimum: 1 mL
HIV SUDS	LAB ONLY	<b>HIV-1, RAPID SCREEN (SUDS)</b> <i>This test will only be performed in conjunction with an ECH employee exposure incident and can only be requested by the physician contracted by the Employee Health Department to evaluate the source patient's HIV status. HIV must also be ordered.</i> Methodology: MEIA Set up: As needed Report available: Same day	Negative	2.0 mL serum (SS)
LAB HIVSCREEN	HIV AG AB SCREEN	<b>HIV AG/AB SCREEN</b> (CPAL 3400700) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day <i>If the screen is repeatedly reactive, a HIV Multispot will be performed at CPAL</i> CPT 87389	Nonreactive	1.0 mL serum (SS). Refrigerate. Plasma (sodium heparin and EDTA) is also acceptable. Please mark tube if specimen type is not serum.

LAB HIV DNA	HIV 1 DNA PCR QUAL	HIV-1 DNA QUALITATIVE (PCR) (VIRAL LOAD) (CPAL 3399905) Methodology: PCR Set up: Tues Report available: 7 days  CPT Code: 87536	< 50 COP/mL	5 mL EDTA plasma (L) <b>FROZEN</b>
LAB HIV-1 RNA	HIV-1 RNA PCR QUANT	HIV-1 RNA QUANTITATIVE (RT-PCR) (Viral Load) (QUEST 40085) Methodology: Real Time-PCR Set up: Mon - Sat Report available: Next day  CPT Code: 87536	Accompanies report	3 mL EDTA plasma (L) separated within 24 hours and immediately <b>FROZEN</b>
LAB HLA-ABC	HLA-A,B,C LOW RESOLUTION	HLA-A, B, C LOW RESOLUTION TYPING (QUEST 15484) Methodology: PCR Set up: Mon - Fri Report available: 7-9 days  CPT Code: 81372	Accompanies report	14 mL whole blood (Yellow top-ACD-A) or 14 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 5 mL <b>Specimens cannot be shipped on Saturday or the day before a holiday.</b>
LAB HLA B27	HLA B27	HLA-B27 CYTO ANTIGEN (QUEST 528) Methodology: Flow cytometry Set up: Mon - Sat Report available: 4 days  CPT Code: 86812	Accompanies report	Minimum: 5 mL whole blood collected in sodium heparin (green top) tube <b>ROOM TEMP</b> (Note: Specimen at room temperature is now stable for 7 days.)
LAB HLA-DQB1	HLA DQB1 LOW RESOLUTION	HLA-DQB1 LOW RESOLUTION TYPING (QUEST 10953) Methodology: PCR Set up: Mon - Fri Report available: 7-9 days  CPT Code: 81376	Accompanies report	14 mL whole blood (Yellow top-ACD-A) or 14 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 5 mL <b>Specimens cannot be shipped on Saturday or the day before a holiday.</b>
LAB HLA-DRB1	HLA-DRB1 LOW RESOLUTION	HLA-DRB1 LOW RESOLUTION TYPING (QUEST 10952) Methodology: PCR Set up: Mon - Fri Report available: 7-9 days  CPT Code: 81376	Accompanies report	14 mL whole blood (Yellow top-ACD-A) or 14 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 5 mL <b>Specimens cannot be shipped on Saturday or the day before a holiday.</b>
LAB HLA-DRDQ	HLA-DR/DQ LOW RESOLUTION	HLA-DR/DQ LOW RESOLUTION TYPING (QUEST 15485) Methodology: PCR Set up: Mon - Fri Report available: 7-9 days  CPT Code: 81375	Accompanies report	14 mL whole blood (Yellow top-ACD-A) or 14 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 5 mL <b>Specimens cannot be shipped on Saturday or the day before a holiday.</b>
		HLA COMPLETE (A,B,C,DR,DQ) - Order Quest 15484 and 15485 above		
LAB HOMOCYST and HOMOCYST-POST	HOMOCYSTEINE -and- HONOCYSTEINE POST	HOMOCYSTEINE and HOMOCYSTEINE POST (CPAL 1750113 and 1750114) <b>Order both for Homocysteine Challenge</b> Detection limit: 0.9 umol/L Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 83090	Accompanies report	1 mL serum or plasma (R, SS) , draw in chilled tube, transported on ice, separate and <b>FREEZE</b> within 6 hours of collection.  Minimum: 0.5 mL
LAB HOMOVAN	HOMOVANILLIC ACID	HOMOVANILLIC ACID, 24HR URINE (QUEST 530) Methodology: HPLC Set up: Tues, Thurs Report available: Next day  CPT Code: 83150	Accompanies report	10 mL aliquot of 24-hr urine preserved with 25 mL 6N HCL during collection. Specify total 24-hr urine volume on request form. Alternative preservatives can be used - See Appendix A.  Minimum: 5 mL
		HPV - See Human Papillomavirus		

LAB HTLV I	HTLV I AND II AB SCR	<b>HTLV-1/II ANTIBODY W/ REFLEX TO CONFIRMATORY ASSAY</b> (QUEST 36175) Methodology: Immunoassay, Chemilluminescence Set up: Mon - Fri Report available: Next day  CPT Code: 86790 [If the test is reactive, a western blot will be added for an additional charge (CPT Code: 86689)]	Nonreactive	1mL serum (SS) Minimum: 0.7 mL
LAB HTLV I-II CONF	HTLV I II CONFIRMATORY	<b>HTLV-1/II CONFIRMATORY TEST</b> (QUEST 8511) Methodology: Line Immunoassay Set up: Tues - Fri morning Report available: 2 days  CPT Code: 86689	Accompanies report	1 mL serum (R ) <b>REFRIGERATE</b> Serum should be removed from cells promptly after collection and transferred to a plastic screw-capped vial.  Minimum: 0.5 mL
QUEST 37710 Univ. Req.	Universal Requisition	<b>Hu ANTIBODY NEURONAL NUCLEAR</b> Methodology: IFA, WB Set up: Mon,Wed,Fri Report available: 4 days  CPT Code: 86255 [If testing is positive, a western blot and/or titer will be performed at an additional charge(s) (CPT Code(s) 84181, 86256)]	Accompanies report	3 mL CSF Minimum: 1.5 mL CSF
QUEST 37053 Univ. Req.	Universal Requisition	<b>NEURONAL NUCLEAR Hu ANTIBODY w/reflex to titer and WB</b> Methodology: IFA, WB Set up: Mon,Wed,Fri Report available: 4 days  CPT Code: 86255 [If testing is positive, a western blot and/or titer will be performed at an additional charge(s) (CPT Code(s) 84181, 86256)]	Accompanies report	1 mL serum (SS) Minimum: 0.3 mL
QUEST 90138 Univ. Req.	Universal Requisition	<b>NEURONAL NUCLEAR HU, YO, and RI ANTIBODIES W/ REFLEX TO TITERS AND WB</b> Methodology: IFA Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 86255(X3) (Additional CPT codes may be reflexed based on results)	Accompanies report	1.5 mL serum (SS) Minimum: 0.6 mL
		<b>HUMAN GROWTH HORMONE - See Growth Hormone</b>		
		<b>HUMAN PAPILLOMAVIRUS (HPV)</b> If testing is performed from a Thin Prep specimen order <b>HPV HIGH</b> for high risk testing or <b>HPV LOW</b> risk testing. Order both for comprehensive risk testing.		Can be added up to 3 weeks from date of collection  Thin Prep or digene
LAB HPV HIGH	HPV HIGH RISK CPAL	<b>HUMAN PAPILLOMAVIRUS HIGH RISK</b> (CPAL 7000400)  CPT Code: 87624	Accompanies report	Tissue to be submitted in Thin Prep  <b>ROOM TEMP</b>
LAB HPV LOW	HPV LOW RISK CPAL	<b>HUMAN PAPILLOMAVIRUS LOW RISK</b>  CPT Code: 87623	Accompanies report	Tissue to be submitted in Digene  <b>ROOM TEMP</b>
LAB HPV DNA	HPV DNA HIGH/LOW ANAL-RECTAL	<b>HUMAN PAPILLOM VIRUS DNA, HIGH AND LOW RISK, ANAL-RECTAL</b> (QUEST 17185) Methodology: Hybrid Capture Set up: Mon - Fri Report available: 2 days  CPT Code: 87624	Accompanies report	Cytobrush in Digene Transport Medium (STM)

LAB HUMORAL IMM	HUMORAL IMMUNITY PANEL	<b>HUMORAL IMMUNITY PANEL #3</b> (QUEST 48242) Includes: Immunoglobulins G, A, and M; Immunoglobulin G Subclasses; Immunoglobulin E; Tetanus Toxin Ab (preimmunization); Diphtheria Ab (preimmunization); Streptococcus pneumoniae IgG Ab (6 Serotypes); and Haemophilus influenzae Type B Ab. Methodology: Various Set up: Varies with assay Report available: Varies with assay  CPT Code: 82784(X3), 82785, 82787(X4), 86317(X6), 86648, 86684, 86774.	Accompanies report	10 mL serum (R) No Gel. Fasting specimen recommended. <b>Gross hemolysis and or lipemic samples will be rejected.</b> Minimum: 5 mL.
LAB HUNTINGTON D	HUNTINGTON DISEASE ANALYSIS	<b>HUNTINGTON'S DISEASE MUTATION ANALYSIS</b> (QUEST 111991) Methodology: PCR Set up: Wed Report available: 14 days  CPT Code: 81401	Accompanies report	5 mL EDTA whole blood (L) <b>ROOM TEMP</b>  Minimum: 3 mL
LAB 17HCORSTER	<b>17 HYDROXY- CORTICOSTEROIDS</b>	<b>17-HYDROXYCORTICOSTEROIDS (Porter- Silber)</b> (QUEST 2796) Methodology: Colorimetric Set up: Tues, Thurs Report available: Next day  CPT Code: 83491	Accompanies report	20 mL aliquot of 24-hr urine preserved with 25 mL 50% acetic acid during collection. Alternative preservatives can be used - See Appendix A. Specify total 24-hr volume on request form.  Minimum: 10 mL
LAB UR5HIAA	<b>URINE 5 HIAA 24HR</b>	<b>5-HYDROXYINDOLEACETIC ACID (5- HIAA)</b> (QUEST 523X) Methodology: HPLC Set up: Mon - Fri Report available: 2 days  CPT Code: 83497	Accompanies report	10 mL aliquot of 24-hr urine preserved with 15 grams Boric Acid or 25 mL of 6N HCL during collection. Alternative preservatives can be used - See Appendix A. Specify total 24-hr urine volume on request form.  Minimum: 5 ML
<b>QUEST 37558X</b> Univ. Req.	<b>Universal Requisition</b>	<b>HYDROXYPROLINE, TOTAL</b> Methodology: LC/MS Set up: Sun-Mon, Wed-Fri Report available: 6 days  CPT Code: 83500	Accompanies report	2 ml plasma (Gn -Na-Hep (PST)) <b>FROZEN</b>  Collect plasma specimens after an overnight fast (or at least 4 hours after a meal). Nonfasting samples are acceptable for pediatric patients.
		<b>5-HYDROXYTRYPTAMINE - See Serotonin, Blood</b>		or
LAB HYPERCOAG PROF	<b>HYPERCOAGULABLE PROFILE</b>	<b>HYPERCOAGULABLE PROFILE</b> (QUEST 33743) Contains aPTT, Fibrinogen Activity (Clauss), Antithrombin III Activity, Protein C Activity, Protein C Antigen, Protein S Total & Free, Plasminogen Activity Methodology: Varies Set up: Mon - Fri Report available: Varies with assay  CPT Code: 85300, 85302, 85303, 85305, 85306, 85384, 85420, 85730	Accompanies report	6 - LB 3.2% sodium citrate tubes required seperated as follows:  3 tubes with 2 mL plasma (LB) <b>FROZEN</b> and 3 tubes with 1 mL plasma (LB) <b>FROZEN</b>
<b>QUEST 1462</b> Univ. Req.	<b>Universal Requisition</b>	<b>HYPERSENSITIVITY PNEUMONITIS, ASPERGILLUS BATTERY</b> To detect antibodies against separate antigens of Aspergillus fumigatus (soluble antigens 1,2,3, and cell wall antigen 6), A. flavus, A. niger, A. nidulans, A. terreus, and A. glaucus group. Methodology: ID Set up: Mon - Sat Report available: 6 days  CPT Code: 86606(X9)	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL

LAB HYP PNE	HYPER PNEUMONITIS STD BATTERY	<b>HYPERSENSITIVITY PNEUMONITIS, STANDARD BATTERY</b> (QUEST 1682) To detect antibodies against separate antigens of <i>Faenia retivirgula</i> , <i>Thermoactinomyces vulgaris</i> (antigen 1), <i>Aspergillus niger</i> , <i>Aureobasidium pullulans</i> , and pigeon serum Methodology: ID Set up: Mon - Sat Report available: 6 days  CPT Code: 86331, 86606(X3), 86609(X2), 86671	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
QUEST 9782 Univ. Req.	Universal Requisition	<b>HYPERSENSITIVITY PNEUMONITIS, THERMOPHILE BATTERY</b> To detect antibodies against separate antigens of <i>Faenia retivirgula</i> , <i>Saccharomonospora viridis</i> , <i>Thermoactinomyces candidus</i> , <i>Thermoactinomyces vulgaris</i> (antigen 1,2), <i>Aureobasidium pullulans</i> , <i>Aspergillus flavus</i> , and <i>A. fumigatus</i> (antigen 1). Methodology: ID Set up: Mon - Sat Report available: 6 days  CPT Code: 86606(X2), 86609(X5), 86671	None detected	1.0 mL serum (SS) <b>FROZEN</b>  Minimum: 0.5 mL
		<b>IBT-IMMUNOBEAD - See Anti-Sperm Antibody</b>		
LAB IBUPROFEN	IBUPROFEN	<b>IBUPROFEN</b> (QUEST 5136) Methodology: HPLC Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 80299	Accompanies report	1 mL serum (R) <b>SS tubes are unacceptable</b> Minimum: 0.4 mL
LAB IGFBP-1	IGF BINDING PROTEIN-1 / IGFBP-1	<b>IGF BINDING PROTEIN-1 / IGFBP-1</b> (QUEST 36590) Methodology: RIA Set up: Mon, Thurs Report available: 6 days  CPT Code: 83519	Accompanies report	1.0 mL serum (SS) Overnight fasting is preferred.  Minimum: 0.2 mL
LAB IGFBP-3	IGF BINDING PROTEIN-3 / IGFBP-3	<b>IGF BINDING PROTEIN-3 / IGFBP-3</b> (QUEST 34458) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 83519	Accompanies report	1.0 mL serum (SS) <b>Reject Criteria: gross lipemia and hemolysis.</b>  Minimum: 0.5 mL
LAB IPF (AUTO)	IMMATURE PLATELET FRACTION	<b>IMMATURE PLATELET FRACTION</b> Methodology: Hematology analyzer Set up: Daily Report available: Same day  CPT Code: 85055	Accompanies report	4 mL blood (L)  Minimum: 1 mL
LAB IMIP	IMIPRAMINE	<b>IMIPRAMINE (TOFRANIL)</b> (QUEST 887) Includes imipramine, desipramine and total Methodology: LC/MS/MS Detection limit: 5 ng/mL Set up: Mon - Fri Report available: 2 days  CPT Code: 80335	Accompanies report	3.0 mL serum (R)  Minimum: 1.5 mL  Collect at steady-state trough concentration. Specimen should be collected >12 hrs after dose.
LAB IMM CELL F	IMMUNE CELL FUNCTION	<b>IMMUNE CELL FUNCTION</b> (QUEST 15435) Methodology: Luminescent Detection Set up: Tues - Fri Report available: 2 days  CPT Code: 86352	Accompanies report	1.0 mL whole blood (Gn) sodium heparin <b>ROOM TEMP</b>  <b>Specimen must be received at Quest by 4 pm on day of testing. Specimen is stable for 30 hours at ROOM TEMP. <u>DO NOT</u> Collect on weekends.</b>  Minimum: 0.5 mL

LAB C1QBIND	C1Q BINDING ASSAY	<b>IMMUNE COMPLEX DETECTION BY C1q BINDING ASSAY</b> (QUEST 36735) For detection of circulating immune complexes which are capable of activating the classical complement pathway Methodology: ELISA Set up: Tues, Thurs Report available: Next day CPT Code: 86332	Accompanies report	1 mL serum (RED) <b>FROZEN</b> <b>NO SS tubes</b> Minimum: 0.2 mL
QUEST 37962 Univ. Req.	Universal Requisition	<b>IMMUNOFIXATION ELECTROPHORESIS</b> Methodology: IFE Set up: Sun- Fri Report available: Next day CPT Code: 86335	Accompanies report	3 mL CSF Minimum: 1.5 mL
LAB IMMUNOFIX SERUM	IMMUNOFIX SERUM	<b>IMMUNOFIXATION, SERUM</b> (QUEST 549) Methodology: Immunofixation Set up: Mon – Fri Afternoon Report available: Next Day CPT Code: 86334	Accompanies report	1mL serum (R) Overnight fasting is preferred. Minimum:0.5 mL
LAB IMMUNO PROF I	IMMUNOFIXATION PROFILE I SERUM	<b>IMMUNOFIXATION PROFILE I SERUM</b> (QUEST 3432) Profile includes Serum Immunoglobulins G,A,M, Protein Electrophoresis, and Immunofixation Methodology: Immunofixation Electrophoresis Set up: Quest Report available: Next Day CPT Codes: 82784(X3), 84155, 84165, 86334	Accompanies report	1.0 mL serum (SS) Minimum: 0.2 mL
LAB IMMUNO PROF IX	IMMUNOFIXATION PROF RANDOM UR	<b>IMMUNOFIXATION PROFILE IX, URINE</b> (Total protein, creatinine, and protein electrophoresis) (QUEST 123857) Methodology: Electrophoresis Set up: Vary with assay Report available: Vary with assay CPT Code: 82570,84156,84166,86335	Accompanies report	50 mL Random urine Minimum: 10 mL
LAB IMMUN PRO IX 24	IMMUNOFIXATION PROF IX 24 UR	<b>IMMUNOFIXATION PROFILE IX 24 URINE</b> (Total protein, creatinine, protein electrophoresis, and Kappa Lambda Light Chains) (QUEST 123856) Methodology: Electrophoresis Set up: Varies with assay Report available: Varies with assay CPT Code: 82570, 83883(X2), 84156, 84166, 86334	Accompanies report	50 mL well mixed 24-Hour Urine Minimum 15 mL Instructions: Collect 24-hour urine without preservative
LAB IMMUNOFIX UR	IMMUNOFIXATION URINE	<b>IMMUNOFIXATION, URINE</b> (QUEST 213) Methodology: Immunofixation Set up: Mon – Fri Afternoon Report available: Next Day CPT Code: 86335	Accompanies report	50 mL random urine. Minimum:10 mL. <b>-OR-</b> 50 ml 24 Hr urine without preservative.
LAB IMM G,A,M	IMMUNOGLOBULIN G A M	<b>IMMUNOGLOBULINS G,A,M (QUANT)</b> (CPAL 3000456) Methodology: Nephelometry Set up: Daily Report available: Next day CPT Code: 82784(X3)	Accompanies report	3 mL serum (SS)
LAB IGA	IMMUNOGLOBULIN A	<b>IMMUNOGLOBULIN A</b> (CPAL 3000451) Methodology: Nephelometry Set up: Mon - Sat Report available: Next day CPT Code: 82784	Accompanies report	1 mL serum (SS)

QUEST 541X Univ. Req.	Universal Requisition	<b>IMMUNOGLOBULIN D</b> Increased in IgD myeloma Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 82784	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB IGE	IMMUNOGLOBULIN E	<b>IMMUNOGLOBULIN E</b> (QUEST 542) Methodology: Immunoassay Set up: Mon - Fri Report available: 4 days  CPT Code: 82785	Accompanies report	1 mL serum (R) Minimum: 0.5 mL
LAB IGG SERUM	IMMUNOGLOBULIN G SERUM	<b>IMMUNOGLOBULIN G, SERUM</b> (CPAL 3000450) Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 82784	Accompanies report	1 mL serum (SS)
		<b>IMMUNOGLOBULIN G, CSF - See Cerebrospinal Fluid IgG</b>		
LAB IGG SUB	IMMUNOGLOBULIN G SUBCLASSES	<b>IMMUNOGLOBULIN G SUBCLASSES</b> (QUEST 22672) Includes IgG Subclass 1,2,3,4 Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 82787(X4)	Accompanies report	1.0 mL serum (SS) Overnight fasting is preferred. Minimum: 0.5 mL
LAB IGG SUB 4	IMMUNOGLOBULIN G SUBCLASS 4	<b>IMMUNOGLOBULIN (IGG) SUBCLASS 4</b> (QUEST 143422) Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 82787	Accompanies report	1.0 mL serum (SS) Overnight fasting is preferred. Minimum: 0.5 mL
LAB IGM	IMMUNOGLOBULIN M	<b>IMMUNOGLOBULIN M</b> (CPAL 3000452) Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 82784	Accompanies report	1 mL serum (SS)
MIC INDINK	INDIA INK	<b>INDIA INK PREPARATION, CSF</b> An India Ink preparation is examined microscopically for detection of fungi. Set up: Daily Report available: Next day  CPT Code: 87210	None detected	2 mL CSF Minimum: 1 mL
		<b>INDIRECT COOMBS - See Antibody Screen</b>		
LAB INFAB	INFLUENZA A AND B AG SWAB	<b>INFLUENZAE VIRUS ANTIGEN, TYPES A &amp; B</b> Methodology: Optical Immunoassay Set up: Daily Report available: Same day  CPT Code: 87804(X2)	Negative	Nasopharyngeal swab (Dacron rayon swab) or nasal aspirate or sputum.
LAB INF AB SERUM	Only available for order by Lab- order INFLUENZA A AND B ANTIGENS	<b>INFLUENZA TYPE A AND B ANTIBODIES, SERUM</b> (QUEST 4892) Methodology: CF Set up: Mon - Fri Report available: 2 days  CPT Code: 86710(X2)	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB INF A AB		<b>INFLUENZA TYPE A ANTIBODIES (IGG,IGM)</b> Quest test discontinued effective 12/29/14. There is no recommended alternative.		
LAB INF B AB		<b>INFLUENZA TYPE B ANTIBODIES (IGG,IGM)</b> Quest test discontinued effective 12/29/14. There is no recommended alternative.		

LAB INF AB RNA	INFLUENZA A AND B RNA PCR	<b>INFLUENZA VIRUS A/B RNA</b> (QUEST 16086) Methodology: Real-time PCR Set up: Daily Report available: Next day  CPT Code: 87502	Accompanies report	Nasopharyngeal swab (Dacron rayon swab) submitted in VCM or M4 <b>-OR-</b> 0.85 mL bronchial lavage/wash, sputum, or nasopharyngeal wash/aspirate submitted in sterile container.
LAB INF A H1N1	Lab orderable only	<b>INFLUENZA TYPE A H1N1( 2009) RT-PCR</b> (QUEST 16807) Includes A RNA and 2009 Influenza H1 gene Methodology: RT-PCR Set up: Daily Report available: Next day  CPT Code: 87502	Accompanies report	3 mL nasopharyngeal swab submitted in VCM, UTM or M4 Transport Medium
LAB INF CULT	INFLUENZA A AND B CULTURE	<b>INFLUENZA VIRUS CULTURE</b> (QUEST 35945) Methodology: Rapid Culture Set up: Daily Report available: 5 days  CPT Code: 87254(X2)	Accompanies report	Nasopharyngeal aspirate or wash, Nasal aspirate or wash, or throat swab in VCM transport medium, or bronchial lavage/wash in sterile container. Specimen source required.
LAB INHIBIN A	INHIBIN A	<b>INHIBIN-A, TUMOR MARKER</b> (QUEST 6535) Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86336	Accompanies report	2 mL serum (SS)  Minimum: 0.5 mL
LAB INHIBIN B	INHIBIN B	<b>INHIBIN-B, ELISA</b> (QUEST 34445) Methodology: Chemiluminescence Set up: Tues, Thurs, Sat Report available: 2-4 days  CPT Code: 82397	Accompanies report	1.0 mL serum ( R ) <b>FROZEN</b>  Minimum: 0.5 mL
LAB INSULIN	INSULIN	<b>INSULIN</b> (CPAL 1750124) For diagnosis and monitoring of diabetes and insulin-secreting tumors. Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 83525	Accompanies report	1 mL serum (SS) <b>FROZEN</b> Overnight fasting is required  Minimum: 0.5 mL
See questdiagnostics.com for test code		<b>INSULIN - MULTIPLE SPECIMENS</b> Methodology: CIA Set up: Mon - Fri Report available: Next day		0.5 mL serum (SS) EACH. <b>FROZEN</b> Record date and time of collection on each specimen and on request form.  Minimum: 0.2 mL EACH
LAB INSULIN AUTOAB	INSULIN AUTOANTIBODIES	<b>INSULIN AUTOANTIBODIES, SERUM</b> (QUEST 36178) Methodology: Radiobinding Assay Set up: Sun, Tue, Thur Report available: 5 days  CPT Code: 86337	Accompanies report	1 mL serum (R) <b>SS tubes unacceptable</b>  Minimum: 0.2 mL
LAB INSULIN,FR(BIO)	INSULIN FR(BIO)	<b>INSULIN, FREE(Bioactive)</b> (QUEST 36700) Methodology: Immunoassay Set up: Tue, Thur, Sun morning Report available: 3 days  CPT Code: 83527	Accompanies report	0.5 mL serum ( R ) No gel. A fasting sample is required  Minimum: 0.3 mL
LAB INSULIN,FR(BIO) AND INSULIN	INSULIN FREE(BIO) -and- INSULIN	<b>INSULIN, FREE &amp; TOTAL</b> (QUEST 36700 and 561)  Order <b>INSULIN</b> and <b>INSULIN,FR(BIO)</b> separately.		
LAB INS GROWTH (or IGF-I)	INSULIN LIKE GROWTH FACTOR 1	<b>INSULIN-LIKE GROWTH FACTOR-1 (IGF-1)</b> (QUEST 16293) Formerly Somatomedin-C Methodology: LS/MS Set up: Sun - Fri Report available: 4 days  CPT Code: 84305	Accompanies report	1mL serum ( R )  Minimum: 0.5 mL <b>Reject criteria: gross hemolysis, gross lipemia, grossly icteric</b>

