May 2024

# ·I;I·HNL Lab Medicine

# LAB-LINK

NEW AND UPDATED TESTING INFORMATION

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# FOR THE MOST UP-TO-DATE TEST INFORMATION, VISIT OUR ONLINE HANDBOOK AT **HNL.COM/TESTMENU**

The American Medical Association (AMA) Current Procedural Terminology (CPT) codes published by HNL Lab Medicine are guidelines and are intended for informational purposes only. CPT coding is the exclusive responsibility of the billing entity. HNL Lab Medicine strongly recommends confirmation of CPT codes with third-party payors and/or the AMA. We assume no responsibility for billing errors due to reliance upon CPT codes provided by HNL Lab Medicine. OIG guidelines recommend tests ordered should be reasonable and necessary for the patient, given their clinical condition. Physicians who order medically unnecessary tests for which federal healthcare plan reimbursement is claimed may be subject to penalties. Individual components of profiles or panels may be ordered individually. Physicians who consider reflex testing unnecessary may order an initial test without the reflexed test. Reflex or confirmation tests are performed at an additional charge.

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### Alpha Subunit

### **Discontinued Test**

Alpha Subunit Free, F	PGH ALPSB
Description of Change	<b>Alpha Subunit Free, PGH (ALPSB) is discontinued</b> and no longer available to order. Refer to the new test below, Alpha Subunit Pituitary Tumor Marker (ALSUP), as a replacement.
Effective Date	Inactivated March 26, 2024
Test Name	Alpha Subunit Free, PGH
Test Code	ALPSB
Alternate Test	Alpha Subunit Pituitary Tumor Marker (ALSUP)

### **New - Replacement Test**

Alpha Subunit Pituitary	Tumor Marker ALSUP
Effective Date	Immediately
Test Name	Alpha Subunit Pituitary Tumor Marker
Test Code	ALSUP
CPT Code	82397
Methodology	Immunchemiluminescent Assay
Report Availability	4-10 days
Reference Range	Different than ALPSB
Specimen Requirements	
Container	Gold Top Serum Separator Tube OR Red Top Tube, No Serum Separator
Collection	Separate serum from cells. Transfer serum into plastic aliquot tube and freeze.
Stability (from collection to initiation)	Frozen: 90 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Cortisol, Saliva

### **Discontinued Test**

Cortisol, Saliva	SLCOR
Description of Change	<b>Cortisol, Saliva (SLCOR) is discontinued</b> and no longer available to order. Refer to the new test below, Cortisol, Saliva (CORSV), as a replacement.
Inactivation Date	Inactivated March 19, 2024
Test Name	Alpha Subunit Free, PGH
Test Code	ALPSB
Alternate Test	Cortisol, Saliva (CORSV)

### **New - Replacement Test**

Cortisol, Saliva	CORSV
Effective Date	Immediately
Test Name	Cortisol, Saliva
Test Code	CORSV
CPT Code	82533
Methodology	Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS)
Report Availability	4-6 days
Specimen Requirements	
Minimum Volume	2 mL
Container	Mayo Salivette Collection Kit
Collection	Saliva collected in Mayo Salivette collection kit (includes saliva collection instructions).
Stability (from collection to initiation)	Refrigerated: 28 days
Deference Dange	• 7 a.m. to 9 a.m.: 100-750 ng/dL
Reference Range	<ul><li>3 p.m. to 5 p.m.: &lt;401 ng/dL</li><li>11 p.m. to midnight: &lt;100 ng/dL</li></ul>

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Deoxypyridinoline Crosslinks, Urine

### **Discontinued Test**

Deoxypyridinoline Crosslinks, Urine DXYCU		CU
Description of Change	<b>Deoxypyridinoline, Crosslinks Urine (DXYCU) is discontinued</b> and no longer avaito order. Refer to the new test below, Deoxypyridinoline Crosslinks, Urine (UDOXP), replacement.	
Effective Date	Inactivated March 26, 2024	
Test Name	Deoxypyridinoline, Crosslinks Urine	
Test Code	DXYCU	
Alternate Test	Deoxypyridinoline Crosslinks, Urine (UDOXP)	

### **New - Replacement Test**

Deoxypyridinoline Cros	slinks, Urine UDOXP
Effective Date	Immediately
Test Name	Deoxypyridinoline Crosslinks, Urine
Test Code	UDOXP
CPT Code	82523
Methodology	Quantitative Enzyme Immunoassay
Report Availability	3-14 days
Specimen Requirements	
Minimum Volume	3.5 mL Urine
Container	Sterile container or aliquot
Collection	Transfer 3.5 mL from a well-mixed, first morning urine collection. Transport aliquot frozen.
Stability (from collection to initiation)	Frozen: 90 days Refrigerated: 7 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Enterovirus, PCR

### **Discontinued Test**

Enterovirus by PCR	ENPCR
Description of Change	<b>Enterovirus by PCR (ENPCR) is discontinued</b> and no longer available to order. Refer to the new test below, Enterovirus PCR, Plasma (ENVPL), as a replacement.
Effective Date	Inactivated March 19, 2024
Test Name	Enterovirus by PCR
Test Code	ENPCR
Alternate Test	Enterovirus PCR, Plasma (ENVPL)

### **New - Replacement Test**

Enterovirus PCR, Plasn	na ENVPL
Effective Date	Immediately
Test Name	Enterovirus PCR, Plasma
Test Code	ENVPL
CPT Code	87498
Methodology	RT PCR/RNA Probe Hybridization
Report Availability	2-7 days
Specimen Requirements	
Minimum Volume	1 mL EDAT Plasma
Container	Lavender Top EDTA Tube
Collection	Centrifuge blood collection tube and transfer 1 mL EDTA plasma into plasic aliquot tube.
Stability (from collection to initiation)	Frozen: 7 days Refrigerated: 7 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Lacosamide

### **Discontinued Test**

Lacosamide	LACOS
Description of Change	<b>Lacosamide (LACOS) is discontinued</b> and no longer available to order. Refer to the new test below, Lacosamide, Serum (LACMD), as a replacement.
Effective Date	Inactivated March 19, 2024
Test Name	Lacosamide
Test Code	LACOS
Alternate Test	Lacosamide, Serum (LACMD)

### **New - Replacement Test**

Lacosamide, Serum	LACMD
Effective Date	Immediately
Test Name	Lacosamide, Serum
Test Code	LACMD
CPT Code	80235
Methodology	Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS)
Report Availability	2-6 days
Specimen Requirements	
Minimum Volume	1 mL Serum
Container	Gold Top Tube, Serum Separator OR Red Top Tube, No Serum Separator
Collection	Separate serum from cells within 2 hours of collection. Transfer serum into plastic aliquot tube and refrigerate.
Stability (from collection to initiation)	Refrigerated: 28 days Frozen: 28 days Room Temperature: 28 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Leishmaniasis Antibody

### **Discontinued Test**

Leishmaniasis Antiboo	dy, IgG	ISH
Description of Change	<b>Leishmaniasis Antibody, IgG (LEISH) is discontinued</b> and no longer available to ord Refer to the new test below, Leishmaniasis Antibody (LSHAB), as a replacement.	der.
Effective Date	Inactivated March 19, 2024	
Test Name	Leishmaniasis Antibody, IgG	
Test Code	LEISH	
Alternate Test	Leishmaniasis Antibody (LSHAB)	

### **New - Replacement Test**

Leishmaniasis Antibod	y LSHAB
Effective Date	Immediately
Test Name	Leishmaniasis Antibody
Test Code	LSHAB
CPT Code	86717
Methodology	Immunochromatographic Strip Assay
Report Availability	2-6 days
Specimen Requirements	
Minimum Volume	1 mL Serum
Container	Gold Top Serum Separator Tube OR Red Top Tube, No Serum Separator
Collection	Separate serum from cells. Transfer serum into plastic aliquot tube and refrigerate.
Stability (from collection to initiation)	Refrigerated: 14 days Frozen: 14 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Voriconazole

### **Discontinued Test**

Voriconazole	VORIC
Description of Change	<b>Voriconazole (VORIC) is discontinued</b> and no longer available to order. Refer to the new test below, Voriconazole, Serum (VRCZS), as a replacement.
Effective Date	Inactivated March 26, 2024
Test Name	Voriconazole
Test Code	VORIC
Alternate Test	Voriconazole, Serum (VRCZS)

### **New - Replacement Test**

Voriconazole, Serum	VRCZS
Effective Date	Immediately
Test Name	Voriconazole, Serum
Test Code	VRCZS
CPT Code	80285
Methodology	Liquid Chromatography Tandem Mass Spectrometry (LC-MS/MS)
Report Availability	2-4 days
Specimen Requirements	
Minimum Volume	2 mL Serum
Container	Red Top Tube, No Serum Separator
Collection	Separate serum from cells within 2 hours of collection. Transfer serum into plastic aliquot tube and refrigerate.
Stability (from collection to initiation)	Refrigerated: 28 days Room Temperature: 28 days Frozen: 28 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### West Nile Virus, PCR

### **Discontinued Test**

West Nile Virus, PCR	WNVB	3
Description of Change	West Nile Virus, PCR (WNVB) is discontinued and no longer available to order. Refer to the new tests below as a replacement.  • West Nile Virus, RNA, PCR, CSF (WNVSF)  • West Nile Virus, RNA, PCR, Whole Blood (WNVBL)	
Effective Date	Inactivated March 19, 2024	
Test Name	West Nile Virus, PCR	
Test Code	WNVB	
Alternate Test	Replacement tests West Nile Virus, RNA, PCR, CSF (WNVSF) and West Nile Virus, RNA, PCR, Whole Blood (WNVBL).	