LAB IGF-II	INSULIN LIKE GROWTH FACTOR 2	<b>INSULIN-LIKE GROWTH FACTOR-2 (IGF-II)</b> (QUEST 92790) Methodology: LC/MS/MS Set up: Sun-Fri Report available: 4-5 days  CPT Code: 83789	Accompanies report	0.5 mL serum (R), <b>FROZEN</b> Separate serum from cells within 1 hour of collection and freeze. Minimum: 0.3 mL Overnight fasting is preferred
LAB INTRIN FAC	INTRINSIC FACTOR	<b>INTRINSIC FACTOR BLOCKING ANTIBODIES</b> (QUEST 568) Methodology: RIA Set up: Mon - Fri Report available: Next day  CPT Code: 86340	Negative	1.0 mL serum (SS) <b>FROZEN</b> Samples should not be collected from a patient who has received Vitamin B injection therapy within the last week  Minimum: 0.3 mL
LAB IRON	IRON	<b>IRON</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83540	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB TIBC	TOTAL IRON BINDING CAPACITY	<b>IRON BINDING CAPACITY</b> <i>Includes transferrin, iron, and percent saturation</i> Methodology: Calculation Set up: Daily Report available: Same day  CPT Code: 83540, 84466	accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
QUEST 8828X Univ. Req.	Universal Requisition	<b>IRON, LIVER TISSUE</b> Methodology: ICP/MS Set up: Wed Report available: 5 days  CPT Code: 83540	Accompanies report	2 mg tissue specimen from a needle biopsy of the liver <b>FROZEN</b> Paraffin block is acceptable.
QUEST 17515X Univ. Req.	Universal Requisition	<b>IRON, 24HR URINE</b> Methodology: ICP/MS Set up: Tues, Thurs Report available: 4 days  CPT Code: 83540	Accompanies report	10.0 mL aliquot of a 24-hr urine collected w/o preservative  Minimum: 6 mL Please specify 24hr total volume on request form.
LAB IA-2 AB	ISLET CELL IA2 AB	<b>ISLET CELL ANTIGEN-512 AUTOANTIBODY, IA-2 ANTIBODY</b> (QUEST 121662) Methodology: RIA Set up: Tues, Fri Report available: 4 days  CPT Code: 86341	Accompanies report	1.0 mL serum (R)  Minimum: 0.5 mL
		<b>ISOPROPANOL - See Alcohol, Isopropyl</b>		
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>JAK2</b> (Performed at CPAL) Methodology: JAK2: RT-PCR, EXON12: Sanger Sequencing Set up: Mon-Fri Report available: 1-2 days  CPT Code: 83891,83896(X2), 83912, 83914(X2), 81270	Accompanies report	6.0 mL EDTA whole blood refrigerated or 3.0 mL Bone Marrow refrigerated
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>JAK2PLUS (allows Exon 12 to be added as a reflex test)</b> (Performed at CPAL) Methodology: JAK2: RT-PCR, Exon12: Sanger Sequencing Set up: Mon-Fri Report available: 1-2 days  CPT Code: 83891,83896(X2), 83912, 83914(X2), 81270 If EXON12 Performed: 83891, 83898(X2), 83904, 83912	Accompanies report	6.0 mL EDTA whole blood refrigerated or 3.0 mL Bone Marrow refrigerated
		<b>Jo-1 ANTIBODIES - See Anti-Jo-1 Antibodies</b>		
		<b>JOINT FLUID - See Synovial Fluid Analysis</b>		
		<b>JP DRAINAGE FOR CREATININE - Order Creatinine &amp; footnote "JP Drainage"</b>		

LAB KAPPA CHAINS	KAPPA LIGHT CHAINS FREE	<b>FREE KAPPA LIGHT CHAINS</b> (CPAL 3500160) Methodology: Turbidimetric Set up: Daily Report available: Next day  CPT Code: 83883	Accompanies report	1 mL serum (R or SS)  Minimum: 0.5 mL
LAB K-L GROUP	KAPPA LAMBDA RATIO SERUM	<b>KAPPA &amp; LAMBDA LIGHT CHAINS, FREE, with K/L RATIO, SERUM</b> (CPAL 3500150) Methodology: Turbidimetric Set up: Daily Report available: Next day  CPT Code: 83883(X2)	Accompanies report	1 mL serum (R or SS)  Minimum: 0.5 mL
LAB FREE K-L URINE	FREE KAPPA/LAMBDA W/ RATIO-URIN	<b>KAPPA &amp; LAMBDA LIGHT CHAINS, FREE, with K/L RATIO, URINE</b> (QUEST 138837) Methodology: Nephelometric Set up: Mon - Sat Report available: Next day  CPT Code: 83883(X2)	Accompanies report	2 mL random urine  Minimum: 1 mL
LAB FR K-L RFLX IMM	FR KAPPA LAMBDA RFLX TO IMMUNO	<b>KAPPA &amp; LAMBDA LIGHT CHAIN, FREE, with RATIO, REFLEX IMMUNOFIXATION</b> (QUEST 15122) Methodology: Nephelometric Set up: Mon - Fri Report available: Next day  CPT Code: 83883(X2) [86334 if immunofix indicated]	Accompanies report	2 mL serum (R or SS)  Minimum: 1 mL
QUEST 2806 Univ. Req.	Universal Requisition	<b>17-KETOGENIC STEROIDS (total adrenal corticosteroids)</b> Methodology: Colorimetric Set up: Thurs Report available: Next day  CPT Code: 84311	Accompanies report	100 mL aliquot of 24-hr urine preserved with 25 mL 50% acetic acid during collection. Alternative preservatives can be used - See Appendix A. Specify total 24-hr volume on request form. <b>ROOM TEMP</b>  Minimum: 20 mL
LAB 17-KETOSTE	17 KETOSTEROIDS	<b>17-KETOSTEROIDS</b> (QUEST 2776) Methodology: Colorimetric Set up: Mon - Thurs, Sun Report available: Next day  CPT Code: 83586	Accompanies report	20 mL aliquot of 24-hr urine collection preserved with 25 mL of 50% acetic acid during collection. Alternative preservatives can be used; see Appendix A. Specify total 24-hr volume on request form.  Minimum: 10 mL
QUEST 11021X Univ. Req.	Universal Requisition	<b>KETAMINE AND METABOLITES</b> <i>Includes Ketamine and Norketamine</i> Methodology: EIA Set up: Daily Report available: 9 days  CPT Code: 80299		3 mL serum (R) or plasma (L) <b>SS Tubes unacceptable</b> Minimum: 1.2 mL
QUEST 11326X Univ. Req.	Universal Requisition	<b>KETAMINE SCREEN</b> Methodology: MS Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 80304	Accompanies report	30 mL random urine  Minimum: 5 mL

		<b>KETONES, URINE - See Urinalysis</b>		
<b>LAB FETALSTAIN</b>	<b>FETAL CELL STAIN</b>	<b>KLEIHAUER-BETKE</b> Methodology: Microscopic exam Set up: Daily Report available: Same day  CPT Code: 85460	No fetal cells seen	5 mL blood (L or pink) -or- 3 mL amniotic fluid  Must be tested within 24 hours of collection.  Minimum: 1 mL
	<b>LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)</b>	<b>K-RAS MUTATION ANALYSIS</b> Performed by CPAL Methodology: PCR and DNA sequencing Set up: Mon, Wed Report available: 3-5 days  CPT Code: 83907, 83892, 83891(X2), 83898(X2), 83904, 83909(X2), 83912, 81275	Accompanies report	One stained, cover slipped and marked slide and eight unstained (no cover slip) serial sections of paraffin embedded formalin fixed tissue on slides. The portion of tissue on slide to be sampled (tumor) for testing must be clearly indicated on the stained slide. Blocks will not be accepted.  Specimens in which no desired sampling area (tumor) is indicated will be returned to the client so that the proper region of interest can be indicated and resubmitted to CPAL.  Tissue type should be indicated (colon, lung, etc).
	<b>LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)</b>	<b>K-RAS MUTATION ANALYSIS with reflex to B-RAF if indicated</b> Performed by CPAL Methodology: PCR and DNA sequencing Set up: Mon, Wed Report available: 3-5 days  CPT Code: K-RAS: 83907, 83892, 83891x2, 83898x2, 83904, 83909x2, 83912, 81275  B-RAF if indicated: 83891, 83898, 83904, 83909, 83912	Accompanies report	One stained, cover slipped and marked slide and eight unstained (no cover slip) serial sections of paraffin embedded formalin fixed tissue on slides. The portion of tissue on slide to be sampled (tumor) for testing must be clearly indicated on the stained slide. Blocks will not be accepted.  Specimens in which no desired sampling area (tumor) is indicated will be returned to the client so that the proper region of interest can be indicated and resubmitted to CPAL.  Tissue type should be indicated (colon, lung, etc).
		<b>La, Ro ANTIBODIES - See Sjögren's Antibodies</b>		
		<b>LAC - See Lupus Anticoagulant</b>		
<b>LAB LACTIC</b>	<b>LACTIC ACID</b>	<b>LACTIC ACID</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83605	Accompanies report	2 mL plasma (Gy) <b>Draw WITHOUT tourniquet. Place on ice. Centrifuge immediate and separate plasma from cells within 15 minutes of collection. Store refrigerated.</b>
<b>LAB LAMBDA CHAINS</b>	<b>LAMBDA LIGHT CHAINS FREE</b>	<b>FREE LAMBDA LIGHT CHAINS</b> (CPAL 3500170) Methodology: Turbidimetric Set up: Daily Report available: Next day  CPT Code: 83883	Accompanies report	1 mL serum (R or SS)  Minimum: 0.5 mL
<b>LAB BFLDH</b>	<b>LDH BODY FLUID</b>	<b>LACTATE DEHYDROGENASE (LDH) FLUID</b> Performed at York Hospital Methodology: Enzymatic Set up: Daily Report available: Next day  CPT Code: 83615	Accompanies Report	2 mL fluid, no preservative

LAB LDH	LDH	<b>LACTATE DEHYDROGENASE (LDH) SERUM</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 83615	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB LDH ISOS	LDH ISOENZYMES	<b>LACTATE DEHYDROGENASE (LDH) ISOENZYMES PANEL</b> (QUEST 4411X) <i>Includes LD isoenzymes and LDH, Total</i> Methodology: SP/Electrophoresis Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83615, 83625	Accompanies report	2 mL serum (SS) <b>ROOM TEMP</b>  Minimum: 0.5 mL
QUEST 19259X Univ. Req.	Universal Requisition	<b>PLACENTAL LACTOGEN, IHC WITH INTERPRETATION</b> Methodology: Immunohistochemistry Set up: Mon - Fri Report available: 2 days  CPT Code: 88342		Send surgical pathology report with H&E section and corresponding paraffin block; or 3 unstained positively charged slides per marker requested.
LAB LAC TOL	LACTOSE TOLERANCE TEST	<b>LACTOSE TOLERANCE</b> <i>Includes fasting, 1/2 hr, 1 hr, 2 hr, and 3 hr specimens</i> (QUEST 7675X) Methodology: SP Set up: Daily Report available: Next day  CPT Code: 82951, 82952(X2)	Increase of glucose less than 20 mg/dL over the fasting level is suggestive of an enzyme defect.	1 mL blood (Gy) , each specimen. Collect fasting, 30 min, 60 min, 90 min and 120 minutes after ingestion of 50 g of lactose. Label each with the specific draw time. Lactose available from Quest at 800-336-3718 (X67500)  Minimum: 0.5 mL
LAB LAMICTAL	LAMICTAL	<b>LAMICTAL (LAMOTRIGINE)</b> (QUEST 22060) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 80175	Accompanies report	1 mL serum (R) Draw 1/2 hr to 1 hr before next dose at steady-state. <b>NO SS tubes.</b>  Minimum: 0.5 mL
		<b>LANOXIN - See Digoxin</b>		
		<b>LAP - See Leukocyte Alkaline Phosphatase</b>		
		<b>LASA - See Lipid Associated Sialic Acid</b>		
		<b>LDH ISOENZYMES - See Lactate Dehydrogenase (LDH) Isoenzymes Electrophoresis</b>		
LAB LDLD	LDL DIRECT	<b>LDL CHOLESTEROL, DIRECT</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83721	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.2 mL
		<b>LE - See Antinuclear Antibodies</b>		
LAB LEAD PROF	LEAD PROFILE	<b>LEAD PROFILE</b> (CPAL 1750175) <i>Includes lead and ZPP (Zinc Protoporphyrin). Fulfills requirements for OSHA lead screening program.</i> Methodology: AA Set up: Mon, Thurs Report available: Same day  CPT Code: 83655, 84202	See individual assays.	2 tubes- 2 mL blood (DB with EDTA or L) Protected from light, wrap in aluminum foil  Minimum: 0.5 mL
LAB LEAD	LEAD	<b>LEAD, BLOOD</b> (CPAL 1750180) Methodology: AA Set up: Mon, Thurs Report available: Same day  CPT Code: 83655	Accompanies report	1 mL blood (L)  Minimum: 0.5 mL
QUEST 601X Univ. Req.	Universal Requisition	<b>LEAD, RANDOM URINE</b> <i>(Includes Creatinine)</i> Methodology: ICP/MS Set up: Mon, Wed, Fri Report available: 1 day  CPT Code: 82570, 83655	Accompanies report	7 mL random urine, collected in a plastic, metal-free, non acid-washed, leakproof container.  Minimum: 3 mL

LAB LS PG	LS WITH PG RATIO	<p><b>LECITHIN/SPHINGOMYELIN RATIO WITH PHOSPHATIDYLGLYCEROL (L/S Ratio with PG) -</b> (QUEST 19971) Methodology: TLC Set up: Daily Report available: Next day</p> <p><b>If this test is needed STAT (prior to next day) please see FLM-TDX.</b></p> <p>CPT Code: 82542, 83661</p>	Accompanies report	<p>6 mL uncentrifuged amniotic fluid <b>FREEZE; Wrap in foil, protect from light.</b> <u>If red blood cells are present</u>, do not freeze before spinning at 140 x g for 10 min. and submit supernatant.</p> <p>Minimum: 4.0 mL</p>
LAB LEGIONAB	LEGIONELLA TOTAL AB	<p><b>LEGIONELLA PNEUMOPHILA TOTAL ANTIBODY</b> (QUEST 6589) Methodology: IFA Set up: Mon, Wed, Fri Report available: 3 days</p> <p>CPT Code: 86713(X2)</p>	Accompanies report	<p>1.0 mL serum (R) Minimum: 0.1 mL</p>
LAB LEGION, IGM	LEGIONELLA IGM AB	<p><b>LEGIONELLA PNEUMOPHILA IgM ANTIBODIES</b> <b>Includes serogroups 1, 2-6, 8</b> (QUEST 30793) Methodology: IFA Set up: Mon - Fri morning Report available: 4 days</p> <p>CPT Code: 86713(X2)</p>	Accompanies report	<p>1 mL serum (SS) Minimum: 0.1 mL</p>
LAB LEGION AG DFA	LEGIONELLA AG STAIN DFA	<p><b>LEGIONELLA PNEUMOPHILIA AG DFA (QUEST 34475)</b> <b>MUST ACCOMPANY CULTURE FOR LEGIONELLA PNEUMOPHILA (See CULTURE LEGIONELLA QUEST 960) - DO NOT ORDER AS A STAND ALONE TEST</b> Methodology: Direct Immunofluorescence Set up: Daily Afternoon Report available: Next day CPT Code: 87278</p>	None detected	Lung biopsy, sputum, aspirate, or bronchial washing in sterile container
LAB LEGION UR	LEGIONELLA ANTIGEN URINE	<p><b>LEGIONELLA ANTIGEN, URINE (Serogroup 1)</b> (QUEST 8856) Methodology: EIA Set up: Mon - Sat Report available: Next day</p> <p>CPT Code: 87449</p>	Accompanies report	<p>1 mL random urine, submitted refrigerated in a plastic screw-capped vial. Minimum: 0.5 mL</p>
QUEST 16529 Univ. Req.		<p><b>LEPTOSPIRA ANTIBODY SCREEN WITH REFLEX TO TITER</b> <b>Effective 1/8/16, this test is no longer available. There is no recommended alternative.</b></p>		
BBK PALL RBC	LAB ONLY	<p><b>LEUKOCYTE FILTER (RXL), RED CELLS</b> Notify Blood Bank (ext. 6113) when transfusion of leuko-reduced packed cells is ordered.</p>		
BBK PALL PLT	LAB ONLY	<p><b>LEUKOCYTE FILTER (PXL), PLATELETS</b> Notify Blood Bank (ext. 6113) when transfusion of leuko-reduced platelets is ordered.</p>		
LAB CD4	CD4 CELLS HELPER/INDUCER	<p><b>LEUKOCYTE MARKERS T CELLS: HELPER/INDUCER CD4</b> (QUEST 8360X) <b>Includes Absolute Lymphocytes, CD4%, Absolute CD4</b> Methodology: FCM Set up: Mon - Sat Report available: Next day</p> <p>CPT Code: 86361</p>	Accompanies report	<p>Minimum: 5 mL whole blood (EDTA) <b>ROOM TEMP</b></p> <p>General instructions: Maintain at ambient temperature. <b>DO NOT REFRIGERATE.</b> It is recommended that the sample is received within 24 hours of collection on Monday - Friday. <b>Must be received in Lab by 12 noon.</b></p>
LAB LEVETIR	LEVETIRACETAM / KEPPRA	<p><b>LEVETIRACETAM (KEPPRA)</b> (QUEST 15142) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days</p> <p>CPT Code: 80177</p>	Accompanies report	<p>1.0 mL serum Red top, No gel. Collect at trough level (i.e. immediately prior to next dose) <b>SS tubes unacceptable</b></p> <p>Minimum: 0.5 mL</p>

QUEST 92315 Univ. Req.	Universal Requisition	<b>LHON mtDNA MUTATION PROFILE</b> Methodology: PCR Set up: Varies Report available: 14-21 days  CPT Code: 81401	Accompanies report	2 (7 mL) EDTA whole blood (L) tubes <b>ROOM TEMP</b> Draw Mon - Wed only - Must be received at Quest within 24 hours of collection.
LAB LIDO	LIDOCAINE	<b>LIDOCAINE</b> (QUEST 605) Methodology: Immunoassay Set up: Mon - Fri Report available: 2 days  CPT Code: 80176	Accompanies report	1 mL serum (R) Collect as trough prior to next dose. Minimum: 0.2 mL
LAB LIPASE	LIPASE	<b>LIPASE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83690	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Minimum: 0.5 mL
QUEST 8343X Univ. Req.	Universal Requisition	<b>LIPID ASSOCIATED SIALIC ACID (LSA, LASA)</b> Methodology: Colorimetric Set up: Tues, Fri Report available: 3 days  CPT Code: 84275	Accompanies report	1 mL serum (R) or 1 mL plasma (L) Minimum: 0.2 mL
LAB LIPID	LIPID PANEL	<b>LIPID PANEL (CARDIAC/CORONARY RISK)</b> Total Cholesterol HDL Cholesterol Triglycerides LDL Cholesterol (Calculated) If Triglyceride >400, LDL Direct will be performed. Methodology: Various Set up: Daily Report available: Same day  CPT Code: 80061		1 ml blood (Gn -Li (PST)) or 1 mL serum (SS), drawn after 12 - 14 hour fast Minimum: 0.5 mL
LAB LIPOPROT A	LIPOPROTEIN A	<b>LIPOPROTEIN A</b> (QUEST 29702) Methodology: Immunoturbidometric Set up: Daily Report available: Next day  CPT Code: 83695	Accompanies report	1 mL serum (R) Minimum: 0.5 mL
LAB LIP ELECT	LIPOPROTEIN ELECTROPHORESIS	<b>LIPOPROTEIN ELECTROPHORESIS</b> (QUEST 901292) Includes Cholesterol, Triglycerides, Chylomicrons, Beta Lipoproteins, Pre-Beta Lipoproteins, Serum Appearance, Interpretation Methodology: Agarose Electrophoresis Set up: Wed, Sun Report available: 7 days  CPT Code: 82465, 82664, 84478		2 mL serum (R no gel) Fasting for 9-12 hrs prior to collection. Minimum: 1.0 mL
LAB LISTERIA AB	LISTERIA ANTIBODY	<b>LISTERIA ANTIBODY, CF</b> (QUEST 34329X) Methodology: Complement Fixation Set up: Mon - Fri Morning Report available : 3 days  CPT Code: 86609	Accompanies report	1 mL serum (R ) Minimum: 0.5 mL
LAB LITH	LITHIUM	<b>LITHIUM</b> Methodology: Spectrophotometric Detection limit: 0.1 mmol/L Set up: Daily Report available: Same day  CPT Code: 80178	Accompanies report	1 mL serum (R or SS) Minimum: 0.5 mL
BBK LRPRBC	LEUKO-REDUCED PACKED RED BLOOD CELLS	<b>LRPRBC</b> Includes ABORh and antibody screen. Methodology: Hemeagglutination Set up: Daily Report available: Same day  For Type & Screen order TS  CPT Code: 86900, 86901, 86850 + product		6.0 mL whole blood (Pink) properly labeled with Blood Bank armband

LAB HEPATIC	HEPATIC PANEL	<b>LIVER FUNCTION PANEL</b> Also called "Hepatic Function Panel". Includes Albumin, Alkaline Phosphatase, ALT, AST, Total & Direct Bilirubin, Total Protein. Methodology: Various Set up: Daily Report available: Same day  CPT Code: 82040, 82247, 84075, 84450, 84460, 82248, 84155	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB LKM-1 AB	LIVER KIDNEY MICROSOMAL AB	<b>LIVER-KIDNEY MICROSOMAL ANTIBODIES (LKM-1) IgG</b> (QUEST 15038X) Methodology: IA Set up: Tues, Thurs Report available: Next day  CPT Code: 86376	Accompanies report	1.0 mL serum (R or SS)  Minimum: 0.3 mL
QUEST 34519X Univ. Req.	Universal Requisition	<b>LORAZEPAM</b> Methodology: HPLC Detection limit: 5 ng/mL Set up: Tues, Thurs Report available: 4 days  CPT Code: 80346	Accompanies report	2 mL serum (DB or R)  Minimum: 1 mL
QUEST 37025 Univ. Req.	Universal Requisition	<b>LSA PRESUMPTIVE SCREEN</b> Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: G0479	Accompanies report	10 mL random urine, protected from light  Minimum: 1 mL
QUEST 14455X Univ. Req.	Universal Requisition	<b>LSA QUANTITATION BY GCMS</b> Methodology: GC/MS Set up: Wed Report available: 7 days  CPT Code: 80323	Accompanies report	20 mL random urine, protected from light  Minimum: 15 mL
LAB LUPUS PROF	LUPUS ANTICOAG PROFILE	<b>LUPUS ANTICOAGULANT PROFILE</b> (QUEST 3373) Includes APTT, Anticardiolipin IgG/IgM antibodies, APTT mixing studies, Dilute Russell's viper venom time, LAC-PNP, Prothrombin time, Thrombin time. Methodology: Various Set up: Mon - Fri Report available: Varies with assay  CPT Code: 85610, 85613, 85670, 85730(X2), 86147(X2)	Accompanies report	6 mL citrated plasma (LB), separated into 4 different plastic vials and <b>FROZEN</b>  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE</b> immediately in a -70C freezer.  <b>Patient must be heparin free for 24 hours and Coumadin free for 72 hours.</b>
LAB LUPUS ANTI	LUPUS ANTICOAGULANT	<b>LUPUS ANTICOAGULANT - PNP (Platelet Neutralization Procedure)</b> (QUEST 17408) Methodology: Clotting assay Set up: Mon - Sat Report available: Next day  CPT Code: 85730 [If PTT-LA Screen is prolonged (>40 secs), Hexagonal Phase Confirmation will be performed at an additional charge. (CPT Code: 85598)]	Accompanies report	2 mL citrated plasma (LB) <b>FROZEN</b>  Minimum: 1 mL <b>FROZEN</b> citrated plasma Please submit a separate vial for each special coagulation assay ordered. <b>Rejection Criteria: Hemolysis</b>
LAB LUPUS PAN	LUPUS SLE PANEL	<b>LUPUS (SLE) PANEL</b> Includes C3, C4, TPO Ab, RA, SSA, SSB, Sm Ab, RNP Ab, Scl-70 Ab, Ribosomal P Ab, Reticulin IgA, Mitochondrial Ab, Smooth Muscle Ab, dsDNA, ANA, Striated Ab, Myocardial Ab, Parietal Cell Ab (QUEST 34992) Methodology: Varies Set up: Mon - Sat Report available: 3 days  CPT Code: 83516(X3), 86038, 86160(X2), 86235(X5), 86255(X5), 86376, 86431	Accompanies report	6 mL serum (R ) Overnight fasting is required Minimum: 2.8 mL
LAB LH	LUTEINIZING HORMONE	<b>LUTEINIZING HORMONE (LH)</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 83002	Accompanies report	1 mL serum (SS)

QUEST 36086 Univ. Req.	Universal Requisition	<b>LUTENIZING HORMONE (LH), Pediatrics</b> Methodology: Immunoassay Set up: Sun - Thur Report available: 3 days  CPT Code: 83002	Accompanies report	0.5 mL serum (SS) Separate the serum immediately. Do not use hemolyzed or icteric samples. Minimum: 0.3 mL
LAB LYME PROF		<b>LYME ANTIBODY, SERUM</b> This test has been discontinued effective 7/13/15. Please use Lyme Antibody Progressive as an alternative.		
LAB LYME PROG	<b>LYME IGG IGM AB PROGRESSIVE</b>	<b>LYME ANTIBODY PROGRESSIVE</b> A screening test is performed. If positive, a Lyme Antibody Western Blot Panel will be added at an additional charge to confirm the screening results. (CPAL 3003082) Methodology: EIA Set up: Wed, Fri, Sat Report available: Next day  CPT Code: 86618	Accompanies report	2 mL serum (SS)
LAB LYME AG UR	<b>LYME AG URINE</b>	<b>LYME ANTIGEN, URINE</b> (QUEST 132487) Methodology: EIA Set up: Mon, Wed, Fri Report available: 12 days  CPT Code: 87301	Negative	10 mL random urine  Minimum: 8 mL  Specimen must arrive in Chantilly Sunday - Wednesday only.
LAB LYME CSF INDEX	<b>LYME CSF AB INDEX</b>	<b>LYME DISEASE CSF AB INDEX for CNS Infection(B. BURGDORFERI AB INDEX)</b> (QUEST 34194) Methodology: ELISA, Nephelometric Set up: Tues, Fri Report available: 5 days  CPT Code: 82040, 82042, 82784(X2), 86618(X4)	Accompanies report	2.0 mL CSF AND 2 mL serum (SS)  Minimum: 1 mL
QUEST 72194 Univ. Req.	Universal Requisition	<b>LYME DISEASE CUSTOM PANEL (CSF)</b> Effective 4/29/16, Quest has discontinued this test.		
QUEST 72234 Univ. Req.	Universal Requisition	<b>LYME CSF IgG, IgM ANTIBODIES, IBL</b> Methodology: Immunoblot Set up: Mon, Wed, Fri Report available: 6 days  CPT Code: 86617(X2)	Accompanies report	2 mL CSF  Minimum: 0.5 mL
LAB LYME PCR W Whole blood  LAB LYME PCR S Serum  LAB LYME PCR F Fluid	<b>LYME DNA PCR WHOLE BLOOD</b> -or- <b>LYME DNA PCR SERUM</b> -or- <b>LYME DNA PCR CSF OR SYNOVIAL</b>	<b>LYME DNA, PCR QUALITATIVE</b> Whole blood= QUEST 15777 Serum = QUEST 52962 CSF/FLUID = QUEST 15564  Methodology: PCR Set up: Tues, Thurs Morning Report available: 1 days  CPT Code: 87801	Not detected	1.0 mL EDTA whole blood (L) at <b>ROOM TEMP</b> -or- 1.0 mL serum (SS) <b>FROZEN</b> -or- 1.0 mL CSF or synovial fluid <b>FROZEN</b> <b>MIN CSF 0.5 mL</b>
LAB LYME BANDS	<b>LYME BANDS</b>	<b>LYME DISEASE ANTIBODIES (IgG, IgM) (QUALITATIVE)</b> (QUEST 8593) Methodology: Immunoblot Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86617(X2)	Accompanies report	1.0 mL serum (R)  Minimum: 0.5 mL
LAB LYMEWB	<b>Lyme IgG/IgM Western Blot</b>	<b>LYME IgG/IgM WESTERN BLOT WITH BANDS</b> Methodology: Western Blot Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86617(X2)	Accompanies report	1.0mL serum (R)

QUEST 29477 Univ. Req.	Universal Requisition	<b>LYME DISEASE ANTIBODY (IgG), IMMUNOBLOT</b> Methodology: Immunoblot Set up: Mon - Fri Report available: Next day  CPT Code: 86617	Accompanies report	1.0 mL serum (SS)  Minimum: 0.1 mL
		<b>LYMPHOGRANULOMA VENEREUM-PSITTACOSIS-ORNITHOSIS ANTIBODIES - See Chlamydia</b>		
		<b>LYRICA - See PREGABALIN</b>		
		<b>LYSOZYME - See Muramidase</b>		
		<b>MACROGLOBULINS - See Immunoglobulin M</b>		
LAB MG	MAGNESIUM	<b>MAGNESIUM</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83735	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB MGOB	MAGNESIUM OB	<b>MAGNESIUM (OB)</b> Specifically for OB patients receiving magnesium sulfate I.V. Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 83735	Therapeutic: 4.0 - 7.0 mg/dL Critical: > 7.0 mg/dL	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB MG RBC	MAGNESIUM, RBC	<b>MAGNESIUM, RBC (ERYTHROCYTE)</b> (QUEST 10551) Methodology: ICP/MS Set up: Tues - Sat Report available: 4 days  CPT Code: 83735	Accompanies report	0.5 mL whole blood (L)  Minimum: 0.2 mL
QUEST 27446 Univ. Req.	Universal Requisition	<b>MAGNESIUM, 24 HR URINE</b> Includes Magnesium and Creatinine, 24 hr urine Methodology: Atomic Absorption Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83735	Accompanies report	10 mL of a 24-hr urine specimen preserved with 25 mL 50% acetic acid or 25 mL 6N HCL Please specify total 24 hr urine volume on request form
LAB MG UR	URINE MAGNESIUM RANDOM	<b>MAGNESIUM, RANDOM URINE</b> Includes Creatinine (QUEST 14460) Methodology: AAS Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83735, 82570	Accompanies report	10 mL of a random urine, preserved with 30 mL 6N HCl, submitted in a plastic, leakproof container.  Minimum: 0.5 mL
LAB MALARIASM	MALARIA SMEAR	<b>MALARIA SMEAR</b> Methodology: Microscopic exam Set up: Daily Report available: Next day  CPT Code: 87207	No malaria parasites seen	Fresh fingerstick (preferred) or fresh (<30 min) EDTA blood smears, prepared just before or immediately upon onset of fever; 2 thin smears required.  Or 4 mL EDTA blood (L)
QUEST 626 Univ. Req.	Universal Requisition	<b>MANGANESE, BLOOD</b> Methodology: ICP/MS Set up: Tues, Fri Report available: 5 days  CPT Code: 83785	Accompanies report	2 mL whole blood in an EDTA (DB tube) Minimum: 1.0 mL
LAB MSUD MUT ANALY	MSUD MUTATION ANALYSIS	<b>MAPLE SYRUP URINE DISEASE (MSUD)</b> (QUEST 90909) Methodology: PCR, Allele specific primer extension, Florescent detection/color coded microspheres Set up: Tues, Fri morning Report available: 8 days  CPT Code: 81205	Accompanies report	4 mL whole blood (LAV EDTA) <b>ROOM TEMP</b> <b>See Questdiagnostic.com website for additional required information prior to specimen submission.</b>  MinimumL 3 mL
QUEST 14551X Univ. Req.	Universal Requisition	<b>MARIJUANA METABOLITE PRESUMPTIVE SCREEN</b> Methodology: EMIT Detection limit: Equivalent to 20 ng/mL Set up: Mon - Fri Report available: Next day  CPT Code: 80349	None detected	20 mL random urine  Minimum: 10 mL

QUEST 17445X Univ. Req.	Universal Requisition	<b>MARIJUANA PRESUMPTIVE SCREEN, SERUM</b> Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 80349	Accompanies report	2 mL serum (R or DB)  Minimum: 0.5 mL
QUEST 17161 Univ. Req.	Universal Requisition	<b>MDMA/MDA , QUANTITATIVE, URINE (Ecstasy)</b> Includes MDA, MDMA, MDEA Methodology: MS Set up: Tues-Sat Report available: 3 days  CPT Code: 80359	Accompanies report	20 mL random urine, no preservatives  Minimum: 5 mL
QUEST 11332X Univ. Req.	Universal Requisition	<b>MDMA AND METABOLITE (Ecstasy)</b> Includes MDA, MDMA, MDEA Methodology: GS/MS Set up: Tues, Sat Report available: 8 days  CPT Code: 80359	Accompanies report	5 mL serum (R) Centrifuge serum specimens within 1 hr of collection Minimum: 3 mL
		<b>MEASLES - See Rubeola Virus Antibodies</b>		
		<b>MEBARAL - See Mephobarbital</b>		
QUEST 631X Univ. Req.	Universal Requisition	<b>MELANIN</b> Methodology: Colorimetric Set up: Thurs Report available: Next day  CPT Code: 81005	Accompanies report	20 mL random urine <b>FREEZE</b> protected from light  Minimum: 10 mL
		<b>MELLARIL - See Thioridazine</b>		
QUEST 411 Univ. Req.	Universal Requisition	<b>MEPERIDINE, GC/MS, SERUM</b> Methodology: GC/MS Detection limit: 0.05 mcg/mL Set up: Tues, Thurs Report available: 4 days  CPT Code: 80362	Accompanies report	5 mL serum (DB)  Minimum: 2 mL
LAB MEPHOBARB	MEPHOBARBITAL	<b>MEPHOBARBITAL, SERUM</b> (QUEST 900183) (As phenobarbital, the active metabolite) Methodology: IA Set up: Mon-Sat Report available: Next day  CPT Code: 80345	Accompanies report	1 mL serum (R)  Minimum: 0.5 mL
LAB EQUANIL	EQUANIL / MEPROBAMATE	<b>MEPROBAMATE (EQUANIL) (MILTOWN)</b> (QUEST 5051) Methodology: GC/MS Set up: Tues, Thurs Report available: 4 days  CPT Code: 80369	Accompanies report	2 mL serum (R) Collect just prior to next dose. Minimum: 1.5 mL
LAB MERCURY	MERCURY WHOLE BLOOD	<b>MERCURY, BLOOD</b> (QUEST 636) Methodology: ICP/MS Detection limit: 4 mcg/L Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83825	Accompanies report	4 mL whole blood (DB EDTA) Avoid seafood consumption for 48 hrs before collection. Minimum: 2.0 mL
LAB METANEPUR	URINE METANEPHRINES FRAC 24 HR	<b>METANEPHRINES, FRACTIONATED, 24 HR URINE</b> (QUEST 14962X) Includes Metanephrine, Normetanephrine, Total Metanephrines Methodology: LS/MS/MS Set up: Mon - Fri Report available: 3 days  CPT Code: 83835	Accompanies report	5 mL aliquot of 24-hr urine collection preserved with 25 mL of 50% acetic acid or 25 mL 6N HCL during collection. Alternative preservatives can be used (see Appendix A). Specify total 24-hr volume on request form.  Minimum: 1.5 mL
LAB METANEP PL	METANEPHRINES PLASMA	<b>METANEPHRINES, PLASMA</b> (QUEST 19548) Includes Metanephrine, Normetanephrine, Total Metanephrines Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 83835	Accompanies report	2 mL EDTA (L) plasma <b>FROZEN</b> Note: Must be spun and plasma frozen within 2 hours of collection. Please note: Overnight fasting is preferred. Patient should avoid alcohol, coffee, tea, tobacco and strenuous exercise prior to collection.
		<b>METHACHOLINE CHALLENGE TEST - Refer to Respiratory Therapy</b>		

QUEST 19017 Univ. Req.	Universal Requisition	<b>METHADONE PRESUMPTIVE SCREEN</b> Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: G0479	Accompanies report	30 mL random urine  Minimum: 10 mL
LAB METHADONE CONF	LAB ONLY	<b>METHADONE CONFIRMATION BY GCMS</b> (QUEST 2082) Methodology: GC/MS Detection limit: 50 ng/mL Set up: Mon-Sat Report available: 3 days  CPT Code: 80358	Accompanies report	5 mL serum (DB or R)  Minimum: 1.2 mL serum
		<b>METHANOL - See Alcohol, Methyl</b>		
QUEST 645 Univ. Req.	Universal Requisition	<b>METHAQUALONE (QUAALUDE)</b> Methodology: GCMS Detection limit: 50 ng/mL Set up: Wed Reprot available: 3 days  CPT Code: 80368	Accompanies report	5 mL serum ( R)  Minimum: 1.5 mL
QUEST 19007 Univ. Req.	Universal Requisition	<b>METHAQUALONE PRESUMPTIVE SCREEN</b> Methodology: Kenetic Interaction of Microparticles in Solution Set up: Mon-Fri Report available: Next day  CPT Code: 80375	Accompanies report	30 mL random urine  Minimum: 10 mL
		<b>METHEGLOBIN - refer to Respiratory Therapy</b>		
QUEST 648 Univ. Req.	Universal Requisition	<b>METHOTREXATE</b> Methodology: IA Set up: Mon - Sat Report available: Next day  CPT Code: 80299	Accompanies report	1 mL serum ( R) <b>FREEZE</b> Collect 24, 48, or 72 hours after dose. Protect from light. Record hours from last dose on specimen container.  Minimum: 0.2 mL
		<b>METHYL ALCOHOL - See Alcohol, Methyl</b>		
LAB MTHFR	METHYLENETETRA- HYDROFOLATE	<b>METHYLENETETRAHYDROFOLATE REDUCTASE (MTHFR) DNA MUTATION ANALYSIS</b> (QUEST 17911) Methodology: Hybeacons Set up: Daily Report available: 4 days  CPT Code: 81291	Accompanies report	5 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 3 mL
QUEST 91032 Univ. Req.	Universal Requisition	<b>METHYLMALONIC ACID (MMA), URINE</b> <i>Includes Creatinine</i> Methodology: GC/MS/MS Set up: Tues,Fri Report available: 4 days  CPT Code: 82570, 83921	Accompanies report	1.7 mL random urine, no preservative  Minimum: 0.6 mL
LAB METHYLMAL	METHYLMALONIC ACID	<b>METHYLMALONIC ACID (MMA), QUANTITATIVE, SERUM</b> (QUEST 34879) Methodology: Mass Spectrometry Set up: Mon - Fri Reprot available: 3 days  CPT Code: 83921	Accompanies report	2.0 mL serum (R), <b>FROZEN</b> Centrifuge the specimen as soon as possible after complete clot formation has taken place. Transfer serum to a plastic screw-capped vial and transport frozen Minimum: 1.0 mL
LAB MEXILETINE	MEXILETINE / MEXITIL	<b>MEXILETINE (MEXITIL)</b> (QUEST 1806) Methodology: Gas Chromatography Detection limit: 0.1 µg/mL Set up: Tues, Thurs Reprot available: 5 days  CPT Code: 80299	Accompanies report	2 mL serum (R) <b>SS tubes unacceptable</b> Minimum: 0.5 mL
		<b>MHA-TP - See Treponema pallidum Antibodies</b>		
LAB MICRO-CREA	MICROALBUMIN CREATININE RATIO	<b>MICROALBUMIN/CREATININE GROUP</b> <i>Effective 9/1/15, see ALB-CREA</i>		
		<b>MICROHEMATOCRIT - See Hematocrit, Manual</b>		

LAB MICRO ID LAB USE ONLY		<b>MICRO IDENTIFICATION</b> Characterizes 16S or 18S bacterial and fungal DNA Methodology: PCR (Sanger Method) Set up: M-F Report available: 1-3 days  CPT Code: 87153	Accompanies report	non-dermatophyte fungi and AFB organisms submitted in PrepMan Ultra solution <b>ROOM TEMP</b>
LAB MITOTANE	MITOTANE SERUM	<b>MITOTANE, SERUM</b> (QUEST 11889) Methodology: Gas Chromatography Set up: Tues, Thurs Report available: 4 days  CPT Code: 80299	Accompanies report	1 mL serum (R) <b>ROOM TEMP</b> SS tubes unacceptable Minimum: 0.5 mL
		<b>MIXING STUDIES - See Coag Mixing Studies</b>		
		<b>MOLD IDENTIFICATION - See FUNGAL IDENTIFICATION, MOLD</b>		
LAB HETEROPHIL	HETEROPHIL	<b>MONOSPOT (HETEROPHIL)</b> Methodology: Latex agglutination Set up: Daily Report available: Same day  CPT Code: 86308	Negative	1 mL serum (SS) or plasma (L)  Minimum: 0.5 mL
QUEST 183191 Univ. Req.	Universal Requisition	<b>MORPHINE, BILE (POSTMORTEM ONLY)</b> Methodology: GCMS Set up: Tues, Fri Report available: 3 days  CPT Code: 80361	Accompanies report	5 mL postmortem bile  Minimum: 2.5 mL
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>MPL515</b> (Performed at CPAL) Methodology: Real Time PCR Set up: Mon-Fri days Report available: 1-2 days  CPT Code: 81402, 83891, 83896X2, 83912, 83914 X2	Accompanies report	6.0 mL EDTA whole blood refrigerated or 3.0 mL Bone Marrow refrigerated
	LABNEXUS ORDER ONLY (Order placed by Anatomic Pathology Dept.)	<b>MPN PANEL (JAK2 performed initially, if JAK2 negative, allows Exon 12 to be added as a reflex test, if EXON12 negative, MPL515 added as a reflex test)</b> (Performed at CPAL) Methodology: Real Time PCR Set up: Mon-Fri Report available: 1-2 days  CPT Code: 83891, 83896x2, 83912, 83914x2, 81270 If EXON12 Performed: 83891, 83898X2, 83904, 83912, if MPL515 performed 81402, 83891, 83896 x2, 83912, 83914 x2	Accompanies report	6.0 mL EDTA whole blood refrigerated or 3.0 mL Bone Marrow refrigerated
LAB MRSA ADMIT	MRSA ADMIT	<b>RAPID MRSA ADMITTED</b> Methodology: Molecular DNA Set up: 24/7 Report Available 2 hours  CPT Code: 87641	Negative	Nasal swab only.  Double Culturette (red top) with Stuarts Media.  NICU ONLY: 2 Mini-tip swabs with Stuarts media.
LAB MRSA TRANSFER	MRSA TRANSFER	<b>RAPID MRSA TRANSFER</b> Methodology: Molecular DNA Set up: 24/7 Report Available 2 hours  CPT Code: 87641	Negative	Nasal swab only.  Double Culturette (red top) with Stuarts Media.  NICU ONLY: 2 Mini-tip swabs with Stuarts media.
		<b>MTHFR - See Methylene tetrahydrofolate Reductase</b>		
		<b>MUCOPOLYSACCHARIDES, ACID, QUALITATIVE - See Acid Mucopolysaccharides, Quantitative</b>		

QUEST 7085X Univ. Req.	Universal Requisition	<b>MULTIPLE SCLEROSIS PANEL 2</b> CSF/Serum: albumin index, IgG/albumin ratio, IgG index, IgG synthesis rate, Myelin basic protein, Oligoclonal protein, CSF Methodology: Various Set up: Mon - Fri Report available: Next day  CPT Code: 82040, 82042, 82784(X2), 83873, 83916	Accompanies report	4 mL CSF, <b>FROZEN AND</b> 2 mL serum (R), refrigerated  Minimum: 1.8 mL CSF and 1 mL serum  Instructions: The collection date and time must be the same for both specimens (maximum 12-hour duration between CSF and serum draw times). Both CSF and serum must be sent for calculation of synthesis rate by nephelometry. CSF must be crystalline clear.
LAB MUMPS IGG	MUMPS IGG AB	<b>MUMPS VIRUS IgG ANTIBODIES</b> (CPAL 3000312) The EIA is considerably more sensitive than the CF test and is recommended for determination of immune status in response to past infection or to vaccination. Methodology: EIA Set up: Mon and Thurs Report available: Next day  CPT Code: 86735	Accompanies report	1 mL serum (SS) <b>FREEZE</b>
LAB MUMPS IGM	MUMPS IGM AB	<b>MUMPS VIRUS IgM ANTIBODIES</b> (QUEST 36565) Methodology: IFA Set up: Tues-Sat Report available: 1-3 days  CPT Code: 86735	Accompanies report	1 mL serum (SS) Minimum: 0.2 mL
LAB MUMPS IGG IGM	MUMPS IGG IGM AB	<b>MUMPS VIRUS ANTIBODIES IgG and IgM</b> (QUEST 36564) Methodology: IA / IFA Set up: Tues, Thurs Report available: Next day  CPT Code: 86735(X2)	Accompanies report	1 mL serum (R or SS) Minimum: 0.5 mL
LAB MURAMIDASE	MURAMIDASE / LYSOZYME	<b>MURAMIDASE (LYSOZYME)</b> (QUEST 619) Methodology: Enzymatic Set up: Mon-Sat Report available: Next day  CPT Code: 85549	Accompanies report	1.0 mL serum (SS) <b>FREEZE</b> Centrifuge serum specimens within 1 hr of collection  Minimum: 0.5 mL
		<b>MURINE TYPHUS ANTIBODIES - See Rocky Mountain Spotted Fever Antibodies, Typhus Fever Antibodies</b>		
LAB MUSK TITER AB	MUSK TITER AB	<b>MUSK TITER ANTIBODY</b> (QUEST 18842) Methodology: RIA Set up: Sun-Fri Report available: 4-7 days  CPT Code: 83519	Accompanies report	2.0 mL serum (SS) Minimum: 0.5 mL
LAB MICRO ID LAB USE ONLY		<b>MYCOBACTERIAL (AFB) IDENTIFICATION- See MICRO ID (Laboratory use only)</b>		
LAB MYCOPHENOLIC	MYCOPHENOLIC ACID	<b>MYCOPHENOLIC ACID</b> (QUEST 10662) Includes Mycophenolic Acid and MPA Glucuronide Methodology: LC/MS/MS Set up: Mon - Sat Report available: 2 days  CPT Code: 80180	Accompanies report	1 mL serum (R) Optimum time to collect sample: 0.5 to 1 hour before next dose (trough) at steady-state (3-5 days after treatment with oral doses). Minimum: 0.5 mL
QUEST 15498 Univ. Req.	Universal Requisition	<b>MYCOPLASMA PNEUMONIAE DNA, QUALITATIVE, PCR</b> Methodology: PCR Set up: Mon, Wed, Fri Report available: 1-2 days  CPT Code: 87581		1 mL tissue <b>REFRIGERATED</b>
LAB MYCOANTB	MYCOPLASMA AB IGM	<b>MYCOPLASMA PNEUMONIAE IgM ANTIBODIES</b> Methodology: EIA Set up: Daily Report available: Same day  CPT Code: 86738	Negative	1 mL serum (SS) Minimum: 0.5 mL

LAB MYCO IGG-IGM	MYCOPLASMA PNEUMONIAE IGG IGM	MYCOPLASMA PNEUMONIAE ANTIBODIES (IgG, IgM) (QUEST 34127) Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86738(X2)	Negative	1 mL serum (SS) Minimum: 0.5 mL
LAB CSF MYELIN	CSF MYELIN PROTEIN	MYELIN BASIC PROTEIN (QUEST 663) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 83873	Accompanies report	1 mL CSF Note: Blood contamination and hemolysis may interfere with results. Minimum: 0.5 mL
LAB MYAS GRAV PAN2	MYASTHENIA GRAVIS PANEL 2	MYASTHENIA GRAVIS PANEL 2 (QUEST 10104) Includes Acetylcholine Receptor Binding Antibody, Acetylcholine Receptor Blocking Antibody, Acetylcholine Receptor Modulating Antibody Methodology: RIA Set up: Mon, Thurs Morning Report available: 3 days  CPT Code: 83519(X3)	Accompanies report	2 mL serum (SS) Minimum: 0.7 mL
LAB MYOGLOBIN	MYOGLOBIN SERUM QUANT	MYOGLOBIN, SERUM (QUEST 660) Methodology: Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 83874	Accompanies report	1.0 mL serum (SS), <b>FROZEN</b> Minimum: 0.5 mL
LAB MYOGLOBUR	URINE MYOGLOBIN	MYOGLOBIN, URINE (QUEST 661) Methodology: Fixed Rate Time Nephelometry Set up: Mon - Sat Report available: Next day  CPT Code: 83874	Accompanies report	Exactly 4.0 mL random urine in <u>Myoglobin Transport Tube, FROZEN</u> Transfer urine to the Myoglobin transport tube within 1 hr of collection and freeze. <b>Non-Myoglobin transport tubes will be rejected.</b>
QUEST 10185X Univ. Req.	Universal Requisition	MYOSITIS PLUS JO-1 ANTIBODIES Includes Autoantibodies for PL-7, PL-12, Mi- 2, Ku, EJ, OJ, SRP and Jo-1. Methodology: RIPA / IA Set up: Tues-Thurs Report available: 3 days  CPT Code: 83516(X5), 86235(X3)	Accompanies report	2 (3 mL) tubes of serum (R).  Separate serum within 4 hours of collection. Split serum into 2 plastic, transfer tubes, 3 mL in each.
LAB IFN-B IGG	INTERFERON BETA IGG MAID	NABFERON (R) (IFN-B) ANTIBODY (Interferon-Beta IgG), MAID (QUEST 19509) Methodology: Multi-analyte Immunodetection (MAID) Set up: Mon Report available: 3 days  CPT Code: 83520 [If the Interferon-beta IgG is positive, Interferon-beta (IFNβ) Antibody Neutralization Assay will be performed at an additional charge (CPT Code(s): 86382, 87253)]	Accompanies report	1.5 mL serum (R) Minimum: 0.5 mL  Collect sample at least 8 hours after interferon injection. Include Interferon drug being used.
		<b>N-ACETYLPROCAINAMIDE - See Procainamide</b>		
LAB N-METHYL HIST	URINE N METHYL HISTAMINE	N-METHYL HISTAMINE, URINE (QUEST 10243X) Includes Creatinine Methodology: LC/MS/MS / Enzymatic Set up: Tues, Thurs Report available: 5 days  CPT Code: 83789, 82570	Accompanies report	5.0 mL unpreserved 24-hour urine or random urine Record total volume on specimen container.  Minimum: 3 mL
LAB HLA NARCOLEPSY	HLA TYPING FOR NARCOLEPSY	HLA-DQ TYPING FOR NARCOLEPSY (QUEST 92549) Methodology: PCR followed by Sequence Specific Oligonucleotide Probes Set up: Mon - Sat Report available: 5-7 days  CPT Code: 81383	Accompanies report	14 mL whole blood (Yellow top-ACD-A) or 14 mL whole blood (L) <b>ROOM TEMP</b> Minimum: 5 mL Specimens cannot be shipped on Saturday or the day before a holiday.
		<b>N TERMINAL SPECIFIC PTH - See Parathyroid Hormone</b>		
		<b>N DNA - See Anti-dsDNA</b>		

LAB EOSNAS	NASAL EOSINOPHIL COUNT	<b>NASAL EOSINOPHILS</b> Methodology: Microscopic exam Set up: Daily Report available: Next day  CPT Code: 89190	< 20% of total white blood cells per high power field	2 nasal smears
LAB NG CERV	N GONORRHOEAE CERVICAL	<b>NEISSERIA GONORRHOEAE BY PCR FOR CERVICAL SPECIMENS</b> (CPAL 3009004) <i>NOTE: The PCR test for C. trachomatis can be run from the same specimen. If both tests are desired, order appropriate STD Probe Panel.</i> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87591	Negative	Recommended specimens: Female: Endocervical swab. Use kits for cervical swabs provided from CPAL.  <i>Specimens collected from other body sites will be rejected.</i>  **For collection and testing of specimens from non-genital see GCCULT **
LAB NG CYTO	N GONORRHOEAE THIN PREP	<b>NEISSERIA GONORRHOEAE BY PCR FOR THIN PREP</b> (CPAL 3009010) <i>NOTE: The PCR test for C. trachomatis can be run from the same specimen. If both tests are desired, order appropriate STD Probe Panel.</i> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87591	Negative	Recommended specimens: Female: THIN PREP VIAL  <i>Specimens collected from other body sites will be rejected.</i>  **For collection and testing of specimens from non-genital see GCCULT **
LAB NG URETH	N GONORRHOEAE URETHRAL	<b>NEISSERIA GONORRHOEAE BY SDA FOR URETHRAL SPECIMENS</b> <i>Test has been inactivated, please use NG URINE as an alternative.</i>		
LAB NG URINE	N GONORRHOEAE URINE	<b>NEISSERIA GONORRHOEAE BY PCR FOR URINE</b> (CPAL 3009006) <i>NOTE: The PCR test for C. trachomatis can be run from the same specimen. If both tests are desired, order appropriate STD Probe Panel.</i> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87591	Negative	Recommended specimens: Minimum 20 ml urine  <i>Specimens collected from other body sites will be rejected.</i>  **For collection and testing of specimens from non-genital see GCCULT **
LAB NG VAG	N GONORRHOEAE VAGINAL	<b>NEISSERIA GONORRHOEAE BY PCR FOR VAGINAL SPECIMEN</b> (CPAL 3009008) <i>NOTE: The PCR test for C. trachomatis can be run from the same specimen. If both tests are desired, order appropriate STD Probe Panel.</i> Methodology: PCR Set up: Mon - Fri Report available: 3 days  CPT Code: 87591	Negative	Recommended specimens: Vaginal swab. Use kits for vaginal swabs provided from CPAL.  <i>Specimens collected from other body sites will be rejected.</i>  **For collection and testing of specimens from non-genital see GCCULT **
LAB MISC	Universal Requisition	<b>NEO-GEN (NEWBORN SCREENING) - FMU has supplies for draw</b>		
		<b>NEONATAL HEMOGLOBINOPATHY - See Hemoglobin, Neonate</b>		
QUEST 34476 Univ. Req.	Universal Requisition	<b>NEURON-SPECIFIC ENOLASE (NSE)</b> Methodology: IA Set up: Tues, Fri Report available: 5 days  CPT Code: 86316	Accompanies report	1 mL serum ( R) Note: NSE is high in platelets and RBCs. Therefore, plasma and hemolyzed specimens are unacceptable.  Minimum: 0.2 mL
		<b>NEURONAL NUCLEAR (Hu) ANTIBODY - See Hu Antibody</b>		
		<b>NEURONTIN - See Gabapentin</b>		
LAB NEUR PARA PROF	NEUROPATHY PARANEOPLASTIC PROF	<b>NEOSENSORY NEUROPATHY PARANEOPLASTIC PROFILE</b> (QUEST 900136 - referred to Athena Diagnostics, Inc) <i>Panel includes Recombx™ CV2 Antibody Test, Recombx™ Hu Antibody Test, Amphipylin Antibody Test. Informed consent is not required.</i> Methodology: ELIA, WB, IB Set up: Mon - Fri Report available: 16 days  CPT Code: 83516, 84181, 84182	Accompanies report	4 mL serum (R)  Minimum: 2 mL
		<b>NEUTROPHIL ANTIBODIES - See Anti-PR3</b>		