# New - Replacement Test

West Nile Virus, RNA, PCR, CSF WNVSF		WNVSF
Effective Date	Immediately	
Test Name	West Nile Virus, RNA, PCR, CSF	
Test Code	WNVSF	
CPT Code	87798	
Methodology	Real-Time Reverse Transcription Polymerase Chain Reaction (RT-PCR)	
Report Availability	2-7 days	
Specimen Requirements		
Minimum Volume	1 mL CSF	
Container	Sterile aliquot tube	
Collection	Transfer CSF into sterile aliquot tube and refrigerate.	
Stability (from collection to initiation)	Refrigerated: 7 days	

# **New - Replacement Test**

West Nile Virus, RNA, PCR, Whole Blood		WNVBL
Effective Date	Immediately	
Test Name	West Nile Virus, RNA, PCR, Whole Blood	

Test Code	WNVBL
CPT Code	87798
Methodology	Real-Time Reverse Transcription Polymerase Chain Reaction (RT-PCR)
Report Availability	2-7 days
Specimen Requirements	
Minimum Volume	1 mL Whole Blood
Container	Lavender Top EDTA Tube
Collection	Collect whole blood in lavender top EDTA tube and refrigerate.
Stability (from collection to initiation)	Refrigerated: 7 days

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### West Nile Virus, Antibody

### **Discontinued Test**

West Nile Virus, Antibody Profile, CSF WNCS	
Description of Change	West Nile Virus, Antibody Profile, CSF (WNCSF) is discontinued and no longer available to order. Refer to the new test below, West Nile Virus, Antibody, IgG and IgM, CSF (WNASF), as a replacement.
Effective Date	Inactivated March 19, 2024
Test Name	West Nile Virus, Antibody Profile, CSF
Test Code	WNCSF
Alternate Test	West Nile Virus, Antibody, IgG and IgM, CSF (WNASF)

### **New - Replacement Test**

West Nile Virus, Antibody, IgG and IgM, CSF WNASF		WNASF
Effective Date	Immediately	
Test Name	West Nile Virus, Antibody, IgG and IgM, CSF	
Test Code	WNASF	
CPT Code	86789, 86788	
Methodology	Enzyme-Linked Immunosorbent Assay (ELISA)	
Report Availability	2-6 days	
Specimen Requirements		
Minimum Volume	1 mL CSF	
Stability (from collection to initiation)	Refrigerated: 7 days Frozen: 30 days	

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### HIV Genosure Archive (HIV-1)

### **Discontinued Test**

HIV Genosure Archive (HIV-1) GAF		
Description of Change	The test code GARCV for HIV Genosure Archive will be discontinued on Tuesday, May 7, 2024. Refer to the new test code GSARC.as a replacement.	
Effective Date	Inactivated May 7, 2024	
Test Name	HIV Genosure Archive (HIV-1)	
Test Code	GARCV	
Replacement Test	HIV Genosure Archive - HIV1 (GSARC)	

### **New - Replacement Test**

HIV Genosure Archive (HIV-1) GSA		GSARC
Effective Date	Immediately	
Test Name	HIV Genosure Archive (HIV-1)	
Test Code	GSARC	
CPT Code	87900, 87901, 87906	
Methodology	Polymerase Chain Reaction (PCR) and Next Generation DNA Sequencing	
Report Availability	5-10 days	
Specimen Requirements		
Minimum Volume	4 mL whole blood	
Container	Lavender top tube (EDTA)	
Collect	Collect specimen in Lavender top (EDTA) tube. Do not centrifuge. Freeze spe immediately. If multiple frozen tests are ordered, please submit separate fro specimens for each test.	
Clinical Utility	Used to detect resistance of HIV-1 to protease, reverse transcriptase and intinhibitors in cell-associated viral DNA.	egrase

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

### Aquaporin-4

### **Discontinued Test**

Aquaporin-4 Receptor Antibody AQ	
Description of Change	Aquaporin-4 Receptor Antibody (AQ4R) is being discontinued by our reference lab and is no longer available to order. Refer to the new test below, Aquaporin-4 (AQP4) Antibody, IgG by CBA-IFA with Reflex to Titer, Serum (AQP4R), as a replacement.
Effective Date	May 20, 2024
Test Name	Aquaporin-4 Receptor Antibody
Test Code	AQ4R
Replacement Test	Aquaporin-4 (AQP4) Antibody, IgG by CBA-IFA with Reflex to Titer, Serum (AQP4R)

### **New - Replacement Test**

Aquaporin-4 (AQP4) Antibody, IgG by CBA-IFA with Reflex to Titer, Serum AQP4R		
Effective Date	May 20, 2024	
Test Name	Aquaporin-4 (AQP4) Antibody, IgG by CBA-IFA with Reflex to Titer, Serum	
Test Code	AQP4R	
Specimen Requirements		
Minimum Volume	1 mL Serum	
Container	Serum Separator Tube OR Red Top Tube	
Collection	Collect specimen in serum separator tube or red top tube via venipuncture. Centrifuge, transfer serum into plastic aliquot tube and refrigerate.	

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

Adiponectin		ADIPO
Description of Change	Adiponectin (ADIPO) will ave the following changes:  • Accepted tube type • Reference range • Methodology • CPT code	
Effective Date	May 20, 2024	
Test Name	Adiponectin	
Test Code	ADIPO	
CPT Code	83519	
Methodology	Quantitative Radioimmunoassay	
Specimen Requirements		
Minimum Volume	0.5 mL Serum or Plasma	
Container	Serum Separator Tube, Red Top Tube, OR Lithium Heparin Tube	
Collection	Collect specimen in serum separator tube, red top tube, OR lithium heparin t Centrifuge and transfer serum or plasma into aliquot tube and refrigerate.	ube.

### **Discontinued Tests**

Procainamide and NAPA PROC	
Description of Change	Procainamide and NAPA (PROC) will be discontinued by our reference lab and will not be available to order. Please contact Technical Support at 877-402-4221 to discuss testing alternatives.
Effective Date	Immediately
Test Name	Procainamide and NAPA
Test Code	PROC

B-Cell CD20 Expression	CD20E
Description of Change	B-Cell CD20 Expression (CD20E) will be discontinued by our reference lab and will not be available to order. Please contact Technical Support at 877-402-4221 to discuss testing alternatives.
Effective Date	May 20, 2024
Test Name	B-Cell CD20 Expression
Test Code	CD20E

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

### **Technical Support/Customer Care**

## **Specimen Requirement-Updates**

Parvovirus B19, Qual PCR		NORVS
Description of Change	<ul> <li>Update to Specimen Requirements:</li> <li>EDTA Plasma is now the only accepted specimen type for this test.</li> <li>Minimum Volume: 1 mL EDTA Plasma</li> <li>Container: Lavender Top EDTA Tube</li> </ul>	
Effective Date	Immediately	
Test Name	Parvovirus B19, Qual PCR	
Test Code	PARPR	

Norovirus 1/2, PCR		NORVS
Description of Change	<ul> <li>Update to Specimen Requirements:</li> <li>Testing now requires room temp Para-Pak Culture and Sensitivity coll container OR Cary-Blair</li> <li>Container: Cary-Blair or Para-Pak Culture and Sensitivity Media</li> <li>Transport at ROOM TEMPERATURE</li> </ul>	ection
Effective Date	Immediately	
Test Name	Norovirus 1/2, PCR	
Test Code	NORVS	

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

HNL Lab Medicine is now offering the following tests with our in-house services with an improved turn-around-time.

The improvements in our assay capabilities enable us to quickly cater to the needs of our community and the patients we care for.

### **Updated Tests-Immunosuppressive Drugs**

Description of Change	With updated methodology and impany the launch of our first in-region in-house to better serve our patient	on stem cell transplant program, b	
Effective Date	Immediately		
	TEST NAME	TEST CODE	
	CYCLOSPORINE	CYCLS	
	SIROLIMUS	SIROL	

### **Updated Tests-Fecal Assays**

Description of Change	The improved turnaround time on these assays will aid providers in better diagnosing intestinal inflammation.		
Effective Date	Immediately		
	NEW TEST NAME	NEW TEST CODE	PREVIOUS TEST CODE
	ELASTASE, FECAL	SELAS	SPANE
	CALPROTECTIN, FECAL	CALPR	FCALP

#### Additional Information

If you have additional questions regarding this tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