		<b>NH3 - See Ammonia</b>		
LAB NICOTINE SERUM	<b>NICOTINE AND METABOLITE SERUM</b>	<b>NICOTINE AND COTININE, SERUM</b> (QUEST 90642) Methodology: LS/MS/MS Set up: Mon, Wed, Fri Report available: 4 days  CPT Code: 80323	Accompanies report	1.0 mL serum (R) <b>SS tubes are unacceptable</b> Minimum: 0.5 mL
LAB NICOTINE UR	<b>URINE NICOTINE AND METABOLITE</b>	<b>NICOTINE AND COTININE, URINE</b> (QUEST 90646) Methodology: LC/MS/MS Set up: Mon,Wed Fri Report available: 4 days  CPT Code: 80323	Accompanies report	1.0 mL Random Urine Minimum: 0.5 MI
<b>QUEST 6225X</b> Univ. Req.	<b>Universal Requisition</b>	<b>NIFEDIPINE (ALDOLAT)</b> Methodology: HPLC Set up: Wed Report available: 3 days  CPT Code: 80299	Accompanies report	1 mL serum (R) Protect from light.
		<b>NORDIAZEPAM - See Diazepam</b>		
		<b>NOREPINEPHRINE, EPINEPHRINE, DOPAMINE - See Catecholamines</b>		
		<b>NORPACE - See Disopyramide</b>		
		<b>NORPRAMIN - See Desipramine</b>		
		<b>NORPROPOXYPHENE - See Propoxyphene</b>		
LAB NE REGION	<b>NORTHEAST REGIONAL PANEL</b>	<b>NORTHEAST REGIONAL MIXED PANEL #1</b> (QUEST 43062) <b>See page 1 of Appendix A for allergens included.</b> Methodology: FEIA Set up: Mon - Fri Report available: 4 days  CPT Code: 86003(X21)	Accompanies report	6.3 mL serum (SS) Minimum: 3.2 mL  Centrifuge within 1 hour of collection
<b>QUEST 141363</b> Univ. Req.		<b>NMR LIPOPROFILE</b> <b>Quest test discontinued effective 12/29/14. The recommended alternative is Cardio IQ Lipid Panel (Quest 91716).</b>		
LAB NORTRIP	<b>NORTRIPTYLINE / NORTRIP / AVENTYL</b>	<b>NORTRIPTYLINE (AVENTYL) (PAMELOR)</b> (QUEST 272) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 80335	Accompanies report	3.0 mL serum (R) Collect at steady-state trough concentration. Specimen should be collected >12 hrs after dose. Minimum: 1.2 mL
		<b>N-PEPTIDE INSULIN - See Insulin, Free &amp; Total</b>		
		<b>N-TELOPEPTIDE URINE - See Osteomark</b>		
		<b>NTX - See Osteomark</b>		
LAB 5' NUCLEOTIDASE	<b>5 NUCLEOTIDASE</b>	<b>5' NUCLEOTIDASE</b> (QUEST 14624) Methodology: Colorimetric, Kinetic Set up: Sun - Fri Report available: 1-3 days  CPT Code: 83915	Accompanies report	1 mL serum (SS) Minimum: 0.2 mL
LAB OBS PAN (Order Group)	<b>Order individual tests</b>	<b>OBSTETRICS PANEL</b> <b>CBC, HbsAg, Rubella, RPR, Type and Screen</b>  CPT Code: 80055		6.0 mL whole blood (Pink) AND 6.0 mL serum (SS) AND 5.0 mL whole blood (L)
LAB OCCBLD or OCCBLDDIAG	<b>STOOL OCCULT BLOOD</b>	<b>OCCULT BLOOD</b> Methodology: Guiac Set up: Daily Report available: Same day  CPT Code: 82270 (OCCBLD) 82272 (OCCBLDDIAG)	Negative	Random stool in a clean container with no preservative or prepared occult blood slide.  Minimum: 1 gram
LAB CSF OLIGO	<b>CSF OLIGOCLONAL PROTEIN</b>	<b>OLIGOCLONAL BANDS IN CSF/SERUM</b> (QUEST 674X) <b>Includes IgG/total protein ratio</b> Methodology: Isoelectric Focusing Set up: Mon - Fri Report available: 4 days  CPT Code: 83916	Accompanies report	1 mL CSF <b>and</b> 1 mL serum (SS) Specimens must be drawn within 24 hours of each other.  Minimum: 0.5 mL CSF and 0.5 mL serum.

QUEST 14539X Univ. Req.	Universal Requisition	<b>OPIATE METABOLITES</b> Screen for morphine, morphine glucuronide, and codeine Methodology: EMIT Set up: Mon - Fri Report available: Next day  CPT Code: G0479	Accompanies report	30 mL random urine Minimum: 10 mL
LAB OPIATE SCREEN	OPIATE SCREEN WITH CONFIRM	<b>OPIATE SCREEN WITH CONFIRMATION</b> (QUEST 71797) Screens for opiate metabolites and confirmations performed if indicated. Methodology: Immunoassay Detection limit: 300 ng/mL of morphine Set up: Mon - Fri Report available: 4 days  CPT Code: G0479	Accompanies report	20 mL random urine Minimum: 15 mL
QUEST 20901 Univ. Req.	Universal Requisition	<b>OPIATE VERIFICATION BY GCMS</b> Includes morphine, codeine, hydromorphone, hydrocodone, oxycodone, 6-Monoacetylmorphine Methodology: GCMS Set up: Mon, Thurs Report available: 3 days  CPT Code: 80361	Accompanies report	8mL whole blood (R-no gel) <b>SS tubes unacceptable</b> Minimum: 2.0 mL
QUEST 90404 Univ. Req.	Universal Requisition	<b>ORGANIC ACID, QUALITATIVE, URINE</b> Includes 63 Organic Acids and Creatinine Methodology: GC/MS Set up: Tues, Fri Report available: 7 days  CPT Code: 83919, 82570	Accompanies report	15 mL random urine <b>FREEZE</b> Split specimen into 2 separate containers and freeze both containers.
QUEST 968 Univ. Req.	Universal Requisition	<b>OSMOLALITY, FECES</b> Methodology: Freezing Point Depression Set up: Mon - Fri Report available: Next day  CPT Code: 84999	Reference range not established	1.0 mL liquid stool <b>FREEZE</b> <b>Formed stool will not be accepted.</b>
LAB OSMO	OSMOLALITY SERUM	<b>OSMOLALITY, SERUM</b> Methodology: Freezing point Depression Set up: Daily Report available: Same day  CPT Code: 83930	275 - 295 mOsm/kg	1 mL serum (SS) Minimum: 0.5 mL
LAB UOSMO	URINE OSMOLALITY	<b>OSMOLALITY, URINE</b> Methodology: Freezing Point Depression Set up: Daily Report available: Same day  CPT Code: 83935	50 - 1200 mOsm/kg	3 mL urine Minimum: 0.5 mL
LAB OSTEOMARK	URINE OSTEOMARK / N TELOPEPTIDE / NTX / OSTEOMARK	<b>OSTEOMARK COLLAGEN CROSS-LINKED N-TELOPEPTIDE (NXT)</b> (QUEST 36167X) Includes Creatinine Methodology: Enhances Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 82523, 82570	Accompanies report	2 mL urine, second morning void Minimum 1 mL

LAB OP	OVA AND PARASITE STOOL / O AND P / OP	<b>OVA AND PARASITES, STOOL CONCENTRATE AND PERMANENT SMEAR</b> (QUEST 681X) If stool is soft or liquid, send PVA and 10% formalin or one Total-fix vial. If parasitic infestation is strongly suspected, there should be at least three stool specimen collections and examinations since a single specimen can be negative. For optimum recovery, specimens should be collected every other day. If Giardia is strongly suspected, see Giardia Specific Antigen-65 (Quest 3471). Methodology: Smear Set up: Mon-Fri Report available: 5 days  CPT Code: 87209, 87177	Accompanies report	Collect enough specimen to fill <b>both PVA and 10% formalin containers</b> -or- <b>one Total-fix vial</b> to the level indicated on the containers. Mix well. Container(s) are available from the Laboratory.  <b>ROOM TEMPERATURE</b>
QUEST 2127 Univ. Req.	Universal Requisition	<b>OVA AND PARASITES, URINE</b> Effective 8/15/16, Quest has discontinued this test. There is no recommended alternative.		
LAB OVA1	OVA1(R) TEST	<b>OVA1(R) TEST</b> (QUEST 16991) Effective 8/10/15, this test is no longer available. Patients with this order must go to a Quest Patient Service Center to be drawn. (A special kit needs to be used.)		
LAB OX 24 UR	URINE OXALATE 24HR	<b>OXALATE (OXALIC ACID), 24 HR URINE</b> (QUEST 6816) Methodology: Spectrophotometric Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 83945	Accompanies report	10 mL aliquot of 24-hr urine, preserved with 30 mL of 6N HCL during collection. Alternative preservatives <b>cannot</b> be used. Specify total 24-hr volume on request form.  Minimum: 2 mL
QUEST 90855 Univ. Req.	Universal Requisition	<b>OXAZEPAM</b> Methodology: LC/MS/MS Set up: Fri Report available: 3 days  CPT Code: 80346	Accompanies report	2.0 mL serum (R) <b>FREEZE</b> <b>SS tube unacceptable</b> Minimum: 1.0 mL
LAB OXCARBAZEP	OXCARBAZEPINE / TRILEPTAL	<b>OXCARBAZEPINE (TRILEPTAL)</b> (QUEST 36637) Methodology: LC/MS/MS Set up: Mon - Sat Report available: 1-3 days  CPT Code: 80299	Accompanies report	1 mL serum (R) or 1 mL plasma (L)  Minimum: 0.5 mL
LAB OXYCODONE UR	OXYCODONE, SCREEN & CONF, URINE	<b>OXYCODONE, SCREEN AND CONFIRMATION, URINE</b> (QUEST 14450) Methodology: Immunoassay Set up: Mon - Fri Report available: 4 days  CPT Code: G0479	Accompanies report	20 mL random urine  Minimum: 2 mL
		<b>OXYTRIPHYLLINE - See Theophylline</b>		
		<b>P-ANCA - See Anti-Myeloperoxidase</b>		
BBK PC		<b>PACKED CELLS</b> Effective 4/27/11 Use LRPRBC to order PC. PC inactivated.		
		<b>PAMELOR- See Nortriptyline</b>		
LAB PM AMPHETAMINES	PAIN MGMT AMPHETAMINES URINE	<b>PAIN MANAGEMENT, AMPHETAMINES, QUANTITATIVE, URINE</b> Includes Amphetamine, Methamphetamine (QUEST 16913) Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80324	Accompanies report	20 mL urine  Minimum: 5 mL urine

LAB PM BARBITURATES	PAIN MGMT BARBITURATES URINE	<b>PAIN MANAGEMENT, BARBITURATES, QUANTITATIVE, URINE</b> (QUEST 16912) Includes Amobarbital, Butalbital, Pentobarbital, Secobarbital, Phenobarbital Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80345	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM BENZODIAZ U	PAIN MGMT BENZODIAZEPINES UR	<b>PAIN MANAGEMENT, BENZODIAZEPINES, QUANTITATIVE, URINE</b> (QUEST 16914) Includes Alphahydroxypropizolam, Alphahydroxyimidazolam, Alphahydroxytriazolam, Aminoclonazepam, Hydroxyethylflurazepam, Lorazepam, Nordiazepam, Oxaepam, Temazepam Methodology: Mass Spectrometry Set up: Mon-Sat Report available: 4 days  CPT Code: 80346	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM BUPRENOR U	PAIN MGMT BUPRENORPHINE URINE	<b>PAIN MANAGEMENT, BUPRENORPHINE, QUANTITATIVE, URINE</b> (QUEST 16213) Includes Buprenorphine, Norbuprenorphine Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80348	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM COCAINE U	PAIN MGMT COCAINE METAB URINE	<b>PAIN MANAGEMENT, COCAINE METABOLITE, QUANTITATIVE, URINE</b> (QUEST 16916) Includes Benzoylcegonine Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80353	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM CARISOPRODOL	PAIN MGMT CARISOPRODOL URINE	<b>PAIN MANAGEMENT, CARISOPRODOL METABOLITE, QUANTITATIVE, URINE</b> (QUEST 16902) Includes Meprobamate Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80369	Accompanies report	20 mL urine Minimum: 7 mL urine
LAB PM FENTANYL U	PAIN MGMT FENTANYL URINE	<b>PAIN MANAGEMENT, FENTANYL, QUANTITATIVE, URINE</b> (QUEST 16900) Includes Fenanyl, Norfentanyl Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80354	Accompanies report	20 mL urine Minimum: 7 mL urine
LAB PM HEROIN METAB	PAIN MGMT HEROIN METAB URINE	<b>PAIN MANAGEMENT, HEROIN METABOLITE, QUANTITATIVE, URINE</b> (QUEST 90329) Includes 6-Acetylmorphine Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80356	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM MARIJUANA U	PAIN MGMT MARIJUANA URINE	<b>PAIN MANAGEMENT, MARIJUANA METABOLITE, QUANTITATIVE, URINE</b> (QUEST 16917) Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80349	Accompanies report	20 mL urine Minimum: 5 mL urine

LAB PM MEPERIDINE U	PAIN MGMT MEPERIDINE URINE	<b>PAIN MANAGEMENT, MEPERIDINE, QUANTITATIVE, URINE</b> (QUEST 16905) <i>Includes Meperidine, Normeperidine</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80362	Accompanies report	20 mL urine Minimum: 7 mL urine
LAB PM METHADONE U	PAIN MGMT METHADONE URINE	<b>PAIN MANAGEMENT, METHADONE, QUANTITATIVE, URINE</b> (QUEST 16918) <i>Includes EDDP, Methadone</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80358	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM METHYLPHEN U	PAIN MGMT METHYLPHENIDATE UR	<b>PAIN MANAGEMENT, METHYLPHENIDATE METABOLITE, QUANTITATIVE, URINE</b> (QUEST 90246) <i>Includes Ritalinic Acid</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 83789	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM OPIATES QN U	PAIN MGMT OPIATES URINE	<b>PAIN MANAGEMENT, OPIATES EXPANDED, QUANTITATIVE, URINE</b> (QUEST 16298) <i>Includes Codeine, Hydrocodone, Hydromorphone, Morphine, Norhydrocodone, Noroxycodone, Oxycodone, Oxymorphone</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80361, 80365	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM PHENCYC QN U	PAIN MGMT PHENCYCLIDINE URINE	<b>PAIN MANAGEMENT, PHENCYCLIDINE, QUANTITATIVE, URINE</b> (QUEST 16921) Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 83992	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM PROF W CONF	PAIN MGMT PROFILE W CONFIRM UR	<b>PAIN MANAGEMENT PROFILE 1 WITH CONFIRMATION, WITHOUT medMATCH, URINE</b> (QUEST 92458) <i>Includes Creatinine, Oxidant, pH, Amphetamines, Barbiturates, Benzodiazepines, Marijuana Metabolite, Cocaine Metabolite, Methadone Metabolite, Opiates, Oxycodone, Phencyclidine.</i> Quantitative confirmation of positives will be performed at an additional charge(s). Methodology: IA/ MS Set up: Daily Report available: 3 days  CPT Code: G0479, 82570, 83986, 84311	Accompanies report	30 mL urine Minimum: 7 mL urine
LAB PM PROPOXY U	PAIN MGMT PROPOXYPHENE URINE	<b>PAIN MANAGEMENT, PROPOXYPHENE METABOLITE, QUANTITATIVE, URINE</b> (QUEST 16921) <i>Includes Norpropoxyphene</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 80367	Accompanies report	20 mL urine Minimum: 5 mL urine
LAB PM TAPENTADOL U	PAIN MGMT TAPENTADOL URINE	<b>PAIN MANAGEMENT, TAPENTADOL, QUANTITATIVE, URINE</b> (QUEST 90243) <i>Includes Tapentadol, Nortapentadol</i> Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 83789	Accompanies report	20 mL urine Minimum: 5 mL urine

LAB PM TRAMADOL U	PAIN MGMT TRAMADOL URINE	PAIN MANAGEMENT, TRAMADOL, QUANTITATIVE, URINE (QUEST 16906) Includes Desmethyltramadol, Tramadol Methodology: Mass Spectrometry Set up: Daily Report available: 3 days  CPT Code: 83789	Accompanies report	20 mL urine Minimum: 7 mL urine
LAB PARA AB	PARAINFLUENZA VIRUS AB	PARAINFLUENZA (1,2,3) VIRUS ANTIBODIES (QUEST 7691) Methodology: CF Set up: Mon - Fri Report available: 2 days  CPT Code: 86790(X3)	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
LAB PARAINF CULT	PARAINFLUENZA VIRUS CULTURE	PARAINFLUENZA VIRUS CULTURE (QUEST 3318) Methodology: Rapid Culture Set up: Daily	Accompanies report	Nasopharyngeal or tracheal swab in VCM; nasal turbinate swab in VCM; bronchial lavage/wash in sterile container
LAB PARAINF DIF		PARAINFLUENZA VIRUS DIRECT IF (QUEST 5398) This test is no longer available effective 2/10/14.		
		PARANEOPLASTIC ANTIBODIES - See Neuronal Nuclear Antibody		
MIC PARASITE ID	LAB ONLY	PARASITE IDENTIFICATION  CPT Code: 87169		Suspected parasite in a clean container labeled with patient name.
LAB PED FOOD PANEL1	PEDIATRIC MIXED FOOD PANEL 1	PEDIATRIC MIXED FOOD PANEL #1 (QUEST 8742) Contains Egg White, Milk, Codfish, Wheat, Peanut, Soybean Methodology: Immunoassay Set up: Mon - Sat Report avail: Next day  CPT Code: 86003(X6)	Accompanies report	1.8 mL serum (SS) Room Temperature (can be sent refrigerated also)  Minimum: 0.9 mL
LAB PED FOOD PANEL2	PEDIATRIC MIXED FOOD PANEL 2	PEDIATRIC MIXED FOOD PANEL #2 (QUEST 120562) Contains Green Bean, Egg White, Milk, Wheat, Rye, Barley, Oat, Corn, Rice, Pea, Peanut, Soybean, Tomato, Pork, Orange, Potato, Strawberry, Yeast, Egg Yolk, Cocoa, Banana Methodology: Immunoassay Set up: Mon - Sat Report avail: Next day  CPT Code: 86003(X21)	Accompanies report	4.2 mL serum (SS) Room Temperature (can be sent refrigerated also)  Minimum: 2.1 mL
LAB PED FOOD PANEL3	PEDIATRIC MIXED FOOD PANEL 3	PEDIATRIC MIXED FOOD PANEL #3 (QUEST 133382) Contains Egg White, Milk, Wheat, Soybean Methodology: Immunoassay Set up: Mon - Sat Report avail: Next day  CPT Code: 86003(X4)	Accompanies report	1.2 mL serum (SS) Room Temperature (can be sent refrigerated also)  Minimum: 0.6 mL
LAB PTH, INTACT	PTH INTACT	PARATHYROID HORMONE, INTACT Report includes calcium Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 83970, 82310	Accompanies report	Gn -Li (PST) (Full tube) (Stable 8 hrs refrigerated or frozen)
LAB PTH INTACT PROF	INTACT PTH PROFILE 1	INTACT PTH PROFILE #1 (PTH INTACT, PLUS) (QUEST 1316) Contains calcium, phosphorus, creatinine w/eGFR, PTH intact and PTH nomogram Methodology: Immunoassay Set up: Mon - Fri Report avail: 2 days  CPT Code: 82310, 82565, 83970,84100	Accompanies report	2.0 mL serum (SS) FREEZE IMMEDIATELY AFTER CENTRIFUGATION.  Minimum: 0.5 mL
LAB PTH-IO	PTH INTRAOPERATIVE	PARATHYROID HORMONE, INTRAOPERATIVE, Performed as a STAT test from the O.R. Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 83970	Accompanies report	Gn -Li (PST) (Full tube)

LAB PTH-RP	PTH RELATED PROTEIN	<b>PARATHYROID HORMONE RELATED PROTEIN (PTH-RP)</b> (QUEST 34478) Methodology: Immunoassay Set up: Tues-Fri Report avail: 4 days  CPT Code: 83519	Accompanies report	0.5 mL Plasma Sodium heparin (Green-top tube): Draw blood into green-top tube. Following the blood collection, mix the tube by inverting gently. Centrifuge the specimen as soon as possible for at least 15 minutes. Transfer the plasma to a plastic transport tube and ship at <b>ROOM TEMPERATURE</b> . Mark the specimen type as plasma on the transport tube. <u>DO NOT</u> submit unspun tubes.  Minimum: 0.3 mL
		<b>PARIETAL CELL ANTIBODIES - See Gastric Parietal Cell Antibody</b>		
		<b>PAROXYSMAL NOCTURNAL HEMOGLOBINURIA - See Sucrose Hemolysis Test</b>		
		<b>PARTIAL THROMBOPLASTIN TIME, ACTIVATED - See Activated Partial Thromboplastin Time</b>		
LAB PARVO DNA	PARVOVIRUS B19 DNA, QL RT-PCR	<b>PARVOVIRUS B19 DNA, QUALITATIVE RT-PCR</b>  (QUEST 5319) Methodology: RT-PCR Set up: Daily Report available: Next day  CPT Code: 87798	Accompanies report	<b>10 mL Plasma, LAV EDTA or RED Clot Plasma Preparation Tubes (PPTs).</b> Store collected whole blood at room temperature and separate plasma from cells within 2 hours of collection. Transfer plasma to sterile, plastic, screw-capped tubes and store refrigerated or frozen. If blood is collected in a PPT tube, centrifuge within 2 hours of collection and store refrigerated or frozen. It is not necessary to transfer the plasma from a PPT tube to aliquot tubes. <b>Whole blood and bone marrow:</b> Collect in sterile tubes containing EDTA or ACD as anticoagulant. Store and ship refrigerated. Do not freeze. <b>Amniotic fluid:</b> Collect in a sterile, leakproof container and refrigerate for storage and transport. <b>Serum:</b> Collect blood in sterile tubes without anticoagulant; (SS, serum separator tube) is recommended. Allow blood to clot at room temperature and separate serum from cells within 2 hours of collection. Transfer serum to sterile, plastic, screw-capped aliquot tubes.
LAB PARVO ACUTE	PARVO B19 ACUTE PANEL	<b>PARVOVIRUS B19 IgG and IgM AB, ACUTE</b> (QUEST 8946) Methodology: EIA Set up: Mon - Sat Report available: Next day  CPT Code: 86747(X2)	Accompanies report	2 mL serum (SS)  Minimum: 0.5 mL
LAB PARVO CONV	PARVO B19 CONVALESCENT PANEL	<b>PARVOVIRUS B19 IgG and IgM AB, CONVALESCENT</b> (QUEST 3483) Methodology: EIA Set up: Mon - Sat Report available: Next day  CPT Code: 86747(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
QUEST 6251X urine Univ. Req.  QUEST 34007X plasma Univ. Req.	Universal Requisition	<b>PCP (PHENCYCLIDINE) VERIFICATION AND QUANTITATION BY GCMS</b> Methodology: GCMS Detection limit: 5 ng/mL Set up: Tues,Thurs Report available: 4 days  CPT Code: 83992	Accompanies report	5 mL plasma (DB) or 15 mL urine  Minimum: 1 mL
		<b>PCP (PNEUMOCYSTIS CARINII) PNEUMONIA)</b> Order a cytology - specimen for Histology for stain		Sputum or bronchial washing
		<b>PNEUMOCYSTIS CARINII (JIROVECI), DFA</b> See P CARINII DFA		
QUEST 700X Univ. Req.	Universal Requisition	<b>PENTOBARBITAL (NEMBUTAL)</b> Methodology: Chromatography Set up: Daily Report available: 3 days  CPT Code: 80345	Accompanies report	3 mL serum ( R) Collect just before next dose. <b>SS tubes are unacceptable</b> Minimum: 1.0 mL

		<b>PERIPHERAL SMEAR - See Differential</b>		
		<b>PERTOFRANE - See Desipramine</b>		
		<b>PERTUSSIS - See Bordetella</b>		
		<b>PFA 100 - See Platelet Function Analysis</b>		
LAB PH BDY FLD	PH BODY FLUID	<b>pH, BODY FLUID</b> Methodology: Potentiometric Set up: Daily Report available: Next day  CPT Code: 83986	Accompanies report	3.0 mL fluid (Gn) Submit to Respiratory Therapy Department <b>after</b> order is placed.
QUEST 1304X Univ. Req.	Universal Requisition	<b>pH, FECAL</b> Methodology: Potentiometric Set up: Mon - Fri Report available: Next day  CPT Code: 83986	Accompanies report	5 grams random stool specimen, <b>FROZEN</b>  Minimum: 1 g
LAB PHCO VEN	PH CO VENOUS	<b>pH, VENOUS</b> Contact Respiratory Therapy Department  CPT Code: 82800		5 mL blood (Gn - Lithium) Submit to Respiratory Therapy Department <b>after</b> order is placed.  Minimum: 2 mL
LAB PHENOBARB	PHENOBARBITAL / PHENOBARB	<b>PHENOBARBITAL</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80184	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.3 mL
QUEST 17085Z Univ. Req.	Universal Requisition	<b>PHENOLPHTHALEIN, STOOL</b> Methodology: Colorimetric Set up: Mon - Fri Report available: Next day  CPT Code: 84311	Accompanies report	10 g random stool Minimum: 5 g
QUEST 37356 Univ. Req.	Universal Requisition	<b>PHENYLALANINE, BLOOD</b> Methodology: HPLC Set up: Tues, Thurs Report available: 5 days  CPT Code: 84030	Accompanies report	0.4 mL plasma (Gn, sodium heparin) Collect specimen after an overnight fast (or at least 4 hrs after a meal) if possible Minimum: 0.2 mL
LAB DILA	DILANTIN / PHENYTOIN	<b>PHENYTOIN (DILANTIN)</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80185	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
QUEST 3189X Univ. Req.	Universal Requisition	<b>PHENYTOIN, FREE</b> Methodology: Ultrafiltration/Immunoassay Set up: Mon - Sat Report available: Next day  CPT Code: 80186	Accompanies report	2.5 mL serum (R)  Minimum: 1.5 mL
LAB PHOSPHATID	PHOSPHATIDYLSERINE PANEL	<b>PHOSPHATIDYLSERINE IgG, IgM, IgA ANTIBODY PANEL</b> (QUEST 10062X) Methodology: IA Set up: Tues, Thurs Report available: Next day  CPT Code: 86148(X3)	Accompanies report	1.0 mL plasma (LB)  Minimum: 0.5 mL
LAB PHOS PANEL	PHOSPHOLIPID AB PANEL	<b>PHOSPHOLIPID ANTIBODY PANEL - (QUEST 148908)</b> Includes Beta -2 Glycoprotein antibodies, Cardiolipin antibodies, Phosphatidylserine antibodies Methodology: Immunoassay Set up: Tues, Thurs Report available: Next day  CPT Code: 86146(X3), 86147(X3), 86148(X3)	Accompanies report	5 mL serum (SS)  Minimum: 2.3 mL
QUEST 717X Univ. Req.	Universal Requisition	<b>PHOSPHOLIPIDS</b> Methodology: Spectrophotometric Set up: Mon, Thurs Report available: Next day  CPT Code: 84311	Accompanies report	1.0 mL serum (R) Centrifuge within 1 hr of collection. Minimum: 0.5 mL
LAB PHOS	PHOSPHORUS	<b>PHOSPHORUS</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84100	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL

LAB UPHOS	PHOSPHORUS, URINE	<b>PHOSPHORUS, RANDOM URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84105	None available	10 mL random urine at room temp  Minimum: 2.0 mL
LAB PHOS UR	PHOSPHORUS 24 HR URINE	<b>PHOSPHORUS, URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84105	Accompanies report	10 mL aliquot of 24-hr urine collection preserved with 30 mL 6N HCL  Minimum: 2.0 mL
LAB PHOS UR	PINWORM EXAM	<b>PINWORM EXAM</b> A microscopic examination is conducted for <i>Enterobius vermicularis</i> ova. Methodology: Microscopic Set up: Mon - Fri Report available: Next day  CPT Code: 87169	None detected	Call Microbiology Dept (738-6415) for information about collection technique and container.
LAB HEP IND PL	HEPARIN INDUCED PLT AGG	<b>PLATELET AGGREGATION STUDY</b> Sent to Lancaster General Hospital. LGH performs test daily at 10 AM Monday - Friday and Sunday. STAT testing is not available. If drawing specimen on shifts other than dayshift, leave a note in Specimen Processing for dayshift to arrange transportation to LGH. * Complete LGH patient history form and LGH test requisition form. (Forms are available in folder in Specimen Processing Department.) Send forms to LGH along with the specimen. *As of 1/03 the floors have HIPA forms to complete and send with specimen to lab. Flag re: in Unity.  CPT Code: 86022	Accompanies report	Collect 1 red top tube. Contact courier requesting specimen delivery to LGH Core Lab, preferably before 10AM. Call LGH at 544-4317. Inform them that a HIPA test will be delivered to them. If the specimen will not arrive at LGH by 10 AM on the day of collection, aliquot specimen into 2 plastic tubes and <b>FREEZE</b> .  If drawing from line 1/2 cc in one tube, 20 cc's must be discarded; the rest in the other.  FOR OPT - Secretary must fax HIPA form to ordering physician.
		<b>PLATELET AGGREGATION STUDY NON HEPARIN INDUCED</b> Patients must go to HMC for this test. Specimens cannot be sent. Patient must schedule this test with the Special Hematology Lab at HMC. Call 531-8559.		
LAB PLT AB DIR	PLATELET AB DIRECT	<b>PLATELET ANTIBODY, DIRECT (IgG)</b> (QUEST 50198) Methodology: Flow Cytometry Set up: Daily morning Report available: 4 days  CPT Code: 86023	Accompanies report	6 mL whole blood EDTA (L) tubes stored at <b>ROOM TEMP</b>  Minimum: 3 mL
LAB PLT AB IND	PLATELET AB INDIRECT	<b>PLATELET ANTIBODY, INDIRECT (IgG)</b> (QUEST 16288) Includes Platelet Ab: GP IIB/IIA; Platelet Ab: IA/IIA; Platelet Ab: GP IB/IX; Platelet Ab: HLA Class I; Interpretation Methodology: IA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86022(X4)	Accompanies report	3.0 mL plasma (L) <b>FREEZE</b> Minimum: 1.0 mL
QUEST 34327 Univ. Req.	Universal Requisition	<b>PLATELET ANTIBODIES, INDIRECT (IgG, IgA, IgM)</b> Methodology: FC Set up: Mon-Sat Report available: 4 days  CPT Code: 86022(X3)	Accompanies report	2 mL serum (SS)  Minimum: 1 mL

LAB PLT	PLATELET COUNT	<b>PLATELET COUNT</b> Methodology: Automated Set up: Daily Report available: Same day  CPT Code: 85049	140 - 440 x 10 <sup>9</sup> /L	5 mL blood (L); Maintain at ambient temperature. For patients with known platelet clumping, submit full sodium citrate tube (LB) also. Make note under Special Instructions on request form.  Minimum: 1 mL
LAB PFA	PLATELET FUNCTION ANALYSIS	<b>PLATELET FUNCTION ANALYSIS</b> Methodology: Shear Flow Stress Set up: Daily Report available: Same day  CPT Code: 85576	Accompanies report	2 tubes 4.5 mL whole blood (LB). <b>ROOM TEMPERATURE.</b> Must be received within 4 hours of collection. Must complete PFA Patient History Form. **Test to be drawn in Main Lab and Diagnostic Center only
		<b>PLATELET NEUTRALIZATION PROCEDURE - See Lupus Anticoagulant - PNP</b>		
BBK ACRODOSE PLTS or SDPL	ACRODOSE PLATELETS -or- SINGLE DONOR PHERESIS PLATELET	<b>PLATELETS</b> Includes ABORh and antibody screen. Methodology: Hemeagglutination Set up: Daily Report available: Same day  For acrodose platelets order ACRODOSE PLTS For Single donor platelets order SDPL  CPT Code: 86900, 86901, 86850 + product		6.0 mL whole blood (Pink) properly labeled with Blood Bank armband
LAB PNEUMO 6	PNEUMO IGG 6 SEROTYPES	<b>PNEUMOCOCCAL IgG SEROTYPES (6 SEROTYPES)</b> (QUEST 34263X) Includes Serotypes 1,3,14,19 (19F), 23 (23F), 51 (7F) Methodology: MAID Set up: Mon - Sat Report available: 1-3 days  CPT Code: 86317(X6)	Accompanies report	0.5 mL serum (SS or R)  Minimum: 0.25 mL
LAB PNEUMO 14	PNEUMO IGG 14 SEROTYPES	<b>PNEUMOCOCCAL IgG SEROTYPES (14 SEROTYPES)</b> (QUEST 19564X) Includes Serotypes 1, 3, 4, 5, 8, 9 (9N), 14, 19 (19F), 23 (23F), 26 (6B), 51 (7F), 56 Methodology: MAID Set up: Mon-Sat Report available: 1-3 days  CPT Code: 86317(X14)	Accompanies report	0.5 mL serum (SS or R)  Minimum: 0.25 mL
LAB P CARINII DFA	PNEUMOCYSTIS CARINII DFA	<b>PNEUMOCYSTIS CARINII (JIROVECI), DFA</b> (QUEST 12200) Includes Pneumocystis carinii DFA and Concentration Methodology: DFA Set up: Mon - Sun Report available: Next day  CPT Code: 87015, 87281	Accompanies report	3 mL bronchial lavage/washings submitted in sterile, screw-capped container. -Or- 3 mL sputum submitted in sterile, screw-capped container.  Minimum: 2 mL
LAB POLIO AB NEUT		<b>POLIOVIRUS ANTIBODY NEUTRALIZATION (IMMUNE STATUS)</b> (QUEST 56772) Effective 6/27/16, Quest has discontinued this test.		
		<b>POLIOVIRUS CULTURE - See Enterovirus Culture</b>		
QUEST 117822 Univ. Req.	Universal Requisition	<b>POLYMYCITIS ANTIBODY (SRP ANTIBODIES)</b> Methodology: Radioimmunoprecipitation Assay Set up: Tues-Thurs Report available: 9 days  CPT Code: 86235	Accompanies report	1 mL serum (R) Separate serum within 4 hrs of collection. Minimum: 0.5 mL
QUEST 2286 Univ. Req.	Universal Requisition	<b>PORPHOBILINOGEN, QUALITATIVE, URINE</b> Methodology: Colorimetric Set up: Tues, Fri Report available: Next day  CPT Code: 84106	Accompanies report	20 mL random urine Collect after first morning void and before early evening. Protect from light  Minimum: 2 mL

LAB PORPHO UR	URINE PORPHOBILINOGEN RANDOM	<b>PORPHOBILINOGEN, URINE, QUANTITATIVE</b> (Quest 6329) Methodology: Colorimetric Set up: Tues, Fri Report available: Next day  CPT Code: 84110	Accompanies report	10 mL random urine, no preservatives protect from light  Minimum: 2 mL
LAB PORPHY ST	PORPHYRINS STOOL	<b>PORPHYRINS, FECAL, QUALITATIVE</b> (QUEST 35518) Methodology: Fluorometric Set up: Tues Report available: Next day  CPT Code: 84311	Accompanies report	10 g random stool <b>FREEZE</b> Protect from light  Minimum: 5 g
QUEST 729X Univ. Req.	Universal Requisition	<b>PORPHYRINS, FRACTIONATED QUANTITATIVE, 24-HOUR URINE</b> Includes Coproporphyrin III, Hepta- carboxyprophyrin, Hexacarboxyprophyrin, Pentacarboxyprophyrin, Total Porphyrins, Uroporphyrin I, Uroporphyrin III Methodology: HPLC Set up: Sun, Tues - Fri Report available: 5 days  CPT Code: 84120	Accompanies report	2 mL aliquot of 24-hr urine preserved with 5 g Na <sub>2</sub> CO <sub>3</sub> during collection; protect from light and refrigerate. Specify total 24-hr volume on request form.  Minimum: 1 mL
		<b>PORPHYRINS, BLOOD - See Zinc Protoporphyrin (ZPP)</b>		
LAB K	POTASSIUM	<b>POTASSIUM</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 84132	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB K W-CREAT 24H U	POTASSIUM WITH CREAT 24HR UR	<b>POTASSIUM with CREATININE, 24-HOUR URINE</b> (QUEST 15831) Methodology: ISE Set up: Daily Report available: 4 days  CPT Code: 84133, 82570	Accompanies report	10 mL aliquot of unpreserved 24-hour urine. 24 hour volume required.  Minimum: 2 mL
LAB UK	URINE POTASSIUM RANDOM	<b>POTASSIUM , URINE - See Electrolytes Urine also</b>  CPT Code: 84133		
		<b>PR3 - See Anti-PR3</b>		
LAB PREECLAMPAN	PREECLAMPZIA PANEL	<b>PREECLAMPZIA PANEL</b> Includes: CBC, AST, ALT, Protein Creatine Ratio, Creatine Clearance, Urine Total Protein 24 Hour, Uric Acid Methodology: Various Set up: Daily Report available: Same day  CPT Code: 85025,84450,84460,82570,84156,82575, 84156, 84550	Accompanies report	4 mL blood (EDTA), 4 mL blood (Gn-Li), 24 hour urine collection, 5mL random urine
LAB PREGABALIN	PREGABALIN / LYRICA	<b>PREGABALIN (LYRICA) , S/P</b> (QUEST 18866) Methodology: LC/TMS Set up: Tues, Thurs, Sat Report available: 3 days  CPT Code: 80299	Accompanies report	1 mL serum (R)  Minimum: 0.4 mL  Specimen Stability: Room temp: 7 Days Refrigerated: 14 Days Frozen: 30 Days
		<b>PREGNANCY TEST, SERUM - See Chorionic Gonadotropin</b>		
		<b>PREGNANCY TEST, URINE - See Chorionic Gonadotropin</b>		
LAB PREGNENOLONE	PREGNENOLONE	<b>PREGNENOLONE</b> (QUEST 39052) Methodology: LC/MS/MS Set up: Sun - Thurs Report available: 6 days  CPT Code: 84140	Accompanies report	0.5 mL serum (R) <b>SST tube unacceptable</b>  Minimum: 0.2 mL

LAB PRIMIDONE	PRIMIDONE / MYSOLINE	<b>PRIMIDONE (MYSOLINE)</b> (QUEST 6381) <i>Includes Phenobarbital</i> Methodology: Immunoassay Set up: Mon - Sat Report available: Next day  CPT Code: 80188, 80184	Accompanies report	1 mL plasma (L) or 1 mL serum (R or DB) <b>SST unacceptable</b> Collect as through just prior to next dose. Minimum: 0.5 mL
QUEST 900888 Univ. Req.	Universal Requisition	<b>14-3-3 PROTEIN, CSF (PRION DISEASE)</b> Methodology: IA Set up: Mon-Fri Report available: 10 days  CPT Code: 83520	Accompanies report	5.0 mL CSF <b>FROZEN</b> Freeze within 20 minutes of collection. Store and transport frozen on dry ice. <b>Ship Monday- Wednesday only.</b> Minimum: 1.0 mL
LAB PROC-NAPA	PROCAINAMIDE PLUS NAPA	<b>PROCAINAMIDE (PRONESTYL)</b> <i>Includes N-acetylprocainamide (NAPA)</i> (QUEST 3782) Methodology: Immunoassay Set up: Mon-Sat Report available: Next day  CPT Code: 80192	Accompanies report	1 mL serum (R) Collect as a trough just before next dose. Minimum: 0.2 mL
LAB PCT	PROCALCITONIN	<b>PROCALCITONIN</b> Methodology: Enzyme Immunoassay Set up: Daily Report available: Same day  CPT Code: 84145	0-0.05 ng/mL	1 mL serum (SST) Minimum: 0.5 mL
LAB PROGEST	PROGESTERONE	<b>PROGESTERONE</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84144	Accompanies report	1 mL serum (SS) Minimum: 0.5 mL
QUEST 8752X Univ. Req.	Universal Requisition	<b>PROGESTERONE FOR IN VITRO FERTILIZATION</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84144	Accompanies report	1.0 mL serum (SS) Minimum: 0.5 mL
LAB PROGEST 17	PROGESTERONE 17 ALPHA	<b>17-HYDROXYPROGESTERONE</b> (QUEST 17180) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 83498	Accompanies report	0.5 mL serum (R) Minimum: 0.25 mL
		<b>PROGRAF - See FK506</b>		
LAB PROINSULIN	PROINSULIN	<b>PROINSULIN (QUEST 7091)</b> Methodology: Immunoassay Set up: Mon Report available: 4 days  CPT Code: 84206	Accompanies report	1 mL serum (SS) <b>FREEZE</b> Overnight fasting is required. Allow blood to fully clot (about 1/2 hour) at room temperature (20-25 degrees C). Centrifuge in a refrigerated centrifuge and separate immediately. Specimens collected in serum separation tubes should be removed from the gel after centrifugation.  Minimum: 0.8 mL
LAB PROLACTIN	PROLACTIN	<b>PROLACTIN</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84146	Accompanies report	1 mL serum (SS)
QUEST 12237 Univ. Req.	Universal Requisition	<b>PROMETHAZINE</b> Methodology: GC Set up: Sun - Fri Report available: 4 days  CPT Code: 80342	Accompanies report	3 mL serum (R) or 3 mL EDTA plasma (L)
		<b>PROMETHEUS</b> Send out to Athena Diagnostics - Must be drawn at WellSpan Ephrata Medical Laboratories (EML)		
		<b>PRONESTYL - See Procainamide</b>		
LAB PROPAPF	PROPAPFENONE / RHYTHMOL	<b>PROPAPFENONE (RHYTHMOL) (RISMOL)</b> (QUEST 6278) Methodology: LC/MS/MS Set up: Tues, Thurs Report available: 6 days  CPT Code: 80299	Accompanies report	1.0 mL serum (R) Draw 2 - 6 hours post oral dose <b>SS tube unacceptable</b> Minimum: 0.5 mL

QUEST 35267X Univ. Req.	Universal Requisition	<b>PROPOXYPHENE, QUANTITATIVE (DARVON)</b> Includes Propoxyphene, Norpropoxyphene, and Combined Total Methodology: GC/MS Set up: Tues-Sat Report available: 3 days  CPT Code: 80367	Accompanies report	4.0 mL serum (R)  Minimum: 3.0 mL
QUEST 18997 Univ. Req.	Universal Requisition	<b>PROPOXYPHENE PRESUMPTIVE SCREEN</b> Methodology: Immunoassay Detection limit: 300 ng/mL Set up: Daily Report available: Next day  CPT Code: G0479	Accompanies report	30 mL random urine  Minimum: 10 mL
LAB PSA DIAG	PSA DIAGNOSTIC	<b>PROSTATE SPECIFIC ANTIGEN (PSA) DIAGNOSTIC</b> (use for <a href="#">diagnostic diagnosis codes</a> ) Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84153	Accompanies report	1 mL serum (SS) (Stable 24 hrs refrigerated or frozen)
LAB PSA SCR	PSA SCREEN	<b>PROSTATE SPECIFIC ANTIGEN (PSA) SCREEN</b> (use for <a href="#">screening diagnosis codes</a> ) Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84153	Accompanies report	1 mL serum (SS) (Stable 24 hrs refrigerated or frozen)
LAB PSA FR+TOT	PSA FREE AND TOTAL	<b>PROSTATE SPECIFIC ANTIGEN TOTAL AND FREE</b> Includes Total PSA, Free PSA, % Free PSA (calculated) (QUEST 31348) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 84153, 84154	Accompanies report	2 mL serum (SS) <b>FREEZE</b>  Minimum: 0.6 mL
LAB PSA POST-PROST	PSA POST-PROSTATECTOMY	<b>PROSTATE SPECIFIC ANTIGEN (PSA) POST-PROSTATECTOMY (ULTRASENSITIVE PSA)</b> (QUEST 69702) Methodology: ICMA Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 84153	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>PROSTATIC ACID PHOSPHATASE - See Acid Phosphatase, Prostatic</b>		
LAB PROT C	PROTIEN C ANTIGEN	<b>PROTEIN C ANTIGEN</b> (QUEST 19673) See also Protein S (Total and Free). Please submit a separate vial for each special coagulation assay ordered. Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 85302	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) (3.2% Na-citrate only)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE immediately in a -70C freezer.</b>
LAB PROTCACT	PROTEIN C ACTIVITY	<b>PROTEIN C ACTIVITY (FUNCTIONAL)</b> (QUEST 1777) Please submit a separate vial for each coagulation assay ordered. Methodology: Clotting assay Set up: Mon - Fri Report available: Next day  CPT Code: 85303	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE immediately in a -70C freezer.</b>
LAB UPROTCREA	URINE PROTEIN CREATININE RATIO	<b>PROTEIN CREATININE RATIO</b> Includes urine protein and urine creatinine Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84156, 82570	See individual components	5 mL random urine

LAB APC RESISTANCE	ACTIVATED PROTEIN C RESISTANCE	<b>PROTEIN C RESISTANCE, ACTIVATED (APC RESISTANCE)</b> (QUEST 58653) Methodology: RVVT Clot Based Assay Set up: Mon - Sat Report available: Next day  CPT Code: 85307	Accompanies report	2 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw LB tube and centrifuge within 60 minutes of collection at 3000 rpm for 15 minutes. 2) Remove plasma to a plastic tube using a plastic pipette, taking care to avoid platelet buffy layer.. 3) Centrifuge a 2nd time and transfer platelet-poor plasma into a new plastic vial. 4) <b>FREEZE immediately in a -70C freezer and ship on dry ice.</b>  Minimum: 1 mL
QUEST 749X Univ. Req.	Universal Requisition	<b>PROTEIN ELECTROPHORESIS, CEREBROSPINAL FLUID</b> Includes Total Protein, Protein Electrophoresis Methodology: Varies Set up: Mon - Sat Report available: 2 days  CPT Code: 84157, 84166	Accompanies report	6 mL CSF Minimum: 3 mL
		<b>Protein Electrophoresis</b> <b>TEST NO LONGER DONE AT CPAL.</b> <b>RECOMMEND SPEP SERUM QUEST 747.</b>		
		<b>Protein Electrophoresis, SERUM, PROGRESSIVE</b> <b>TEST NO LONGER DONE AT CPAL.</b> <b>RECOMMEND EP MSPIKE QUEST 131682</b>		
LAB SPEP SERUM	PROTEIN ELECTROPHORESIS SERUM	<b>PROTEIN ELECTROPHORESIS, SERUM</b> (QUEST 747) Includes Total protein and protein electrophoresis Methodology: Electrophoresis / SP Set up: Mon – Sat Report available: Next Day  CPT Code: 84155, 84165	Accompanies report	2mL serum (R ) or (SS) <b>Overnight fasting is preferred</b> Gross hemolysis is unacceptable. Minimum: 1 Ml
LAB EP MSPIKE	PROTEIN ELECTRO SERUM PROG	<b>PROTEIN ELECTROPHORESIS with M SPIKE PANEL, PROGRESSIVE</b> (QUEST 131682) When M Spike is detected on the Protein Electrophoresis, test reflexes to Immunofixation at an additional charge. Methodology Electrophoresis Set up: Mon - Sat Report available: Next Day  CPT Code: 84155, 84165	Accompanies report	2mL serum (R) Fasting specimen is required.  Minimum: 1 mL
		<b>Protein Electrophoresis, URINE</b> <b>TEST NO LONGER DONE AT CPAL.</b> <b>RECOMMEND UPEP RAN (QUEST 8525)</b>		
LAB UPEP RAN	PROTEIN ELECTROPHORESIS URINE	<b>PROTEIN TOTAL AND PROTEIN ELECTROPHORESIS, URINE</b> (QUEST 8525) Total protein with quantitation of protein, creatinine, and protein/creatinine ratio; and Protein Electrophoresis with quantitation of immunoglobulins G, A, M. Includes M-Spike quantitation. Methodology: Electrophoresis / SP Set up: Mon – Sat Report available: Next Day  CPT Code: 82570, 84156, 84166	Accompanies report	25 mL unpreserved, first catch, morning urine (Note: Random, unpreserved urines are acceptable)  Minimum: 15 mL

		<b>Protein Electrophoresis Urine Progressive</b> TEST NO LONGER DONE AT CPAL. RECOMMEND UPEP M SPK (QUEST 133577)		
LAB UPEP M SPK	PROTEIN ELECTRO URINE PROG	<b>PROTEIN ELECTROPHORESIS with M SPIKE, PROGRESSIVE, RANDOM URINE</b> (QUEST 133577) Total protein, protein electrophoresis, quantitation of immunoglobulins G, A, M, and urine immunofixation. Includes M-Spike quantitation. Immunofixation will be performed, if indicated, at an additional charge. Methodology Electrophoresis Set up: Mon – Sat Report available: Next Day CPT Code: 82570, 84156, 84166	Accompanies report	10 mL unpreserved random urine Minimum: 5 mL
LAB BFPROT	PROTEIN BODY FLUID	<b>TOTAL PROTEIN, BODY FLUID</b> Performed at York Hospital Methodology: Colorimetric Set up: Daily Report available: Next day CPT Code: 84157		2 mL fluid, no preservative
		<b>PROTEIN, QUALITATIVE, URINE - See Urinalysis, Routine</b>		
LAB PROT S ACT	PROTEIN S ACTIVITY	<b>PROTEIN S ACTIVITY (FUNCTIONAL)</b> (QUEST 1779) Methodology: Clotting assay Set up: Mon - Fri Report available: 3 days CPT Code: 85306	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB) (3.2 % Na-citrate only) 1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>FREEZE immediately in a -70C freezer.</b>
LAB PROT S AG FREE	PROTEIN S ANTIGEN FREE	<b>PROTEIN S ANTIGEN, FREE</b> (QUEST 10170) Methodology: Immunoturbidimetric Set up: Mon - Fri Report available: Next day CPT Code: 85306	Accompanies report	1 mL citrated platelet-poor plasma (LB), 3.2% sodium citrate, <b>FREEZE</b> Draw blood in light blue-top tube containing 3.2% sodium citrate, and mix gently by inverting 3-4 times. Centrifuge 15 minutes at 1500 x g within 1 hour of collection. Using a plastic pipette, remove plasma taking care to avoid the WBC/platelet buffy layer and place into a plastic vial. Centrifuge a second time transfer platelet-poor plasma into a new plastic vial(s). Freeze immediately and transport on dry ice. Minimum: 0.5 mL
LAB PROT S	PROTEIN S TOTAL AND FREE	<b>PROTEIN S, TOTAL and FREE</b> (QUEST 36457) Please submit a separate vial for each special coagulation assay ordered. Methodology: Immunoturbidimetric Set up: Mon - Fri Report available: Next day CPT Code: 85305, 85306	Accompanies report	2 mL platelet-poor plasma (LB), 3.2% sodium citrate), <b>FREEZE</b> Platelet-poor plasma: Centrifuge light blue-top tube 15 minutes at approximately 1500 x g within 60 minutes of collection. Using a plastic pipette, remove plasma, taking care to avoid the WBC/platelet buffy layer and place into a plastic vial. Centrifuge a second time and transfer platelet-poor plasma into a new plastic vial. Plasma must be free of platelets (< 10,000/mcl). Freeze immediately and ship on dry ice. Minimum: 1 mL
		<b>PROTEIN, TOTAL CSF - See Cerebrospinal Fluid, Total Protein</b>		
LAB TP	TOTAL PROTEIN / TP	<b>PROTEIN, TOTAL, SERUM</b> Methodology: Colorimetric Set up: Daily Report available: Same day CPT Code: 84155	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Minimum: 0.5 mL

LAB UTP24	URINE TOTAL PROTEIN 24 HOUR	<b>PROTEIN, TOTAL, 24HR URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84156	Accompanies report	100 mL aliquot of 24-hr urine or random urine sample, collected without preservatives and refrigerated. Specify 24-hr total volume on the request form.  Minimum: 2 mL
LAB UTP	URINE TOTAL PROTEIN RANDOM	<b>PROTEIN, TOTAL, RANDOM URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84156	Accompanies report	5 mL urine
		<b>PROTHROMBIN GENE ANALYSIS - See Factor II Mutation</b>		
LAB PROTIME	PROTIME	<b>PROTHROMBIN TIME (PT), WITH INR</b> Methodology: Optical Clot Detection Set up: Daily Report available: Same day  CPT Code: 85610	Protome: 10.9 - 12.8 sec.  INR: 2.0 - 3.0 for most medical and surgical thromboembolic states 2.0 - 3.0 for recurrent embolism 2.5 - 3.5 for mechanical heart valves 3.0 - 3.5 for lupus anticoagulant	2.7 mL blood (LB); Stable for 24 hours or 1 mL <b>FROZEN</b> citrated plasma, if not submitted in 24 hours.  Draw blood into a light blue top tube, filling tube to complete volume. Invert gently 3 - 4 times. If patient is a difficult stick or specimen is collected using a butterfly, draw a plain red top tube & discard or use for other testing.  Refrigerate until pickup; specimen must be tested within 24 hours of collection.
		<b>PROTOPORPHYRIN, ZINC - See Zinc Porphyrin (ZPP)</b>		
		<b>PROTOPORPHYRINS, ERYTHROCYTE - See Zinc Porphyrin (ZPP)</b>		
		<b>PSA II - See Prostate Specific Antigen, Free &amp; Total</b>		
		<b>PSEUDOCHELINESTERASE - See Cholinesterase, Serum or Plasma</b>		
		<b>PSITTACOSIS - See Chlamydia IgG</b>		
		<b>PTH - See Parathyroid Hormone</b>		
LAB PYRUVIC	PYRUVIC ACID	<b>PYRUVIC ACID (PYRUVATE)</b> (QUEST 50411) Methodology: Enzymatic Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 84210	Accompanies report	4.0 mL blood (L) Draw and immediately mixed with 4.0 mL ice cold 7% or 8% perchloric acid. Let mixture stand for 10 min and centrifuge. Separate and submit supernatant fluid for assay. Please specify volumes of blood and perchloric acid used.  Minimum: 2 mL mixed with 2 mL perchloric acid
		<b>QUAALUDE - See Methaqualone</b>		
LAB QUAD SCREEN	QUAD SCREEN	<b>QUAD SCREEN</b> (QUEST 30294) Includes AFP, unconjugated Estriol, hCG, Dimeric Inhibin A and Maternal Risk Interpretation Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 82105, 84702, 82677, 86336	Accompanies report	2.5 mL serum (SS) Patient must be between 16 - 20 weeks gestation <b>Gross</b> <b>hemolysis or gross lipemia unacceptable.</b> See Alpha-Fetoprotein Triple Screen for additional information