# Microbiology Culture Updates

### **Discontinued Tests**

Culture, Neisseria gonorrhoeae (GC Screen)		
Effective Date	Immediately	
Alternative	Culture, Genital (GE)	
	<ul> <li>Ordering of routine genital cultures is rarely sufficient or appropriate as a standalone order and is only indicated for some genital infections.</li> </ul>	)
	<ul> <li>Commonly encountered pathogens such as Chlamydia trachomatis, Neisseria gonor rhoeae, Mycoplasma genitalium, or S. agalactiae (group B streptococcus for prenata screening) should be ordered using designated test codes for detection by nucleic acid amplification. Enrichment culture is required for the recovery of GBS, so the GE culture should not be utilized for this purpose.</li> </ul>	al
	<ul> <li>While culture has lower sensitivity than NAAT, it is indicated in some clinical situation or specimen types without available NAAT testing. If genital culture is submitted, it will be screened for relevant genital pathogens including N. gonorrhoeae. Given the minimal use of culture-based screening, the N. gonorrhoeae specific culture is being discontinued. Please order the Genital Culture if needed.</li> </ul>	

Culture, Genital, Fungu	s FGE
Effective Date	Immediately
Alternative	Yeast Culture (YCUL)
	<ul> <li>Cultures for the targeted recovery of yeast specifically are not often warranted but may be used to aid in the diagnosis and treatment of specific infections caused by yeast, such as vulvovaginitis or thrush.</li> </ul>
	<ul> <li>Please note that yeast can be routinely recovered from bacterial cultures and will be identified based on criteria for the source and other recovered organisms. Yeast spe- cific cultures should only be ordered when the causative agent is highly suspected to be yeast, or the targeted recovery and identification of yeast is warranted regardless of site or specimen type.</li> </ul>
	<ul> <li>Historically, two culture orders have been used for recovery of yeast, one for genital specimens and one for other specimen types. To eliminate excess codes and order- ing confusion, the genital specific culture will be eliminated. Please order the Yeast Culture if needed.</li> </ul>
	This culture is handled in a manner specific for the recovery of yeast, if other filamentous fungi are suspected, a Fungal Culture (MYR or MYD) should be ordered.

Culture, Tissue, Quantitative	
Effective Date	Immediately
Alternative	Culture, Tissue or Culture, Aerobic and Anaerobic (TI or AN)
	<ul> <li>Quantitative tissue cultures are infrequently ordered and will be discontinued in favor of routine, semi-quantitative cultures.</li> </ul>
	<ul> <li>While some laboratories continue to offer quantitative cultures, clinical evidence demonstrates that the density and diversity of bacteria present across a wound varies dramatically. Additionally, the method of collection and processing can vary greatly leading to inconsistent results with quantitative cultures.</li> </ul>

### **Best Practice Update**

### Proper Collection and Ordering of Anaerobic Cultures

- Wherever possible anaerobic cultures should not be collected on swabs. Use of swabs promotes the collection of
  more superficial specimens that decrease the chances of recovering pathogens and increase the recovery of normal
  microbiota. Please submit an aspirate or tissue specimen wherever possible.
- The following sites have normal anaerobic flora and will not be accepted for routine anaerobic culture throat and
  respiratory specimens, skin and superficial wounds, ulcer surfaces, urine, drainage collected into contaminated devices,
  specimens from the ear canal or outer ear. In the event culture of these sites is warranted the HNL Lab Medicine
  Microbiology Department should be notified to discuss the proper site and method of collection. Cultures from these
  sources may be credited and referred to an aerobic culture.

#### **Additional Information**

If you have additional questions regarding these tests, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

Congenital CMV, Saliva	CCMVB				
Effective Date	Tuesday, May 21, 2024				
Description of Change	The test methodology for the Congenital CMV Saliva Assay (test code: CCMVB) is undergoing enhancements to improve sensitivity and specificity. As part of this update, the collection device will be upgraded from a dry swab to a swab submitted in Universal Transport Media (UTM).				
Collection Device					
<b>OLD DEVICE:</b> FLOQswab in dry tube		NEW DEVICE: Universal Transport Media (UTM)			
See of Second	Some of the control o				

#### **Additional Information**

If you have additional questions regarding this test, please contact Technical Support between the hours of 8 a.m. and 4:30 p.m. For general questions, Customer Care is available to assist at any time.