LAB QFTB	QUANTIFERON TB GOLD	<b>QUANTIFERON TB GOLD</b> (CPAL 3520000) Methodology: (EIA) Enzyme Immunoassay Set up: Mon - Fri  CPT Code: 86480	Accompanies report	<b>SPECIAL COLLECTION TUBES</b> Collect in 3 separate collection tubes. All 3 tubes must be received for complete testing. Specimens need to be received in original collection tubes with 1 mL of whole blood in each. Shake specimen and incubate for 16-24 hours in a 37 C incubator. Incubation must begin within 16 hours of collection. After 24 hours, place at room temperature.  <b>DO NOT REFRIGERATE OR SPIN</b>
LAB QUIN	QUINIDINE	<b>QUINIDINE (CARDIOQUIN) (QUINIDEX)</b> (QUEST 766) Methodology: IA Set up: Mon-Sat Report available: Next day  CPT Code: 80194	Accompanies report	1 mL serum (R) Collect just before next dose. <b>SS</b> <b>tubes unacceptable</b>  Minimum: 0.2 mL
LAB RA GRP	RA GROUP	<b>RA GROUP</b> Includes Anti-CCP and RF Quant. (CPAL 3000314) Methodology: EIA & Nephelometry Set up: Wed and Sat Report available: Next day  CPT Code: 86200, 80194	Accompanies report	1mL serum (SS) <b>FREEZE</b>
		<b>RA LATEX - See Rheumatoid Factor (RF)</b>		
QUEST 18232 UNIV. Req.	Universal Requisition	<b>RABIES VACCINE RESPONSE</b> Referral test for Quest Methodology: RFFIT Set up: Mon, Thurs Report available: 30 days  CPT Code: 86382	Accompanies report	2 mL serum ( R) Minimum: 1mL
QUEST 901418 Univ. Req.	Universal Requisition	<b>RAJI CELL IMMUNE COMPLEX ASSAY</b> Methodology: Quant Flow Cytometry Set up: Tues Report available: 11 days  CPT Code: 86332	Accompanies report	3 mL serum ( R) <b>FROZEN</b> <sup>Let</sup> stand for 2 hrs, then separate serum from cells within 1 hr and freeze immediately. Separate specimens must be submitted when multiple tests are ordered. Minimum: 0.5 mL
LAB RAPAMYCIN	RAPAMYCIN / SIROLIMUS	<b>RAPAMYCIN (SIROLIMUS)</b> (QUEST 36712) Methodology: LC/MS/MS Set up: Mon - Sat Report available: Next day  CPT Code: 80195	Accompanies report	2 mL EDTA whole blood (L) Collect specimen 1 hr prior to next dose. Minimum: 1 mL
		<b>RAST - See Allergy Testing</b>		
		<b>RED BLOOD CELL FOLATE - See Folic Acid, Red Blood Cell</b>		
		<b>RED CELL ANTIBODY IDENTIFICATION - See Antibody Identification, Red Cell</b>		
LAB RBC FRAG INC	RBC OSMOTIC FRAGILITY	<b>RBC FRAGILITY, INCUBATED</b> (QUEST 139731) Methodology: Colorimetric / Kinetic Set up: Daily Report available: 3 days  CPT Code: 85557	Accompanies report	5 mL blood (Green Na-Hep no separator) <b>DO NOT OPEN TUBE- MUST BE STERILE.</b>  <b>MUST BE RECEIVED AT LAB BY 1200 PM MONDAY THROUGH WEDNESDAY.</b>  Minimum: 5 mL
LAB RED SUB	REDUCING SUBSTANCES STOOL	<b>REDUCING SUBSTANCES, FECAL</b> (QUEST 91018) Methodology: Benedicts Solution Set up: Mon - Fri Report available: Next day  CPT Code: 84376	Accompanies report	10 mL random stool <b>FROZEN</b> Minimum: 3 g
LAB UCLIN	URINE REDUCING SUBSTANCES	<b>REDUCING SUBSTANCES, URINE</b> Methodology: Clinitest tablet Set up: Daily Report available: Same day  CPT Code: 81002	Negative	5 mL urine

LAB ONLY RENAL PAN (Order group)	check order sets	<b>RENAL FUNCTION PANEL</b> BASIC/BMP (Basic Metabolic Panel) PHOS (Phosphorus) ALB (Albumin) This order group corresponds to the Renal Function Panel ordered by WellSpan Family Practice-Manheim and other WellSpan facilities CPT Code: 80069		5 mL serum (SS)  Minimum: 5 mL
LAB RENIN	RENIN ACTIVITY PLASMA	<b>RENIN, DIRECT</b> (QUEST 16846) Methodology: LC/MS/MS Set up: Sun - Fri Report available: 4 days  CPT Code: 84244	Accompanies report	0.8 mL EDTA plasma (L) <b>FROZEN</b> <b>Do not refrigerate the sample</b> Minimum: 0.5 mL
QUEST 37700X Univ. Req.	Universal Requisition	<b>REPTILASE CLOTTING TIME</b> Methodology: Clot Based Assay Set up: Mon Report available: Next day  CPT Code: 85635	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze</b> immediately in a -70C freezer.
LAB RSV	RESPIRATORY SYNCYTIAL VIRUS / RSV	<b>RESPIRATORY SYNCYTIAL VIRUS (RSV) RAPID ASSAY</b> Methodology: EIA Set up: As received Report available: Same day  CPT Code: 87420	Negative	<b>IMPORTANT: Testing approved for patients less than 5 years of age only.</b> <b>Please refer to RSV RT-PCR for patients age 5 years or greater.</b>  Nasopharyngeal wash or aspirate
LAB RSV DIF	RSV DIRECT IF ASSAY	<b>RESPIRATORY SYNCYTIAL VIRUS (RSV) DIRECT IF TEST</b> (QUEST 5291) Methodology: DFA Set up: Mon - Fri Report available: 2 days  CPT Code: 87280	Accompanies report	3 mL nasal wash or aspirate in sterile, container 9/9/13; Bronchial washings and lavages are now acceptable  Minimum: 1 mL
LAB RSV PCR	RSV REAL TIME PCR	<b>RESPIRATORY SYNCYTIAL VIRUS (RSV) RNA, RT-PCR</b> (QUEST 16047) Reference Send Out Test for Quest Methodology: Real-Time PCR Set up: Mon - Sat Report available: 1-3 days  CPT Code: 87798	Accompanies report	Nasopharyngeal wash/aspirate in VCM Transport Medium. Minimum: 1 mL Or Nasopharyngeal swab - dacron polyester or rayon tipped in VCM Transport Medium. NO calcium alginate swabs.
LAB RSV - QUEST	Only available for order by Lab- order RESPIRATORY SYNCYTIAL VIRUS	<b>RESPIRATORY SYNCYTIAL VIRUS (RSV) IMMUNOASSAY</b> (QUEST 271373) Methodology: Immunochromatography Set up: Daily Report available: Next day  CPT Code: 87807	Accompanies report	Nasopharyngeal wash/aspirate in VCM Transport Medium. Minimum: 1 mL Or Nasopharyngeal swab - dacron polyester or rayon tipped in VCM Transport Medium. NO calcium alginate swabs.  <b>FROZEN</b>
LAB RESPIRATORY VIRUS PANEL by PCR to YORK HOSPITAL	Universal Requisition	<b>RESPIRATORY VIRUS PANEL, PCR</b> (performed by Wellspan at York Hospital) Panel includes Adenovirus, Coronavirus, Influenza A, Influenza B, Metapneumovirus, Parainfluenza, Rhinovirus/Enterovirus, Respiratory Syncytial Virus (RSV), Bordetella pertussis, Chlamydomphila pneumoniae, Mycoplasma pneumoniae Methodology: Real-Time PCR Set up: Daily Report available: 1 day  CPT Code: 87633	Accompanies report	Source: Nasopharyngeal A dry sterile synthetic flock NP swab in Viral Transport Media (VTM). (See RESP VIRUS PCR for non-flock NP swab sources)
LAB RESP VIRUS PCR	RESPIRATORY VIRUS PANEL PCR	<b>RESPIRATORY VIRUS PANEL PCR</b> (QUEST 91233) Panel includes Influenza A&B, RSV, Adenovirus, Rhinovirus, Human Metapneumovirus, and Parainfluenza Methodology: Real-time PCR Set up: Daily Report available: 3-5 days CPT code: 87632	Accompanies report	Minimum 1mL sputum, or bronchial lavage/wash, or nasopharyngeal aspirate/wash, or tracheal lavage/wash submitted in sterile, leakproof container.

LAB RETIC IGG-IGA	RETICULIN IGG IGA SCREEN	RETICULIN IGG and IGA SCREEN WITH REFLEX TO TITER (QUEST 8962) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 86255(X2) [If screen(s) is positive, the antibody titer(s) will be added at an additional charge(s) (CPT 86256)]	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB RETIC IGA SCR	RETICULIN IGA SCREEN	RETICULIN IGA SCREEN WITH REFLEX TO TITER (QUEST 37520) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 86255 [If screen is positive, a titer will be performed at an additional charge (CPT code: 86256)]	Accompanies report	0.5 mL serum (SS)  Minimum: 0.1 mL
LAB RETIC IGG SCR	RETICULIN IGG SCREEN	RETICULIN IGG SCREEN WITH REFLEX TO TITER (QUEST 16530) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 86255 [If screen is positive, a titer will be performed at an additional charge (CPT code: 86256)]	Accompanies report	0.5 mL serum (SS)  Minimum: 0.1 mL
LAB RETICAUTO	RETICULOCYTE COUNT	RETICULOCYTE COUNT (RETIC GROUP AUTOMATED) Test includes Retic%, Retic#, Immature Retic Fraction(IRF), Reticulocyte Hemoglobin Equivalent (RET-HE)  Methodology: automated:flow cytometry Set up: Daily Report available: same day  CPT Code: 85046	<1 day: 1.8 - 4.6 % 1 day - < 4 days: 0.7 - 2.9 % 4 days: 1.0 - 1.4 % 5 days: 0.4 - 0.8 % 6 days - 1 month 5 days: 0.1 - 1.7 % 1 month 7 days - 2 months 23 days: 0.4 - 1.0 % >2 months 23 days: 0.5 - 1.5 %	1 mL blood (L)  Minimum: 0.5 mL
LAB RF	RHEUMATOID FACTOR / RA QUANT / RA	RHEUMATOID FACTOR (CPAL 3000168) Methodology: Latex agglutination Set up: Mon - Sat Report available: Next day  CPT Code: 86431	Negative	1 mL serum (SS)  Minimum: 1 mL
		RHEUMATOID PROFILE - order RF, ANA SCR, CBC, SED RATE, ASO (SERUM)		
BBK ANTE RHIG	RHOGAM INVESTIGATION - ANTENATAL	RHIG INVESTIGATION, ANTENATAL Used to determine eligibility for Rh Immune Globulin injection. Used for miscarriages less than 20 weeks gestation. Includes ABO Blood Group, Rh Type, Antibody Screen  CPT Code: 86900, 86901, 86850		6.0 mL whole blood (Pink)
BBK POST RHIG	LAB ONLY	RHIG INVESTIGATION, POSTPARTUM Used to determine eligibility for Rh Immune Globulin injection. Includes ABO Blood Group, Rh Type, Antibody Screen, Fetal Cell Screen if indicated.  CPT Code: 86900, 86901, 86850, 85461		6.0 mL whole blood (Pink)  Patient and specimen must be assigned a unique Blood Bank identification number.
LAB RIBOSOMAL P	RIBOSOMAL P AB	RIBOSOMAL P ANTIBODY (QUEST 35432) Methodology: Immunoassay Set up: Mon - Sat Report available: Next day  CPT Code: 83516	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL

LAB RICK AB PAN	RICKETTSIAL AB PANEL	<b>RICKETTSIAL AGENTS ANTIBODY PANEL</b> (QUEST 37478) Includes assays for antibodies against a spotted fever group antigen (IFA), typhus fever group antigen (IFA), and Q-fever phase I and phase II antigens (CF). Methodology: Varies Set up: Varies with assay Report available: 7 days  CPT Code: 86638(X4), 86757(X4)	Accompanies report	2.0 mL serum (SS)  Minimum: 0.9 mL
LAB RISTOCETIN	RISTOCETIN COFACTOR	<b>RISTOCETIN COFACTOR</b> (QUEST 34173) Methodology: Platelet agglutination Set up: Mon - Fri Report available: Next day  CPT Code: 85245	Accompanies report	Minimum: 1 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. Freeze immediately in a -70C freezer.
		<b>RNP AND Sm ANTIBODIES - See Anti-ENA</b>		
		<b>Ro, La ANTIBODIES - See Sjögren's Syndrome Antibodies</b>		
		<b>ROCHALIMAEA-HENSELAE ANTIBODIES - See BARTONELLA</b>		
LAB RICKETTSIA PAN	RICKETTSIA PANEL WITH TITER	<b>RICKETTSIA ANTIBODY PANEL WITH REFLEX TO TITERS</b> Includes Rocky Mountain Spotted Fever and Typhus IgG and IgM and titers if indicated (additional charge) (QUEST 37507) Methodology: IFA Set up: Mon - Fri Report available: Next day  CPT Code: 86757(X4)	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
LAB RMSF ABS	RICKETTSIA RMSF IGG IGM AB	<b>RICKETTSIA / ROCKY MOUNTAIN SPOTTED FEVER ABS WITH REFLEX TO TITERS</b> Includes RMSF IgG and IgM and titer if indicated (additional charge) (QUEST 6419) Methodology: IFA Set up: Mon - Fri Report available: 2 days  CPT Code: 86757x2	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
LAB TYPHUS ABS	RICKETTSIA TYPHUS IGG IGM AB	<b>RICKETTSIA / TYPHUS FEVER ABS WITH REFLEX TO TITERS</b> Includes Typhus IgG and IgM and titer if indicated (additional charge) (QUEST 37503) Methodology: IFA Set up: Mon - Fri Report available: 2 days  CPT Code: 86757(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
LAB ROTAVIRUS	ROTAVIRUS	<b>ROTAVIRUS</b> Methodology: EIA Set up: Daily Report available: Same day  CPT Code: 87425	Negative	Stool (1 gram) in a sterile container; do not submit specimen in VCT. Refrigerate.
QUEST 706X Univ. Req.	Universal Requisition	<b>ROTAVIRUS ANTIGEN DETECTION</b> Methodology: EIA Set up: Mon, Wed, Fri Report available: 2 days  CPT Code: 87425	Accompanies report	5 mL stool in a sterile container, <b>FROZEN</b>  Minimum: 1 mL
LAB RPR	RAPID PLASMIN REAGENT / RPR	<b>RPR</b> (CPAL 3000100) Positive screen will have RPR Quantitative performed at additional charge. Methodology: Flocculation Set up: Mon - Sat Report available: Next day  CPT Code: 86592	Nonreactive	1 mL serum (SS)  Minimum: 0.5 mL
		<b>RSV - See Respiratory Syncytial Virus</b>		

LAB RUBELLA	RUBELLA IGG AB	<b>RUBELLA VIRUS IgG ANTIBODIES</b> (CPAL 3000284) Methodology: MEIA Set up: Mon - Sat Report available: Next day  CPT Code: 86762	Positive	1 mL serum (SS) Minimum: 0.5 mL
LAB RUBELLA IGM	RUBELLA IGM AB	<b>RUBELLA VIRUS IgM ANTIBODIES</b> (QUEST 13342) Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 86762	Accompanies report	1 mL serum (SS) Minimum: 0.6 mL
LAB RUBEOLA	RUBEOLA IGG AB	<b>RUBEOLA VIRUS IgG ANTIBODIES</b> (CPAL 3001190) Methodology: EIA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86765	Positive	1 mL serum (SS)
LAB RUBEOLA IGM	RUBEOLA IGM AB / MEASLES IGM	<b>RUBEOLA VIRUS IgM ANTIBODIES (MEASLES IGM)</b> (QUEST 34256) Methodology: IFA Set up: Tues, Thurs Report available: Next day  CPT Code: 86765	Accompanies report	1 mL serum (SS) Minimum: 0.2 mL
LAB RUSS VIPER	RUSSEL VIPER VENOM TIME	<b>RUSSELL VIPER VENOM TIME (Drvvt)</b> (QUEST 33693) Methodology: Clotting assay Set up: Mon - Sat Report available: Next day  CPT Code: 85613	Accompanies report	Minimum: 2 mL <b>FROZEN</b> citrated plasma (LB)  1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze immediately in a -70C freezer.</b>
LAB SALIC	SALICYLATE / ASPIRIN	<b>SALICYLATES (ASPIRIN)</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80329	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)
LAB SANASAL	SA NASAL COMPLETE	<b>STAPH AUREUS NASAL COMPLETE</b> Methodology: Molecular DNA Set up: Daily Report available: 1 day  CPT Code: 87640, 87641	Not Detected	<b>Nasal swab only.</b>  <b>Double Culturette (red top) with Stuarts Media.</b>  <b>NICU ONLY: 2 Mini-tip swabs with Stuarts media.</b>
QUEST 10582X Univ. Req.	Universal Requisition	<b>SALMONELLA TOTAL ANTIBODY</b> Includes Salmonella H Type A, Salmonella H Type B, Salmonella H Type D, Samonella O Type D, Salmonella O Type Vi Methodology: EIA Set up: Mon - Fri Report available: 3 days  CPT Code: 86768(X5)	Negative	0.5 mL serum (SS)
QUEST 34306X Univ. Req.	Universal Requisition	<b>SCHISTOSOMIASIS ANTIBODY (IgG)</b> Methodology: FMI Set up: Wed, Sat Report available: 5 days  CPT Code: 86682	Accompanies report	1 mL serum (SS)
LAB ANTI-SCLER	ANTI SCLERODERMA AB / SCL 70	<b>SCLERODERMA (Sci-70) ANTIBODIES</b> (CPAL 3000826) Methodology: Fluoroenzyme Immunoassay Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86235	Accompanies report	0.5 mL serum (SS) <b>FROZEN</b> Minimum: 0.2 MI
QUEST 817X Univ. Req.	Universal Requisition	<b>SECOBARBITAL</b> Methodology: GC/MS Set up: Tues-Sat Report available: 3 days  CPT Code: 80345	Accompanies report	3.0 mL serum (DB or R) <b>SS tubes unacceptable</b> Minimum: 1.0 mL

LAB ESR	ERYTHROCYTE SEDIMENTATION RATE	<b>SEDIMENTATION RATE (ESR)</b> Methodology: Westergren (manual) Set up: Daily Report available: Same day  CPT Code: 85652	Male: Under 50 yr: 0-15 mm/hr Over 50 yr: 0-20 mm/hr Female: Under 50 yr: 0-20 mm/hr Over 50 yr: 0-30 mm/hr	4 mL blood (L). Specimen must be received within 12 hours of collection.  Minimum: 2 mL
LAB SELENIUM	SELENIUM	<b>SELENIUM</b> (QUEST 5507) Methodology: Atomic Spectroscopy Set up: Tues, Fri Report available: 2 days  CPT Code: 84255	Accompanies report	2.0 mL serum (DB) <b>FROZEN</b> Centrifuge serum or plasma specimen within 1 hour of collection. Immediately separate serum or plasma from the cells into special trace element collection vial
LAB SEM ANAL	SEMEN ANALYSIS	<b>SEMEN ANALYSIS</b> Methodology: Microscopic exam Set up: Mon - Fri 0800 am - 1100 am Report available: 2 days  CPT Code: 89320	Accompanies report	Specimen should be delivered within 1 hour of collection. Call for appointment. Physician offices are provided with instruction sheet.  Minimum: 1 mL
LAB SEMPOST	SEMEN POST VAS	<b>SEMEN SPERM COUNT POST- VASECTOMY</b> <b>NOTE: If checking for motility, a semen analysis must be scheduled and ordered.</b> Methodology: Microscopic exam, direct and concentrated (if indicated) Set up: Daily Report available: 1 - 2 days  CPT Code: 89310	Accompanies report	Specimen must be received within 14 hours of collection. Collect in a clean, dry container.
		<b>SEMEN CULTURE - See Culture Fluid</b>		
QUEST 900271 Univ. Req.	Universal Requisition	<b>SEMINAL FRUCTOSE</b> Methodology: Colorimetric Set up: Tues Report available: Next day  CPT Code: 84376	Accompanies report	1 mL fresh semen, <b>FROZEN</b>  Minimum: 0.5 mL
QUEST 35299 Univ. Req.	Universal Requisition	<b>SERAX - See Oxazepam</b> <b>SEROQUEL (QUETIAPINE)</b> Methodology: LC/MS/MS Set up: Mon, Wed, Fri Report available: 2 days  CPT Code: 80299	Accompanies report	1 mL serum (R ) Collect as trough prior to next dose. Collect serum and remove from cells. <b>SS tubes unacceptable</b> Minimum: 0.4 mL
LAB SEROTONIN BL	SEROTONIN BLOOD	<b>SEROTONIN, BLOOD</b> (QUEST 9651) Methodology: HPLC / Fluorescence Detection Set up: Mon - Fri Report available: 2 days  CPT Code: 84260	Accompanies report	Minimum: Draw one 5 mL lavender tube and transfer immediately to a plastic bottle containing 35 mg ascorbic acid (supplied by lab); Mix, <b>freeze</b> , and send <b>FROZEN</b>
LAB SEROTONIN REL	SEROTONIN RELEASE ASSAY	<b>SEROTONIN RELEASE ASSAY (SRA), UFH</b> (QUEST 14627) Methodology: Radiobinding 14C Serotonin Radiolabel Set up: Mon - Fri Report available: Next day  CPT Code: 86022	Accompanies report	1 mL serum <b>FROZEN</b> Minimum: 0.4 mL
QUEST 8871Z Univ. Req.	Universal Requisition	<b>SERTRALINE AND DESMETHYLSERTRALINE</b> Referral test for Quest Methodology: GC Set up: Tues, Fri Report available: 3 days  CPT Code: 83789	Accompanies report	1.0 mL serum (R ) <b>FROZEN</b> <b>SST tubes not acceptable.</b>  Minimum: 0.4 mL
		<b>SERUM VISCOSITY - See Viscosity, Serum</b>		
LAB SHBG	SEX HORMONE BINDING GLOBULIN	<b>SEX HORMONE BINDING GLOBULIN (SHBG)</b> (QUEST 30740) Methodology: IA Set up: Mon - Fri Report available: Next day  CPT Code: 84270	Accompanies report	0.7 mL serum (SS)  Minimum: 0.5 mL
		<b>SGOT - See Aspartate Transaminase</b>		
		<b>SGPT - See Alanine Transaminase</b>		

LAB SHELLFISH	SHELLFISH ALLERGY PANEL	<b>SHELLFISH ALLERGY PANEL #1</b> (QUEST 113482) Includes Blue mussel, Clam, Crab, Lobster, Shrimp, and Oyster Methodology: IA Set up: Mon - Fri morning Report available: 4 days  CPT Code: 86003(X6)	Accompanies report	1.2 mL serum (SS)  Minimum: 0.6 mL
		<b>SHINGLES CULTURE - See Herpes Simplex Virus Culture and Varicella Zoster Virus Culture</b>		
LAB SICKLE	SICKLE CELL SCREEN	<b>SICKLE SOLUBILITY TEST</b> (QUEST 3231) Methodology: Solubility Set up: Mon - Fri Report available: Next day  CPT Code: 85660	Accompanies report	5 mL whole blood (L)  Minimum: 0.5 mL
		<b>SINEQUAN - See Doxepin</b>		
		<b>SIROLIMUS - See Rapamycin</b>		
LAB SSASSB	SJOGRENS SYNDROME AB	<b>SJÖGREN'S SYNDROME ANTIBODIES SS-A(Ro), SS-B(La)</b> (CPAL 3000820) Methodology: Ouchterlony Gel Set up: Wed, Sat Report available: 2 days  CPT Code: 86235(X4)	Accompanies report	1 mL serum (SS)
QUEST 37097 Univ. Req.	Universal Requisition	<b>SKIN ANTIBODIES</b> Includes Intercellular and Basement Antibody Screens with reflex to titers Methodology: IFA Set up: Wed, Fri Report available: 8 days  CPT Code: 86255(X2)	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>SLE - See Lupus</b>		
		<b>Sm and RNP ANTIBODIES - See Anti- ENA</b>		
LAB NA	SODIUM	<b>SODIUM</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 84295	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB UNA	URINE SODIUM RANDOM	<b>SODIUM, URINE, RANDOM</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 84300	No reference ranges available for random urine specimens	20 mL random urine  Minimum: 5 mL
LAB UNA24	URINE SODIUM 24 HR	<b>SODIUM, URINE, 24 HR</b> Methodology: ISE Set up: Daily Report available: Same day  CPT Code: 84300	Accompanies report	0.5 mL aliquot of 24-hr urine collected without preservative  Minimum: 0.2 mL
		<b>SOMATOMEDIN - C - See Insulin-Like Growth Factor -1 (IGF-1)</b>		
		<b>SPECIAL K DRUG TEST - See Ketamine and Metabolites</b>		
		<b>SPEP - See Protein Electrophoresis</b>		
		<b>SPERM ANTIBODY - See Anti-Sperm Antibody</b>		
		<b>SPINAL FLUID, IgG - See Cerebrospinal Fluid, IgG</b>		
		<b>SPINAL FLUID IgG SYNTHESIS - See Cerebrospinal Fluid, IgG Synthesis Rate</b>		
		<b>SPINAL FLUID PROTEIN ELECTROPHORESIS - See Protein Electrophoresis, Cerebrospinal Fluid</b>		
		<b>SPIRONOLACTONE AND METABOLITE, SERUM/PLASMA</b>  Test no longer available effective 7/14/14. There are no recommended alternatives.		
		<b>SPOTTED FEVER ANTIBODIES - See Rocky Mountain Spotted Fever Antibodies, Typhus Fever Antibodies</b>		
		<b>SPRUE SCREEN - See Anti-Endomysial and Anti-Gliadin/Gluten</b>		
		<b>SRP AUTOANTIBODIES - See Polymyocitis Antibody</b>		

		<b>SSA (Urine) - See Sulfa Salicylate Acid</b>		
		<b>SS-A, SS-B Antibodies - See Sjögren's Syndrome Antibodies</b>		
		<b>SSYCE - Order C STOOL and YERSINIA (Stands for Salmonella, Shigella, Campylobacter, E. coli, and Yersinia)</b>		
		<b>STAPHYLOCOCCAL ANTIBODIES - See Teichoic Acid Antibodies</b>		
LAB CTNGCER	STD PROBE CERVICAL	<b>STD (PCR) CERVICAL PROBE PANEL (CPAL 3009020)</b> For Chlamydia trachomatis and Neisseria gonorrhoeae Methodology: PCR Probe Set up: Mon - Fri Report available: 3 days CPT Code: 87491, 87591	Negative	Recommended specimens: Female: Endocervical swab. Use kits for cervical swabs provided from CPAL.  For urine specimens see STD PROBE URINE
LAB CTNGCYT	STD PROBE THIN PREP	<b>STD (PCR) THIN PREP PROBE PANEL (CPAL 3009050)</b> For Chlamydia trachomatis and Neisseria gonorrhoeae Methodology: PCR Probe Set up: Mon - Fri Report available: 3 days CPT Code: 87491, 87591	Negative	Recommended specimens: Female: Thin Prep Vial.  For urine specimens see STD PROBE URINE
LAB CTNGURETH	STD PROBE URETHRAL	<b>STD (PCR) URETHRAL PROBE PANEL</b> Test has been inactivated, please use CTNGURN as an alternative.		
LAB CTNGURN	STD PROBE URINE	<b>STD (PCR) URINE PROBE PANEL (CPAL 3009025)</b> For Chlamydia trachomatis and Neisseria gonorrhoeae Methodology: PCR Probe Set up: Mon - Fri Report available: 3 days CPT Code: 87491, 87591	Negative	Recommended specimens: Random urine (20 mL)
LAB CTNGVAG	STD PROBE VAG	<b>STD (PCR) VAGINAL PROBE PANEL (CPAL 3009040)</b> For Chlamydia trachomatis and Neisseria gonorrhoeae Methodology: PCR Probe Set up: Mon - Fri Report available: 3 days CPT Code: 87491, 87591	Negative	Recommended specimens: Vaginal swab. Use kits for vaginal swabs provided from CPAL.  For urine specimens see STD PROBE URINE  **For collection and testing of specimens from non-genital (ex. rectal or oral sources) see GCCULT and CHLAMCULT**
		<b>ST. LOUIS ENCEPHALITIS - See Arbovirus</b>		
		<b>STONE ANALYSIS - See Calculus Analysis</b>		
LAB STONERISK	URINE STONE RISK PROFILE	<b>STONE RISK PROFILE</b> Performed by Mission Pharmacal. See also, URORISK PROFILE, an alternative kidney stone assessment test, offered by the same company, but at a lower cost. Methodology: Various Set up: Daily Report available: 1 week  CPT Code: 82340, 83945, 84560, 82507, 83986, 84300, 82570, 84133, 84105, 83735, 84392, 82140	Accompanies report	24 hour urine collected in a STONE RISK container. Available from the Lab.
MIC STREPCS	STREP SCREEN	<b>STREPTOCOCCUS GROUP A SCREEN (THROAT ONLY)</b> Negative tests will reflex to throat culture. A charge will be added for each organism identification and susceptibility from the throat culture when indicated. Methodology: Immunoassay; Set up: Daily Report available: 24 - 36 hours  CPT Code: 87880	Negative	Transport swab; calcium alginate swabs and swabs with wooden shafts are not acceptable.

LAB STREP AG UR	STREP PNEUMONIAE AG URINE	<b>STREPTOCOCCUS PNEUMONIAE ANTIGENS, URINE</b> (QUEST 10287) Methodology: Immunochromatography Set up: Daily Report available: Next day  CPT Code: 87899	Accompanies report	3 mL urine in sterile container  Minimum: 0.5 mL
QUEST 901262 Univ. Req.	Universal Requisition	<b>STREPTOMYCIN LEVEL</b> Referral test for Quest Methodology: HPLC Set up: Mon-Fri Report available: 9 days  CPT Code: 80299	Accompanies report	2 mL serum (R), <b>FROZEN</b>  Minimum: 0.5 mL <b>Do not ship on Friday or Saturday</b>
		<b>STREPTOZYME (STREPTOCOCCAL EXOENZYME ANTIBODY SCREEN)</b> -See ANTI-STREP		
LAB STR MUSCLE PROF	STRIATED MUSCLE PROF	<b>STRIATED MUSCLE ANTIBODY WITH REFLEX TO TITER (QUEST 266)</b> Methodology: IFA Set up: Tues-Fri Report available : 5 days  CPT Code: 86255 [If screen is positive, a titer will be performed at an additional charge (CPT code: 86256)]	< 1:10	0.5 mL serum (R )  Minimum: 0.1 mL
LAB STRONGYLOIDES	STRONGYLOIDES IGG AB	<b>STRONGYLOIDES IgG ANTIBODY</b> (QUEST 34309) Methodology: Immunoassay Set up: Mon, Wed, Fri Report available: 4 days  CPT Code: 86682	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
		<b>SUDS - See HIV-1</b>		
QUEST 8561 Univ. Req.	Universal Requisition	<b>SULFA DRUGS</b> Particular medication must be listed on request form. The following medications can be measured: sulfacetamide, sulfadiazine, sulfadine, sulfadimerazine, sulfaquanidine, sulfamethazine, sulfamethizole, sulfamethoxazole, sulfamethylthiazole, sulfanilamide, sulfanilyl sulfarinamide, sulfapyrazine, sulfapyridine, sulfasalazine, sulfasuxidine, sulfathiazole, sulfasoxazole, triple sulfa. Methodology: Colorimetric Set up: Tues, Thurs Report available: 4 days  CPT Code: 80299	Accompanies report	3 mL serum (R of DB) or 3 mL plasma (L)  Minimum: 1.5 mL
LAB MISC	Universal Requisition	<b>SULFA-SALICYLATE ACID, URINE</b>		12 mL random urine
		<b>SULFONAMIDES - See Sulfa Drugs</b>		
		<b>SURMONTIL - See Trimipramine</b>		
		<b>SWEAT TEST - Refer patient to Chester County, DuPont</b>		
LAB SYNCELLCT  SYNCELLCTDIFF (diff if indicated)  SYN DIFF	SYN FLUID CELL COUNT -or- SYN FLUID CELL CT DIFF IF IND -or- SYN FLUID DIFF	<b>SYNOVIAL FLUID ANALYSIS</b> Includes cell count and WBC differential (if indicated) Methodology: Various Set up: Daily Report available: Next day  CPT Code: cell count - 89050 diff - 89051	Accompanies report	Minimum: 2 mL anticoagulated fluid (L) AND 2 mL unanticoagulated fluid (Y no additive)  Specimens delivered in any other manner may be rejected as unsuitable for testing.
LAB CRYSTALS	SYN FLUID CRYSTALS	<b>SYNOVIAL FLUID CRYSTALS ANALYSIS</b> Methodology: Polarizing microscopy Set up: Mon - Sun Report available: Next day  CPT Code: 89060	None detected	Minimum: 2 mL fluid (Y no additive)

LAB BFURIC	URIC ACID BODY FLUID	<b>SYNOVIAL FLUID URIC ACID</b> Performed at York Hospital Methodology: Colorimetric Set up: as needed Report available: Next day  CPT Code: 84560	Accompanies report	2 mL fluid, no preservative
		<b>T &amp; B LYMPHOCYTES - See Leukocyte Markers/Flow Cytometry in Appendix D</b>		
		<b>T CELL SUBSETS - See Leukocyte Markers/Flow Cytometry in Appendix D</b>		
		<b>T2 - See Testosterone Free &amp; Total</b>		
LAB T3U	T3 UPTAKE	<b>T3 UPTAKE (TU)</b> (QUEST 861) Methodology: IA Set up: Daily Report available: Next day  CPT Code: 84479		1 mL serum (SS)  Minimum: 0.5 mL
LAB T3 FR DIAL	T3 FREE BY DIALYSIS	<b>T3, FREE BY DIALYSIS w/ T3 TOTAL</b> (QUEST 36598) <i>Includes Free T3 and T3 Total</i> Methodology: RIA / ICMA Set up: Tues, Thurs Report available: 2 days  CPT Code: 84480, 84481	Accompanies report	1.0 mL serum (SS or R)  Minimum: 0.5 mL
LAB FT3	T3 FREE	<b>T3, FREE</b> Methodology: Chemiluminescent Set up: Daily Report available: Next day  CPT Code: 84481	Accompanies report	1 mL plasma (Gn-Li)  Minimum: 0.5 mL
LAB REVERSE T3	REVERSE T3	<b>T3, REVERSE</b> (QUEST 90963) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 2 days  CPT Code: 84482	Accompanies report	0.5 mL serum (R or SS) If collected in SS tube, remove serum from gel within 24 hrs. Minimum: 0.3 mL
LAB T3 TOTAL	T3 TOTAL	<b>T3, TOTAL</b> Methodology: Chemiluminescent Set up: Daily Report available: Next day  CPT Code: 84480	Accompanies report	1 mL plasma (Gn-Li)  Minimum: 0.5 mL
LAB T4 ANTIBODY	ANTI THYROXINE AB	<b>T4 (THYROXINE) ANTIBODY</b> (QUEST 36576) Methodology: Radiobinding Assay Set up: Wed, Sun Report available: 4 days  CPT Code: 83519	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB FT4	FREE T4 / FREE THYROXINE	<b>T4, FREE</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84439	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)
LAB FT4 BY DE	FREE T4 BY DIALYSIS EQUIL	<b>FREE T4 INCLUDING TOTAL T4 BY EQUILIBRIUM DIALYSIS</b> (QUEST 8382) Methodology: Equilibrium Dialysis Set up: Mon - Thurs Report available: Next day  CPT Code: 84436, 84439	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB T4	T4 /THYROXINE	<b>T4, TOTAL (Thyroxine)</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 84436	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
		<b>TAMBOCOR - See Flecainide</b>		
LAB TAY SACHS MUTAT	TAY SACHS DISEASE MUTATION	<b>TAY-SACHS DISEASE MUTATION ANALYSIS</b> (QUEST 90903) Methodology: PCR, Allele specific primer extension, Fluorescent detection/color coded microspheres Set up: Tues, Thurs, Sat Report available: 6 days  CPT Code: 81255	Accompanies report	4 mL blood (L), <b>ROOM TEMP</b>  Minimum: 3 mL

		<b>TB CULTURE - See Culture, Acid-Fast TB</b>		
		<b>TBII - See Thyrotropin Binding Inhibitory Immunoglobulin</b>		
		<b>TB SMEAR - See Acid-Fast (TB) Smear</b>		
LAB TBG	THYROXINE BINDING GLOBULIN	<b>TBG (THYROXINE BINDING GLOBULIN)</b> (QUEST 4352) Methodology: Chemiluminescence Set up: Mon - Fri Report available: Next day CPT Code: 84442	Accompanies report	1 mL serum (R) or (SS) Minimum: 0.5 mL
		<b>TEGRETOL - See Carbamazepine</b>		
LAB TEICHOIC	TEICHOIC ACID AB	<b>TEICHOIC ACID ANTIBODIES SCREEN WITH REFLEX TO TITER</b> (QUEST 36568) Methodology: ID Set up: Mon - Sat Report available: 2 days CPT Code: 86331 [If screen is positive, test will reflex to titer (Test Code 6832) at an additional charge]	Accompanies report	1 mL serum (SS) or (R) Minimum: 0.5 mL
LAB TESTOS FREE	TESTOSTERONE FREE	<b>TESTOSTERONE, FREE</b> (CPAL 1750094) Methodology: Calculation Set up: Mon - Sat Report available: Next day CPT Code: 84402	Accompanies report	1.0 mL serum (SS) Effective 2/28/15, if there is a 72 hour delay in time of collection and specimen getting to CPAL, remove serum from gel.
LAB TESTOS TOT	TESTOSTERONE TOTAL	<b>TESTOSTERONE, TOTAL</b> (CPAL 1750075) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day CPT Code: 84403	Accompanies report	1.0 mL serum (SS) Effective 2/28/15, if there is a 72 hour delay in time of collection and specimen getting to CPAL, remove serum from gel.
LAB TESTOS F+T	TESTOSTERONE FREE AND TOTAL	<b>TESTOSTERONE, FREE &amp; TOTAL (T2)</b> (CPAL 1750074) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day CPT Code: 84402, 84403	Accompanies report	1.0 mL serum (SS) Effective 2/28/15, if there is a 72 hour delay in time of collection and specimen getting to CPAL, remove serum from gel.
LAB TESTOS BIOAVAIL	TESTOSTERONE BIOAVAILABLE	<b>TESTOSTERONE FREE BIOAVAILABLE &amp; TOTAL</b> (QUEST 14966) Includes Total Testosterone, Free and Bioavailable (calculated), Sex Hormone Binding Globulin, and Albumin Methodology: Calculation, SP, LC/MS/MS, Immunochemiluminescence Set up: Mon - Fri Report available: 2 days CPT Code: 82040, 84270, 84403	Accompanies report	2.8 mL serum (R) <b>No SS tubes</b> or 2.8 mL plasma (GN Na-hep) Minimum: 1.3 mL
LAB TESTOS TOT	TESTOSTERONE, TOTAL	<b>TESTOSTERONE, TOTAL</b> Performed at CPAL Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day CPT Code: 84403	Accompanies report	1.0 mL serum (SS)
LAB TETANUS TOXIN	TETANUS ANTITOXOID AB	<b>TETANUS ANTITOXOID</b> (QUEST 53952) Methodology: ELISA Set up: Mon, Wed, Fri Report available: Next day CPT Code: 86774	Accompanies report	1 mL serum (SS or R) Minimum: 0.2 mL
LAB THAL-HGB PANEL	THALASSEMIA HEMOGLOBINOPATHY	<b>THALASSEMIA &amp; HEMOGLOBINOPATHY COMPREHENSIVE PANEL</b> (QUEST 12658) Includes Hemoglobin A2, Hemoglobin F, Ferritin, and Hemogram (WBC, RBC, Hemoglobin, Hematocrit, MCV, MCH, MCHC, RDW) Methodology: CZE, HPLC, ICMA Set up: Mon - Fri Report available: 5 days CPT Code: 82728, 83021, 85041, 85018, 85041	Accompanies report	15 mL whole blood (L) Min: 5 mL and 1 mL serum (SS) Min: 0.5 mL and 1 mL plasma (EDTA LAV) Min: 0.5 mL <b>Hemolyzed specimens are unacceptable</b>

LAB THEO	THEOPHYLLINE	<b>THEOPHYLLINE</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80198	Accompanies report	1 mL serum (SS, R)  Minimum: 0.5 mL
		<b>THIAMINE - See Vitamin B<sub>1</sub></b>		
QUEST 879X Univ. Req.	Universal Requisition	<b>THIOCYANATE</b> <i>Active metabolite of sodium nitroprusside</i> Methodology: Colorimetry Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 84430	Accompanies report	3 mL serum (R or DB) or plasma (L) Minimum: 1.5 mL
LAB THIOPURINE	THIOPURINE METABOLITES	<b>THIOPURINE METABOLITES (6-MP METABOLITES)</b> (QUEST 91745) <i>Includes 6-Thioguanine (6-TG) and 6-Methylmercaptopurine (6-MMP)</i> Methodology: LC/MS/MS Set up: Tues-Sat Report available: 3 days  CPT Code: 83789	Accompanies report	5 mL EDTA whole blood (L) <sup>A</sup> trough is required (within 1 hr prior to next dose) Minimum: 2.5 mL
LAB TPMT RBC	TPMT ERYTHROCYTES	<b>THIOPURINE METHYLTRANSFERASE (TPMT), ERYTHROCYTES</b> (QUEST 18831) Methodology: LC/MS/MS Set up: Mon,Wed,Fri Report available: 4 days  CPT Code: 83789	Accompanies report	Draw 2 separate EDTA (L) tubes, 3-5mL each, 6mL total Minimum: 2 separate tubes, 3mL total
QUEST 23232Z Univ. Req.	Universal Requisition	<b>THIORIDAZINE and Metabolite</b> <i>Includes Thioridazine and Mesoridazine</i> Methodology: GC Set up: Sun - Fri Report available: 4 days  CPT Code: 80342	Accompanies report	2.0 mL serum (R ) or 2.0 mL plasma (L)  Minimum: 0.7 mL
QUEST 900987 Univ. Req.	Universal Requisition	<b>THIOTHIXENE (Cis Isomer), URINE</b> Methodology: GC Set up: Mon, Wed, Fri Report available: 5 days  CPT Code: 80299	Accompanies report	3 mL urine  Minimum: 1.2 mL
		<b>THORAZINE - See Chorpromazine</b>		
LAB THROMBIN	THROMBIN TIME	<b>THROMBIN TIME</b> Methodology: Optical clot detection Set up: Daily Report available: Same day  CPT Code: 85670	15.1 -19.1 seconds	2 mL citrated plasma (LB) Test must be performed within 4 hours of collection  Minimum: 1 mL
LAB THROMBOPHIL PAN	THROMBOPHILIA PANEL	<b>THROMBOPHILIA PANEL</b> QUEST (14934) <i>Includes:PTT-LA, Protein C Activity, Prothrombin Gene Analysis, Protein S Activity, Cardiolipin IgM, Cardiolipin IgG, Cardiolipin IgA, DRVVT, Homocysteine, Factor V Leiden</i> Methodology: Various Set up: Mon - Fri Report availbale: Varies with assay  CPT Code: 81241,81240,83090, 85300, 85303, 85306, 85613, 85730, 86147(X3)	Accompanies report	3 tubes (1mL) plasma (LB) <b>FROZEN AND</b> 1 tubes (3 mL) plasma (LB) <b>FROZEN AND</b> 1 tubes (2 mL) plasma (LB) <b>FROZEN AND</b> 2 tubes (5 mL) EDTA whole blood (L) <b>RM TEMP AND</b> 1 mL EDTA plasma (L) <b>REFRIG AND</b> 3 tubes (1 mL) serum (SS) <b>REFRIG</b>
LAB THYROGLOB	THYROGLOBULIN	<b>THYROGLOBULIN</b> (CPAL 1750029) Methodology: Chemiluminescence Set up: Mon - Sat Report available: Next day  CPT Code: 84432	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB THYRO PAN	THYROGLOBULIN PANEL	<b>THYROGLOBULIN PANEL</b> <i>Includes Thyroglobulin and Anti-Thyrogloblin Antibody</i> (CPAL 1750030) Methodology: EIA, CIA Set up: Mon - Sat Report availbale: Next day  CPT Code: 86800, 84432	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
		<b>THYROGLOBULIN ANTIBODIES - See Anti-Thyroglobulin Antibodies</b>		

		<b>THYROID ANTIBODIES - See Anti-Thyroglobulin Antibodies, Anti-Thyroid Microsome (TPO) Antibodies</b>		
LAB THYROID MUTAT	<b>RESISTANCE TO THYROID HORMONE</b>	<b>RESISTANCE TO THYROID HORMONE (RTH) MUTATION ANALYSIS</b> (QUEST 16053) Methodology: PCR, DNA sequencing Set up: as needed; minimum 1x per week Report available: 28 days  CPT Code: 81405	Accompanies report	5 ml whole blood (EDTA LAV)  Minimum: 3 mL
		<b>THYROID PEROXIDASE (TPO) ANTIBODIES- See Anti-Thyroid Micorsome (TPO) Antibodies</b>		
		<b>THYROID PROFILE- See Thyroid Stimulating Hormone Progressive</b>		
LAB TSH	<b>THYROID STIMULATING HORMONE / TSH</b>	<b>THYROID STIMULATING HORMONE (TSH), HIGHLY SENSITIVE</b> Methodology: Chemiluminescence Set up: Daily Report available: Next day  CPT Code: 84443	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)
LAB TSHPR	<b>TSH PROGRESSIVE</b>	<b>THYROID STIMULATING HORMONE (TSH), PROGRESSIVE</b> If TSH is abnormal, a Free T4 will be performed at an additional charge. Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 84443	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)
LAB TSH ANTIBODY	<b>TSH AB</b>	<b>THYROID STIMULATING HORMONE (TSH), ANTIBODY</b> (QUEST 36577) Methodology: RIA Set up: Wed, Sun Report available: 4 days  CPT Code: 83519	Accompanies report	1 ml serum (SS)  Minimum: 0.5 mL
LAB TSH 3RD GEN	<b>TSH 3RD GENERATION</b>	<b>THYROID STIMULATING HORMONE (TSH), 3RD GENERATION</b> (QUEST 899) Methodology: Immunoassay Set up: Daily Report available: Next day  CPT Code: 84443	Accompanies report	1 ml serum (SS)  Minimum: 0.7 mL
LAB THY STIM I	<b>THYROID STIMULATING IMMUNO</b>	<b>THYROID STIMULATING IMMUNOGLOBULIN (TSI)</b> (QUEST 30551) Methodology: Immunoassay Set up: Mon - Sat Report available: 3 days  CPT Code: 84445	Accompanies report	1 mL serum (SS)  Minimum: 0.2 mL
LAB TBII.	<b>THYROTROPIN BINDING INHIBITORY</b>	<b>THYROTROPIN BINDING INHIBITORY IMMUNOGLOBULIN (TBII)</b> (Quest 5738) Methodology: Radioreceptor Assay Set up: Tues, Fri Report available: 2 days  CPT Code: 83519	Accompanies report	1.0 mL serum (SS)  Minimum: 0.5 mL
		<b>THYROXINE, TOTAL - See T4, Total</b>		
		<b>THYROXINE BINDING GLOBULIN - See TBG (Thyroxine Binding Globulin)</b>		
LAB TISS PANEL	<b>TISSUE TRANS AB PANEL</b>	<b>TISSUE TRANSGLUTAMINASE ANTIBODY PANEL (IgA, IgG)</b> (QUEST 11073) Includes tTG IgA and IgG antibodies Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 83516(X2)	Accompanies report	1.0 mL serum (SS)

LAB TISS TRANS	TISSUE TRANS IGA AB	<b>TISSUE TRANSGLUTAMINASE (tTG) IgA ANTIBODY</b> (QUEST 8821) Methodology: EIA Set up: Mon - Fri Report available: Next day  CPT Code: 83516	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB TOBRA	TOBRAMYCIN	<b>TOBRAMYCIN</b> (QUEST 3012) Methodology: Immunoassay Detection limit: 1.0 µg/mL Set up: Mon-Sat Report available: Next day  CPT Code: 80200	Accompanies report	1 mL serum (R) Collect as a <b>trough</b> just prior to next dose. Collect <b>peak</b> 30 minutes after end of IV infusion or 60-90 minutes after IM dose. Minimum: 0.2 mL
		<b>TOCOPHEROLS - See Vitamin E</b>		
		<b>TOFRANIL - See Imipramine</b>		
LAB TOPIRAMATE	TOPIRAMATE / TOPOMAX	<b>TOPIRAMATE (TOPOMAX)</b> (QUEST 30965) Methodology: LC/MS/MS Set up: Mon - Sat Report available: 2 days  CPT Code: 80201	Accompanies report	1 mL serum (R or DB) or 1 mL heparanized plasma (Gn) Draw at peak (2-4 hours after dose) or trough (0.5-1 hr before dose) at steady-state. Minimum: 0.5 MI
LAB TORCH GRP	TORCH GROUP	<b>TORCH GROUP</b> (Quest 234) Includes CMV IgG antibodies, HSV 1&2 IgG antibodies, RPR, Rubella IgG antibodies, Toxoplasma IgG, RPR Methodology: EIA, RPR, Microparticle EIA Set up: Mon, Wed, Fri Report available: 3 days  CPT Code: 86592, 86644, 86695, 86696, 86762, 86777	Accompanies report	2 mL serum (R, SS)  Minimum: 1.3 mL
QUEST 18482 Univ. Req.	Universal Requisition	<b>TORCH GROUP, IgM</b> Includes CMV IgM antibodies, HSV 1&2 IgM antibodies, RPR, Rubella IgM antibodies, and Toxoplasma IgM antibodies. Methodology: EIA, RPR, Microparticle EIA Set up: Mon - Fri Report available: Next day  CPT Code: 86592, 86645, 86695, 86762, 86778	Accompanies report	2 mL serum (R, SS)  Minimum: 1.3 mL
LAB TOX SCR B	TOXICOLOGY SCREEN BLOOD	<b>TOXICOLOGY SCREEN, SERUM, BLOOD, PLASMA (QUEST 2991)</b> This test has been discontinued, the recommended alternatives are GEN TOX WB (Quest 91358 Drug Test, General Toxicology, Whole Blood) or GEN TOX SER (Quest 91360 Drug Test, General Toxicology, Serum)	Accompanies report	8 mL serum or plasma (DB,R,L)  Minimum: 2 mL
LAB TOX SCR G	TOXICOLOGY SCREEN GASTRIC	<b>TOXICOLOGY SCREEN, GASTRIC (QUEST 2998)</b> Test has been discontinued, the recommended alternative is GEN TOX UR (Quest 91359 Drug Test, General Toxicology, Urine)	Accompanies report	25 mL gastric contents  Minimum: 5 mL
LAB TOX SCR UR	TOXICOLOGY SCREEN URINE	<b>TOXICOLOGY SCREEN, URINE (QUEST 2997)</b> Test has been discontinued, the recommended alternative is GEN TOX UR (Quest 91359 Drug Test, General Toxicology, Urine)	Accompanies report	50 mL Random urine  Minimum: 10 mL
LAB TOXOIGG	TOXOPLASMA IGG ANTIBODY	<b>TOXOPLASMA GONDII IgG ANTIBODIES</b> (CPAL 3001410) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86777	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL

LAB TOXOIGM	TOXOPLASMA IGM ANTOBODY	<b>TOXOPLASMA GONDII IgM ANTIBODIES</b> (CPAL 3001420) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86778	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
LAB TOXOGRP	TOXOPLASMA IGG/IGM GROUP	<b>TOXOPLASMA IGG/IGM GROUP</b> (CPAL 3001405) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 86777, 86778	Accompanies report	2 mL serum (SS ) Minimum: 1mL
QUEST 14524X Univ. Req.	Universal Requisition	<b>TOXOPLASMA ADULT PANEL</b> Includes <i>Toxoplasma gondii</i> IgM, IgA, IgG and IgE Methodology: ELISA Set up: Mon - Fri Report available: 10 days  CPT Code: 86777(X3), 86406, 86778	Accompanies report	2 mL serum ( R ) Minimum: 0.5 mL
LAB TRANSFER	TRANSFERRIN	<b>TRANSFERRIN</b> Methodology: Turbidometric Set up: Daily Report available: Same day  CPT Code: 84466	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
		<b>PERCENT SATURATION - Order TIBC</b>		
LAB PREALB	PREALBUMIN	<b>TRANSTHYRETIN (PREALBUMIN)</b> Methodology: Turbidometric Set up: daily Report available: Same day  CPT Code: 84134	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>TRANXENE - See Clorazepate</b>		
LAB TRAZADONE	TRAZADONE	<b>TRAZADONE (DESYREL)</b> (QUEST 1312) Referral test for Quest Methodology: LC/MS/MS Set up: Thurs Report available: 4 days  CPT Code: 80299	Accompanies report	1 mL serum ( R ) or 1ml plasma (L) <b>SS tubes are unacceptable</b> Minimum: 0.5 mL
LAB TREP ANTIB	TREPONEMA PALLIDUM AB	<b>TREPONEMA PALLIDUM ANTIBODIES</b> (QUEST 653) Methodology: Particle Agglutination Set up: Mon - Fri Report available: Next day  CPT Code: 86780	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>TRIAVIL - See Amitriptyline</b>		
LAB WETPREP	WET PREP	<b>TRICHOMONAS WET MOUNT</b> Methodology: Microscopic exam Set up: Daily Report available: Next day  CPT Code: 87210	None detected	Cotton swab (vaginal secretions, urethral discharge or prostatic secretions) in sterile saline, kept warm, and delivered to the Lab <b>IMMEDIATELY</b> . Test not suitable for off site collection.
QUEST 17482X Univ. Req.	Universal Requisition	<b>TRICYCLIC ANTIDEPRESSANTS IDENTIFICATION AND QUANTITATION</b> Includes Amytriptyline, Nortriptyline, Imipramine, Desipramine, Doxepin, Desmethyldoxepin, Clompiramine, Desmethylclomipramine Methodology: LC/MS/MS Set up: Mon - Sat Report available: Varies per individual test  CPT Code: 80377	Accompanies report	3 mL serum (DB or R) or plasma (L) Collect >12 hrs after dose. Minimum: 1.5 mL
LAB STELAZINE	STELAZINE / TRIFLUOPERAZINE	<b>TRIFLUOPERAZINE ( STELAZINE)</b> (QUEST 14371) Referral test for Quest Methodology: HPLC/TMS Set up: Wed,Fri Report available: 5 days  CPT Code: 80342	Accompanies report	2 mL serum ( R ) or 2 ml plasma (L) <b>REFRIGERATE</b> (effective 9/8/14)  Minimum: 0.7 mL