#### **Technical Support/Customer Care**

# **GENERAL INFORMATION**

### **HNL Lab Medicine Unveils Lifesaving Cellular Therapy Laboratory**

We are proud to announce the grand opening of a state-of-the-art **Cellular Therapy Laboratory**, made possible by a generous donation from the Hall family. Designed to meet the increasing demand for personalized medicine and lifesaving therapies, the Tom and Karin Hall Cellular Therapy Laboratory is equipped with the latest technologies and staffed by a team of highly skilled experts.

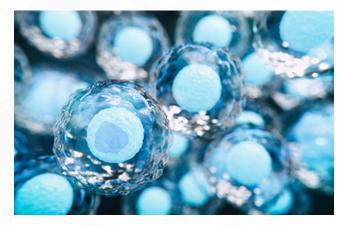
The laboratory will focus on cellular therapy applications that were unavailable in the Lehigh Valley area. Hematopoietic stem cell transplant (HSCT) and cellular therapy (CT) are critical tools in the treatment of hematologic cancers; yet only one third of patients who need transplants receive them. Limitations to accessing these therapies include availability of physicians with expertise, facilities with CT labs, and clinical programs capable of supporting the complex needs of patients.



"There is a need for lengthy inpatient stays and frequent outpatient visits during treatments," said Dr. Elsie Lee, Chief of Transfusion Services. "In the Lehigh Valley, with a population of approximately 1 million people, no HSCT/CT center exists within a 50-mile radius. Instead, patients are referred to centers in Hershey, Philadelphia, and New York. Aside from the physical, mental, and socio-economic impacts of a cancer diagnosis, the need to travel takes a toll on vulnerable patients and places stress on their loved ones and support systems."

The creation of a comprehensive HSCT/CT program will facilitate health equity by removing these barriers. Instead of making long trips with protracted stays requiring lodging, patients will be able to access care closer to home. "An experienced, multidisciplinary team of <a href="https://example.com/hNL Lab Medicine">HNL Lab Medicine</a> and Lehigh Valley Health Network (LVHN) colleagues will be available to provide

comprehensive care for patients with hematologic cancers.



"With the generosity and support of the Hall family, and in close collaboration with our LVHN colleagues, we have been able to build and equip this brand-new laboratory. HNL Lab Medicine has aligned with LVHN to create a clinical program, collection center, and cellular therapy laboratory. In doing so, we will be able to perform apheresis collections, stem cell processing, and lifesaving treatment for patients in the Lehigh Valley."

The opening of the Tom and Karin Hall Cellular Therapy Laboratory reaffirms <a href="HNL Lab Medicine">HNL Lab Medicine</a>'s commitment to innovation, scientific excellence, and patient-centered care.

For more information about the new laboratory, visit  $\underline{\textbf{hnl.com}}$ .

## **GENERAL INFORMATION**

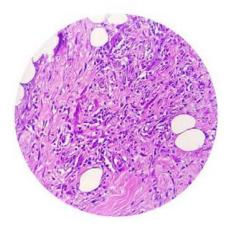
Case Study:

# **HNL Lab Medicine Supports Research and Development in Dermatology**



### **Background:**

In December, Dr. Sigrid Blome-Eberwein, a specialist in trauma/plastic surgery at Lehigh Valley Health Network (LVHN), approached HNL Lab Medicine seeking assistance with a dermatology study she was conducting. Dr. Blome-Eberwein, collaborating with scientists from the National Institutes of Health (NIH), had secured grant funding for her research project. Her study focused on the treatment of burn scars using skin substitutes and required detailed histopathological analysis of biopsy samples.



### **Challenge:**

Dr. Blome-Eberwein's study aimed to evaluate the long-term outcome after skin substitutes in treating burn wounds caused by various sources such as fire, electrical accidents, and scalding. She needed comprehensive histological data from biopsy samples taken at least 2 years after the application of the skin substitute. Each patient's dataset required a range of histological stains, including unstained slides, H&E, CD45, Verhoeff's EVG, and Masson's Trichrome. As the study was solely for research purposes, none of the cases were available in HNL Lab Medicine's LIS CoPath system, necessitating manual labeling of slides and cassettes.

### **Solution:**

HNL Lab Medicine collaborated closely with Dr. Blome-Eberwein to meet the specific requirements of her research study. We processed the biopsy specimens and meticulously prepared up to 30 slides per patient, ensuring each slide met the necessary staining criteria. Despite the absence of cases in the CoPath system, our team efficiently labeled the slides and cassettes by hand to maintain accuracy and organization.



#### **Conclusion:**

HNL Lab Medicine's collaboration with Dr. Blome-Eberwein exemplifies our commitment to advancing medical research through precise and reliable laboratory services. By providing tailored histopathological analysis and exceptional customer support, we contribute to the success of research projects aimed at improving patient care and outcomes. Our ability to adapt to the specific requirements of research studies underscores HNL Lab Medicine's position as a trusted partner in the medical community, driving innovation and progress in healthcare.

#### **Outcome:**

Dr. Blome-Eberwein received two complete sets of slides from HNL Lab Medicine in time for a conference she attended in January. The quality of the histological analysis provided by HNL Lab Medicine was instrumental in the success of her presentation at the conference. Dr. Blome-Eberwein expressed her satisfaction with the work performed by HNL Lab Medicine, highlighting the crucial role it played in advancing her research objectives.

### Impact:

The successful collaboration with Dr. Blome-Eberwein not only demonstrated HNL Lab Medicine's capability in supporting research and development projects but also garnered positive feedback, leading to increased interest from colleagues outside of the network. The endorsement from Dr. Blome-Eberwein and the resulting demand from her colleagues highlight **HNL Lab Medicine's reputation** for delivering high-quality histopathological services tailored to the unique needs of research initiatives.

## **GENERAL INFORMATION**

### **Enhanced Patient Identification Procedure**

At HNL Lab Medicine, we are committed to ensuring the highest standards of security and accuracy in all aspects of our services. As part of our ongoing efforts to enhance patient care and safety, we are reaching out to inform you of an important update to our patient identification procedure, effective immediately.

Our phlebotomists will continue to verify the patient's name and date of birth (DOB) before proceeding with any blood draws. However, to further strengthen our protocols, we have implemented a new patient identification requirement before performing venipuncture.

Patients who cannot identify themselves verbally must be visually identified by the clinical or nursing staff present. To facilitate this process, we are introducing a slight change: clinical or nursing staff who visually identify a patient in such instances will be asked to initial the patient's requisition form. This additional step ensures an extra layer of security and accuracy, mitigating the risk of any potential errors. By incorporating the verification of patient identity by multiple healthcare professionals, we aim to safeguard the integrity of our services further and uphold the highest standards of patient care.

Should you have any questions or concerns about this new requirement, please do not hesitate to contact our customer service team at 877-402-4221.

### **Billing Phone Number Change**

We're excited to announce a recent change aimed at enhancing communication for our patients and clients. Previously, all billing-related calls werewhen reaching out to our Billing department at 484-425-5917, calls were directed through the Teams call tree options. However, effective April 22nd, 2024, all calls to this number have been redirected to our Customer Care general phone line. Additionally, we've seamlessly integrated Billing options into the existing Five9 call tree system.

### **Simplify Lab Testing for your Patients with HNL Lab Tests Direct**

We understand that providing the best care for your patients is your priority, and we're committed to being your laboratory partner in ensuring that every step of their healthcare journey is effective and financially sound. We've noticed that in some instances, certain lab tests, like Vitamin D screenings, are being requested by patients without medical necessity, which unfortunately leads to non-payment of insurance.

To tackle this challenge head-on, we're excited to introduce you to **HNL Lab Test Direct**, a self-ordering platform tailored to simplify your patients' lab test ordering process. With HNL Lab Test Direct, your patients gain access to a comprehensive array of lab tests via the user-friendly interface of **HNLLabTestsDirect.com**. This empowers them to make informed decisions about their health while ensuring that every test ordered aligns with medical necessity criteria.

Moreover, patients can seamlessly designate their preferred healthcare provider to receive test results directly through the platform, facilitating swift communication and ensuring continuity of care. By embracing HNL Lab Test Direct and adhering to medical necessity guidelines, we can help alleviate some of the unnecessary financial strains on your practice and your patients.

# **Change in Streck Cell-free BCT for NIPT/NIPS Specimen Collection**

#### Effective immediately, the Streck Cell-free BCT utilized for this purpose has changed.

The previously used black/tan stopper has been discontinued and replaced with a solid tan stopper. This change, after a meticulous and thorough validation by Streck, has been implemented to ensure that it does not compromise the quality and quantity of the stabilized cell-free DNA required for accurate testing.

While we will immediately implement this change, we will continue to use the current stock of tubes with the previous stoppers until they are depleted.

Should you have any questions, please do not hesitate to reach out to our customer service team at 877-402-4221.

What's Changing on the Cell-Free DNA BCT Tube



# **Commitment to High-Quality Care Amid Healthcare Insurance Changes: Partnering with Cigna for Seamless Patient Support**

In an ever-evolving healthcare environment, we recognize the critical role you play in delivering continuous, high-quality care to your patients. Recent shifts in the healthcare insurance landscape may have raised concerns regarding insurance coverage and the availability of comprehensive care options for your patients.