LAB TRIG	TRIGLYCERIDES	<b>TRIGLYCERIDES</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 84478	Accompanies Report	1 mL blood (Gn -Li (PST)) or 1 mL serum (SS), preferably drawn following 12 - 14 hour fast  Minimum: 0.5 mL
LAB BFTRIG	TRIGLYCERIDES BODY FLUID	<b>TRIGLYCERIDES - PERITONEAL FLUID</b> Performed at York Hospital Methodology: Enzymatic Set up: Daily Report available: Next day  CPT Code: 84478		2 mL fluid, no preservative
		<b>TRIODOTHYRONINE - See T3, Total or T3, Free</b>		
		<b>TRILEPTAL - See Oxcarbazepine</b>		
		<b>TRIPLE SCREEN - See Alph-Fetoprotein Triple Screen</b>		
LAB T WHIPPLEI	T WHIPPLEI DNA QUAL	<b>TROPHYREMA WHIPPELLI DNA Qual, RT-PCR</b> (QUEST 11769) Methodology: Real Time PCR Set up: Mon, Wed, Fri Report available: 1-2 days  CPT Code: 87798	Accompanies report	0.7 mL EDTA whole blood (L)  Minimum: 0.3 mL
LAB TROPI	TROPONIN I	<b>TROPONIN I (QUANTITATIVE)</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 84484	Accompanies report	4 mL blood (Gn -Li (PST)) Spin down within 2 hours and remove plasma.
QUEST 30329X Univ. Req.	Universal Requisition	<b>TRYPSIN</b> Referral test for QUEST Methodology: IA Set up: Tues, Thurs Report available: 4 days  CPT Code: 83519	Accompanies report	1.0 mL serum (R ) Minimum: 0.5 mL
LAB TRYPTASE	TRYPTASE	<b>TRYPTASE</b> (QUEST 34484) Methodology: Fluorezyme Immunoassay Set up: Tues, Thurs Report available: 3 days  CPT Code: 83520	Accompanies report	1 mL serum (R). <b>SS tubes are unacceptable</b>  Minimum: 0.5 mL
		<b>TSH - See Thyroid Stimulating Hormone</b>		
		<b>TTG - See Tissue Transglutaminase IgA Antibodies</b>		
		<b>TULAREMIA - See Francisella tularensis Antibodies</b>		
		<b>TWAR - See Chlamydia pneumoniae (TWAR)</b>		
		<b>TYLENOL - See Acetaminophen</b>		
BBK TS	TYPE AND SCREEN	<b>TYPE &amp; SCREEN</b> <i>Includes ABORh and antibody screen.</i> Methodology: Hemeagglutination Set up: Daily Report available: Same day  For Type & Crossmatch order "PC"  CPT Code: 86900, 86901, 86850		6.0 mL whole blood (Pink)
		<b>TYPHUS FEVER ANTIBODIES - See Rocky Mountain Spotted Fever Antibodies, Typhus Fever Antibodies</b>		
LAB CYTO ORD	CYTO ORDER	<b>TZANK STAIN</b>		Collect smear on slide and air dry. Place order for Cytology and comment "Tzank Stain". Slide is stained by Wright Geimsa in Hematology and read by Cytotechnologist.
LAB UGT1A1		<b>UGT1A1 GENOTYPING</b> (QUEST 165218) <b>Test is no longer available from Quest effective 7/28/14. Please use UGT1A1 Gene Polymorphism (Quest 17813) as the recommended alternative.</b>		

QUEST 17813 Univ. Req.	Universal Requisition	<b>UGT1A1 GENE POLYMORPHISM (TA REPEAT)</b> Methodology: PCR Set up: As needed; 1X/week Report available: 7 days after setup  CPT Code: 81350	Accompanies report	5 mL whole blood (L) <b>ROOM TEMP</b> Record draw time and date on tube. Minimum: 3 mL
		<b>UPEP - See Protein Electrophoresis, Urine</b>		
		<b>UREA NITROGEN, BLOOD - See Blood Urea Nitrogen</b>		
LAB U UREA	UREA NITROGEN, URINE	<b>UREA NITROGEN, RANDOM URINE</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 84540	None available	10 mL random urine at room temp  Minimum: 2 mL
LAB UREA NIT U	UREA NITROGEN URINE 24HR	<b>UREA NITROGEN, 24HR URINE</b> Methodology: Enzymatic Set up: Daily Report available: Same day  CPT Code: 84540	Accompanies report	10 mL aliquot of a 24-hr urine collection, collection preserved with 6N HCL  Minimum: 2 mL
LAB URIC	URIC ACID	<b>URIC ACID</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84550	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB URINE URIC ACID	URIC ACID, URINE	<b>URIC ACID, RANDOM URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84560	None available	10 mL random urine room temp  Minimum: 2 mL
LAB URIC URINE	URIC ACID 24 HR URINE	<b>URIC ACID, 24 HR URINE</b> Methodology: Colorimetric Set up: Daily Report available: Same day  CPT Code: 84560	Accompanies report	10 mL aliquot of 24-hr urine collection, preserved with 10mL 5% NaOH  Minimum: 2 mL
		<b>URINE, FISH - See Urovysion</b>		
LAB UA	URINALYSIS	<b>URINALYSIS, ROUTINE</b> <i>If protein, leukocyte esterase, or blood parameters are chemically positive, or if urine appearance is other than clear, a microscopic examination is performed automatically</i> Methodology: Reflectance (dipstick) Set up: Daily Report available: Same day  CPT Code: 81003	Accompanies report	12 mL random urine  Minimum: 2 mL (insufficient for performance of microscopic examination)
LAB UAMICRO	URINE MICROSCOPIC ONLY	<b>URINE MICROSCOPIC</b> Methodology: Microscopy Set up: Daily Report available: Same day **Must also order UA**  CPT Code: 81015	Accompanies report	12 mL random urine
		<b>URINE NTX - See Osteomark</b>		
		<b>URINE PREGNANCY TEST - See Chorionic Gonadotropin, Urine Qualitative</b>		
		<b>URINE PROTEIN - See Protein, Total, Urine</b>		
		<b>UROPORPHYRIN AND COPROPORPHYRIN - See Porphyrins, Fractionation Urine</b>		
LAB URORISK	URORISK PROFILE	<b>URORISK PROFILE</b> <i>Sent to Speciality Laboratory. Profile of urine chemistry designed to assess a patient risk for developing kidney stones. <u>Includes</u> Calcium, Oxalate, Uric Acid, Citrate, pH, Sodium, Phosphorus, Magnesium, Potassium, Creatinine, Calcium Oxalate, Brushite, Sodium Urate, Uric Acid, Sulfate, Total Volume</i> Methodology: Various Set up: Mon - Sat Report available: 5 days  CPT Code: 82340, 83945, 84560, 82507, 83986, 84300, 82570, 84133, 84105, 83735	Accompanies report	24-hr urine collected in a URORISK container (available from Lab)

LAB URO FISH	UROVYSION, FISH	<b>UROVYSION, FISH</b> (NeoGenomics) Methodology: FISH Report available: 3-5 days  CPT Code: 88121-26 X4	Accompanies report	50.0 mL Voided First Morning Urine Specimen <b>Collect Monday-Friday only</b> <b>Refrigerated</b> Mix urine with supplied fixative tablet. Please send a copy of the following with the specimen: Order form, Insurance Card(s), and Hospital Admission Form.  Minimum: 30 mL
		<b>UTSH - See Thyroid Stimulating Hormone, Highly Sensitive</b>		
		<b>VPA - See Valproic Acid (Depakote)</b>		
		<b>VALIUM - See Diazepam</b>		
LAB DEPAKOTE	VALPROIC / DEPAKOTE	<b>VALPROIC ACID</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80164	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB VANCOP	VANCOMYCIN PEAK	<b>VANCOMYCIN, PEAK</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80202	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Draw 60 minutes after completion of IV infusion.  Minimum: 0.5 mL
LAB VANCO	VANCOMYCIN RANDOM	<b>VANCOMYCIN, RANDOM</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80202		1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB VANCOT	VANCOMYCIN TROUGH	<b>VANCOMYCIN, TROUGH</b> Methodology: Immunoassay Set up: Daily Report available: Same day  CPT Code: 80202	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS) Draw 30 minutes prior to the start of the next scheduled infusion  Minimum: 0.5 mL
LAB VEN O2 SAT	VENOUS OXYGEN SATURATION	<b>VENOUS O2 SATURATION</b> Contact Respiratory Therapy Department  CPT Code: 82810		5 mL blood (Gn - Lithium) Submit to Respiratory Therapy Department after order is placed.  Minimum: 2 mL
LAB VGCC ANTIBODY	VOLTAGE-GATED CALC CHANNEL AB	<b>VOLTAGE-GATED CALCIUM CHANNEL (VGCC) ANTIBODY ASSAY</b> (QUEST 34057) Methodology: Radiobinding Assay Set up: Wed Report available: 4 days  CPT Code: 83519	Accompanies report	1 ml serum (R)  Minimum: 0.2 mL
LAB VMA	URINE VMA 24HR	<b>VANILLYLMADELIC ACID (VMA)</b> (QUEST 934X) Methodology: HPLC Set up: Mon - Fri Report available: 2 days  CPT Code: 84585	Accompanies report	10 mL aliquot of 24-hr urine collection preserved with 25 mL of 6N HCL during collection. Specify total 24-hr volume on request form.  Minimum: 5 mL
LAB VZV DNA PCR	VARICELLA ZOSTER DNA PCR	<b>VARICELLA-ZOSTER VIRUS (VZV) DNA, QN Real-Time PCR</b> (QUEST 18270) Methodology: RT-PCR Set up: Daily Report available: Next day  CPT Code: 87799	Accompanies report	1 mL whole blood (LAV EDTA) or 1 mL CSF  Minimum: 0.3 mL
LAB VZV IGG	VARICELLA ZOSTER IGG AB	<b>VARICELLA-ZOSTER VIRUS IgG ANTIBODIES</b> (CPAL 3001790) Methodology: EIA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86787	Accompanies report	1 mL serum (SS) <b>FREEZE</b>  Minimum: 0.1 mL
LAB VZV IGM	VARICELLA ZOSTER IGM AB	<b>VARICELLA-ZOSTER VIRUS IgM ANTIBODIES</b> (QUEST 8683) Methodology: Immunoassay Set up: Mon - Fri Report available: Next day  CPT Code: 86787	Accompanies report	1 mL serum (SS)  Minimum: 0.5 mL
		<b>VCA - See Epstein Barr testing</b>		

LAB VIP		<b>VASOACTIVE INTERSTITIAL POLYPEPTIDE (VIP)</b> This test has been discontinued by Quest effective 5/26/15.		
LAB VAP CHOL	VAP CHOLESTEROL	<b>VAP CHOLESTEROL</b> (QUEST 13761) This test has been discontinued by Quest effective 11/3/14. Please use Quest 92145 Cardio IQ® Advanced Lipid Panel as an alternative (CARDIO IQ LIPID).		
LAB CSF VDRL	CSF VDRL	<b>VDRL, CSF</b> (QUEST 7244) Methodology: Micro slide-flocculation Set up: Mon- Sat Report available: Next day  CPT Code: 86592	Accompanies report	1 mL CSF Collected in a plastic, screw-cap vial Minimum: 0.2 mL
		<b>VIRAL CULTURE</b> Contact physician office for specific virus to be cultured. See Appendix B for specimen type and transport media.		
LAB VISCOSITY	SERUM VISCOSITY	<b>VISCOSITY, SERUM</b> (QUEST 918) Methodology: Kinematic Viscometric Set up: Mon - Fri Report available: Next day  CPT Code: 85810	Accompanies report	2.0 mL serum (SS)  Minimum: 1.2 mL
LAB VITAMIN A	VITAMIN A	<b>VITAMIN A (RETINOL)</b> (QUEST 921) Methodology: HPLC Set up: Mon - Sat Report available: 3 days  CPT Code: 84590	Accompanies report	2.0 mL serum (SS) or (R ) <b>FROZEN</b> Protect from light Overnight fast is required Minimum: 0.7 mL
LAB THIAMINE	THIAMINE / VITAMIN B1 PLAMSA	<b>VITAMIN B1, PLASMA (THIAMINE)</b> (QUEST 90353) Methodology: LC/MS/MS Set up: Mon-Fri Report available: 3 days  CPT Code: 84425	Accompanies report	2.0 mL EDTA plasma (L) <b>FROZEN</b> Remove plasma within 4 hours of collection and transfer to a light protected pour off tube. Freeze. Overnight fasting is required.  Minimum: 1 mL
LAB VIT B1 WB	VITAMIN B1 WHOLE BLOOD	<b>VITAMIN B1, WHOLE BLOOD (THIAMINE)</b> (QUEST 5042) Methodology: LC/MS/MS Set up: Mon-Sat Report available: 2-3 days  CPT Code: 84425	Accompanies report	2.0 mL whole blood (L) <b>FROZEN</b> Protect from light; Overnight fasting is required  Minimum: 1 mL
LAB VITAMIN B2	VITAMIN B2	<b>VITAMIN B2 (RIBOFLAVIN)</b> (QUEST 36399) Methodology: HPLC / Fluorometric Detection Set up: Tues-Sat Report available: 3-4 days  CPT Code: 84252	Accompanies report	2.0 mL EDTA plasma (L) <b>FROZEN</b> Protect from light; Overnight fasting is required.  Minimum: 0.5 mL
LAB VITAMIN B3	VIT B3	<b>VITAMIN B3 (NICOTINIC ACID) NIACIN &amp; METABOLITES</b> (QUEST 91029) Methodology: LC/MS/MS Set up: Tues, Thurs, Sat Report available: 4 days  CPT Code: 84591	Accompanies report	2.0 mL Serum (R ) <b>FROZEN</b> This test is set to a different Quest location and cannot be shared. Must have own tube. Minimum: 1.0 mL
LAB VIT B6	VITAMIN B6	<b>VITAMIN B6 (PYRIDOXINE)</b> (QUEST 926) Methodology: LC/MS/MS Set up: Mon - Fri Report available: 4 days  CPT Code: 84207	Accompanies report	1.0 mL EDTA plasma (L) <b>FROZEN</b> Protect from light Overnight fast is required. Minimum: 0.5 mL
LAB VIT B12	VITAMIN B12	<b>VITAMIN B12</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 82607	Accompanies report	1 mL blood (Gn-Li (PST)) or 1mL serum (SS) (Stable 24 hrs refrigerated or frozen)  Minimum: 0.5 mL
LAB VIT B12+FO	VITAMIN B12 + FOLATE	<b>VITAMIN B12 &amp; FOLATE</b> Methodology: Chemiluminescence Set up: Daily Report available: Same day  CPT Code: 82746, 82607	See individual assays.	1 mL blood (Gn-Li (PST)) or 1mL serum (SS) (Stable 8 hrs refrigerated or frozen)  Minimum: 0.5 mL

LAB B12 BINDER	B12 BINDER / TRANSCOBALAMIN	<b>VITAMIN B12 UNSATURATED BINDING CAPACITY (TRANSCOBALAMIN)</b> (QUEST 928) Methodology: RIA Set up: Tues, Thurs Report available: Next day  CPT Code: 82608	Accompanies report	1.0 mL serum (R or SS) <b>FROZEN</b>  Minimum: 0.2 mL
LAB VITAMIN C	VITAMIN C / ASCORBIC ACID	<b>VITAMIN C (ASCORBIC ACID)</b> (QUEST 929) Methodology: LC/MS/MS Set up: Tues-Sat Report available: 5-8 days  CPT Code: 82180	Accompanies report	1.0 mL serum (R), <b>FROZEN</b> Protect from light Overnight fast is preferred <b>Ship frozen on dry ice.</b> Minimum: 0.5 mL
LAB VIT D,25-OH	VITAMIN D 25 OH / VITAMIN D TOTAL	<b>VITAMIN D TOTAL (VITAMIN D,25-OH)</b> (CPAL 1750200) Methodology: Chemiluminescent Set up: Mon - Fri Report available: Next day  CPT Code: 82306	Accompanies report	0.5 mL serum (SS)  Minimum: 0.3 mL
LAB VIT D(D2,D3)	VITAMIN D 25 OH D2 AND D3	<b>VITAMIN D, 25-Hydroxy, LC/MS/MS, INCLUDES D2 AND D3 SUBUNITS</b> (QUEST 92888) Includes Vitamin D, 25-OH, Total; Vitamin D, 25-OH, D3; Vitamin D, 25-OH, D2 Methodology: LC/MS/MS Set up: Mon - Sat Report available: 2 days  CPT Code: 82306	Accompanies report	0.5 mL serum (R ) <b>ROOM TEMP</b>  Minimum: 0.3 mL
LAB VIT D,1,25	VITAMIN D 1 25	<b>VITAMIN D, 1, 25-DIHYDROXY</b> (QUEST 16558) Includes Vitamin D, 1,25 (OH)2, Total; Vitamin D3, 1,25(OH)2; Vitamin D2, 1,25 (OH)2 Methodology: LC/MS/MS Set up: Mon - Sat Report available: 4 days  CPT Code: 82652	Accompanies report	2.0 mL serum (R ) <b>ROOM TEMP</b>  Minimum: 1.1 mL
LAB VITAMIN E	VITAMIN E	<b>VITAMIN E (TOCOPHEROL)</b> (QUEST 931) Includes Alpha-Tocopherol, Beta-Gamma-Tocopherol Methodology: HPLC Set up: Mon - Sat Report available: 2-3 days  CPT Code: 84446	Accompanies report	2.0 mL serum (SS) <b>FROZEN</b> Protect from light. Overnight fasting is required.  Minimum: 0.5 mL
LAB VITAMIN K	VITAMIN K	<b>VITAMIN K</b> (QUEST 3578) Methodology: HPLC Set up: Tues Report available: 2 days  CPT Code: 84597	Accompanies report	3.0 mL EDTA plasma (L) <b>FROZEN</b> Protect from light Overnight fast is preferred  Minimum: 1.5 mL
		<b>VLDL - See Coronary Risk Profile</b>		
		<b>VMA - See Vanillylmandelic Acid</b>		
LAB VON WILL	VON WILLEBRAND FACTOR AG	<b>VON WILLEBRAND FACTOR ANTIGEN</b> (QUEST 4919) Please submit a sperate vial for each special coagulation assay ordered. Methodology: Immunoturbidimetric Set up: Mon - Fri Report available: Next day  CPT Code: 85246	Accompanies report	1 mL <b>FROZEN</b> citrated plasma (LB) Minimum: 0.5 ml 1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze immediately in a -70C freezer.</b> <b>*Overnight fast is preferred</b>

LAB VON WILL MULT	VON WILLEBRAND FACTOR MULTIMER	<b>VON WILLEBRAND'S FACTOR MULTIMERIC ANALYSIS</b> (QUEST 47963) Methodology: Electrophoresis Set up: Mon - Thurs Report available: 3 days  CPT Code: 85247	Accompanies report	1.0 mL <b>FROZEN</b> sodium citrated plasma (LB) Minimum: 0.2 ml 1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze immediately in a -70C freezer.</b>
LAB VON PAN	VON WILLEBRAND PANEL	<b>VON WILLEBRAND'S SCREEN</b> (QUEST 90271) Includes aPTT; Factor VIII Activity, Clotting; von Willebrand Factor Antigen; Ristocetin Cofactor Methodology: Various Set up: Mon - Fri Report available: Next day  CPT Code: 85240, 85245, 85246, 85730	Accompanies report	3 (2ml ea) <b>FROZEN</b> sodium citrate plasma (LB) 1) Draw plain red top tube and discard or use for other testing. 2) Draw blood into light blue-top tubes, filling to complete volume. 3) Centrifuge specimen at 3000 rpm for 10 minutes. 4) Pipette platelet- poor plasma into 3 clean, plastic, screw-capped vials (2 ml each). <b>Freeze immediately in a -70C freezer.</b>
LAB VW COMP PANEL	VON WILLEBRAND COMPREHENSIVE	<b>VON WILLEBRAND'S COMPREHENSIVE PANEL</b> (QUEST 197908) Includes APTT; Factor VIII Activity; VW Factor Antigen; Ristocetin Cofactor; VW Antigen, Multimeric Analysis; Interpretation Methodology: Various Set up: Mon - Fri Report available: 4 days  CPT Code: 85240, 85245, 85246, 85247, 85730	Accompanies report	Minimum: 3(2) mL <b>FROZEN</b> sodium citrated plasma (LB) 1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze immediately in a -70C freezer.</b>
LAB VON WILL PROF2	VON WILLEBRAND PANEL 2	<b>VON WILLEBRAND'S PROFILE #2</b> (QUEST 115023) Includes Factor VIII Activity, VW Factor Antigen, Ristocetin Cofactor Activity Methodology: Various Set up: Varies Report available: Next day  CPT Code: 85240, 85245, 85246	Accompanies report	Minimum: 3(1) mL <b>FROZEN</b> sodium citrated plasma (LB) 1) Draw plain red top tube and discard or use for other testing. 2) Draw LB tube and centrifuge at 3000 rpm for 10 minutes. 3) Remove plasma to a plastic tube using a plastic pipette. <b>Freeze immediately in a -70C freezer.</b>
		<b>V-Z VIRUS ANTIBODIES - See Varicella-Zoster Virus Antibodies</b>		
		<b>WARFARIN - See Coumadin</b>		
		<b>WELLBUTRIN - See Bupropion</b>		
		<b>WET PREP - See Trichomonas Wet Mount</b>		
MIC STWBC	STOOL FOR WBC	<b>WBC, FECAL</b> Methodology: Smear Set up: Mon - Sat Report available: Next day  CPT Code: 89055	None detected	Random fecal specimen in clean container (no preservatives) or in Total-Fix preservative, labeled with patient name
LAB WBC WITH DIFF	LAB ONLY	<b>WHITE BLOOD COUNT (WBC), WITH DIFF</b> Methodology: Hematology analyzer Set up: Daily Report available: Same day  Note: If indicated, a manual WBC Differential will be performed.  CPT Code:85004	Accompanies report	4 mL blood (L) If greater than a 24 hour delay is expected in submitting the specimen a. Maintain at <b>ROOM TEMP</b> b. Submit a peripheral blood smear in addition to the blood specimen.  Minimum: 2 mL
LAB WELLF	LAB ONLY	<b>EMPLOYEE WELLNESS SCREEN FASTING</b> The screen includes the following: Glucose Lipid Panel Height Weight Blood Pressure	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL

LAB WELLR	LAB ONLY	<b>EMPLOYEE WELLNESS SCREEN NON-FASTING</b> The screen includes the following: Glucose Cholesterol HDL Height Weight Blood Pressure	Accompanies report	1 ml blood (Gn -Li (PST)) or 1 mL serum (SS)  Minimum: 0.5 mL
LAB WEST CSF	CSF WEST NILE VIRUS	<b>WEST NILE VIRUS (IgG, IgM), CSF</b> (QUEST 36597) Methodology: EIA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86788, 86789	Accompanies report	2 mL CSF  Minimum: 0.7 mL
LAB WEST SERUM	WEST NILE VIRUS SERUM	<b>WEST NILE VIRUS (IgG, IgM), SERUM</b> (QUEST 36596) Methodology: EIA Set up: Mon, Wed, Fri Report available: Next day  CPT Code: 86788, 86789	Accompanies report	2 mL serum (R or SS)  Minimum: 0.7 mL
		<b>WESTERN BLOT - See HIV-1 Antibodies, Western Blot</b>		
		<b>XANAX - See Alprazolam</b>		
		<b>XYLOCAINE - See Lidocaine</b>		
QUEST 941X Univ. Req.	Universal Requisition	<b>d-XYLOSE, ABSORPTION TEST, URINE, 5HR</b> Methodology: Colorimetric Set up: Mon, Thurs Report available: Next day  CPT Code: 84620	Accompanies report	<b>Test must be scheduled with the Lab at least 48 hours in advance.</b> 20 mL aliquot of 5-hr urine collection post oral ingestion of d-xylose. D-xylose powder available from Quest. Please specify total 5-hr volume on request orm. Specimen must be <b>FROZEN</b> immediately.  Minimum: 1mL
QUEST 147502 Univ. Req.	Universal Requisition	<b>d-XYLOSE ABSORPTION TEST, BLOOD</b> Methodology: Colorimetric Set up: Mon, Thurs Report available: Next day  CPT Code: 84620	Accompanies report	<b>Test must be scheduled with the Lab at least 48 hours in advance.</b> 4 mL blood (Gy), drawn at 30 min, 1 hour, or 2 hour post oral ingestion of d-xylose. D-xylose powder available from Quest.  Minimum: 1mL
		<b>YERSINIA - See Culture, Yersinia</b>		
		<b>YEAST - See Culture, Fungus</b>		
		<b>YEAST IDENTIFICATION - See FUNGAL IDENTIFICATION, YEAST</b>		
LAB ZINC PROTO	ZINC PROTOPORPHYRIN	<b>ZINC PROTOPORPHYRIN (ZPP)</b> (CPAL 1750185) Methodology: Fluorometric Set up: Mon, Thurs Report available: Same day  CPT Code: 84202	Accompanies report	1 mL blood (L or Gn), protect from light  Minimum: 05 mL
LAB ZINC	ZINC	<b>ZINC</b> (QUEST 945) Methodology: ICP/MS or AS Set up: Wed, Fri, Sun Report available: Next day  CPT Code: 84630	Accompanies report	2 mL plasma (DB-EDTA) or 2 mL serum (DB - no additive)  Minimum: 0.7 mL  Separate plasma or serum from cells within two hours. Transfer separated plasma/serum to a plastic, acid-washed or metal-free vial.
LAB ZINC RBC	ZINC RBC	<b>ZINC, RBC</b> (QUEST 6354) Methodology: ICP/MS Set up: Tues-Sat Report available: 2-4 days  CPT Code: 84630	Accompanies report	0.5 mL red blood cells(DB-EDTA) <b>Red Blood Cells Trace Metal: Use the royal blue-top trace metal evacuated tube with EDTA for RBC trace metal testing. Centrifuge and separate RBCs into an acid washed plastic screw cap vial within two hours of collection.</b>  Minimum: 0.3 mL
		<b>ZOLOFT - See Sertraline</b>		

LAB ZONISAMIDE	ZONISAMIDE / ZONOGRAM	ZONISAMIDE (ZONOGRAM) (QUEST 12938) Methodology: LC/MS/MS Set up: Mon, Wed, Fri Report available: 4 days CPT Code: 80203	Accompanies report	1 mL serum (R ) SS tubes unacceptable Minimum: 0.5 mL
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