We would like to take this opportunity to remind our esteemed healthcare partners that HNL Lab Medicine remains a committed ally in providing accessible, top-tier healthcare services in partnership with Cigna Insurance. Our dedication to facilitating seamless care and support for you and your patients remains unwavering.

For patients looking for a lab they can trust, HNL Lab Medicine will deliver. Our facilities and services are fully accessible to all patients covered by Cigna insurance.

Thank you for placing your trust in HNL Lab Medicine for your healthcare needs. Together, we can continue to provide uninterrupted, high-quality care to your patients.



# **GENERAL INFORMATION**

### **HNL Genomics: Noninvasive Prenatal Screening (NIPS)**

#### **Empowering Expecting Parents**

Noninvasive prenatal screening (NIPS) can give expecting mothers the knowledge needed to make medical decisions regarding pregnancy, including the decision to pursue more invasive testing methods. In addition to being able to identify the sex of the fetus, NIPS is the best option for expecting patients in predicting the likelihood of certain chromosome aneuploidies such as:

- Down syndrome (trisomy 21)
- Edwards syndrome (trisomy 18)
- Patau syndrome (trisomy 13)
- Sex chromosome aneuploidies

For more details about the test method, turnaround time and shipping visit our test directory.



NIPS is now endorsed by the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine for all patients regardless of maternal age.

#### **Benefits of NIPS**

- Greater than a 99% detection rate for Down syndrome
- NIPS only requires 1 blood test for results
- NIPS can be completed as early as 10 weeks into pregnancy
- Results are typically available for order providers within 4-6 days
- Sneak Peek of Baby's Sex: Patients have the option to learn about their baby's sex very early into pregnancy

Note: NIPS is a screening test; it does not provide a diagnosis.

NIPS Provider Information →

#### **Comparing Noninvasive Prenatal Screening & Maternal Serum Screening**

NIPS, which uses cell-free DNA testing, is currently the most sensitive and specific screening test for common fetal aneuploidies involving chromosomes 21, 18, 13, X, and Y with optional fetal sex detection. Traditional maternal serum screening (MSS) typically screens for only trisomy 21 and trisomy 18. In addition to being a more accurate test, NIPS can be performed earlier in pregnancy than most MSS options and requires only a single maternal blood draw. Here's a table that can help you decide which prenatal genetic screening option is the best for your patient.

Screening Approach	Gestational Age of Collection	Fetal Sex Detected	Trisomy 21 Detection Rate	Number of Collections Required
NIPS	10 Weeks to Term	Yes	99%	1
Quad Screening	15-22 Weeks	No	81%	1
Integrated Screening	10-13 Then 15-22 Weeks	No	96%	2
Sequential Screening	10-13 Then 15-22 Weeks	No	95%	2

### PATIENT SERVICE CENTER UPDATE

#### **RELOCATED:** Broad Street Hazleton – Patient Service Center

HNL Lab Medicine has relocated our Hazleton Patient Service Center (PSC) at 550 West Broad Street to the Grand Central Shopping Center, situated at **70 S. Locust St., Hazleton, PA 18201**. In addition to the PSC on Diana Lane, the Hazleton PSC at the Grand Central Shopping Center is a significant step towards providing you with even more convenient and accessible healthcare services.

#### **Pediatric Specialty Location**

At HNL Lab Medicine, we are dedicated to meeting the unique healthcare needs of every member of your family. With that in mind, our new Hazleton PSC at the Grand Central Shopping Center will be a pediatric specialty location. This means that we will be offering specialized diagnostic testing services tailored specifically for children. We understand the importance of providing comprehensive healthcare solutions for our little ones, and this move is a testament to our commitment to their well-being.



#### **Extended Hours for Your Convenience**

We understand that life can be busy, and healthcare should be accessible when you need it. That's why our new Hazleton PSC will operate with extended hours to better accommodate your schedules:

Monday - Friday: 7:00 AM - 5:00 PM | Saturday: 8:00 AM - 12:00 PM

We believe that these extended hours will provide you with the flexibility to access our services at a time that suits you best.

#### **Same Exceptional Service**

Although our location has changed, one thing remains constant – our commitment to delivering exceptional service and accurate results. Our team of experienced and compassionate healthcare professionals is ready to continue meeting the diagnostic needs of our community.

#### **COMING SOON:** Gilbertsville - Patient Service Center



Visit us in GILBERTSVILLE Summer 2024

Gilbertsville LVHN Health Center

1107 Grosser Road | Gilbertsville, PA 19525