



**ALLINA MEDICAL LABORATORIES
FEBRUARY 2008
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ALLINA MEDICAL LABORATORIES UPDATE

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BILLING AND COMPLIANCE

❖ 2008-09 Service Agreements and 2008 Fee Schedule Delivery

Allina Medical Laboratories 2008-2009 Service Agreements and 2008 Fee Schedules (effective 3/1/2008) have been mailed to clients in separate mailings.

Please have your Service Agreement reviewed and signed by the appropriate person within your facility and return it to AML utilizing the envelope provided at your earliest convenience.

❖ Fed Ex Specimen Shipping Policy Change

As stated in our 2008-2009 Service Agreement, effective April 1st, AML will not cover fees for shipping or mailing specimens. If you are shipping specimens to AML using methods other than a routine courier pickup provided by AML, you must bear any such shipping or mailing fees and ensure that such fees are billed to your own account.

AML will continue to provide packaging and FedEx mailers for ambient shipment of Factor X Chromogenic specimens, however, the airbill should be completed to indicate "Bill Shipper" and your own account number documented.

CHEMISTRY

❖ Herpes simplex Type Specific Testing Update

On Tuesday February 19, 2008 Allina Medical Laboratories began performing **Herpes Simplex Type Specific I & II IgG (HTS)** testing in-house.

Herpes Simplex virus has been characterized into two distinct serotypes: HSV-1 and HSV-2. HSV-1 is generally associated with infection in the tongue, mouth, lips, pharynx and eyes, whereas HSV-2 is primarily associated with genital and neonate infection. In the U.S., most young sexually active persons with genital ulcers have genital herpes. Genital ulcers have been associated with an increased risk for HIV infection. Genital herpes is usually caused by HSV-2, with the minority of first genital episodes (5 to 30%) caused by HSV-1. Many cases of genital herpes are transmitted by persons who are unaware that they are infected or do not recognize subtle or atypical symptoms.

Specimen requirements and test information follow:

Test Name	HSV Type Specific IgG Antibodies
Test # / Ultra Code	2784 / HTS
Collect	1.0 ml Serum
Container	Serum Separator Tube (SST)
Processing	Spin
Transport	Refrigerated
Stability	2 Days when stored at 2 - 8°C
Alternate Names	HSV-1, HSV-2
Performing Lab	AML
Days Set up	Tuesday, Friday
Expected TAT	3 - 4 Days
Reference Range	< 0.90 Index Value
Methodology	EIA
Critical Values	None
CPT Code	86695, 86696
List Price	\$48.40

If you have any questions in regards to this information, please contact your AML Account Representative.

❖ Ca 19-9 Testing Brought In-House

On January 22, 2008 Allina Medical Laboratories (AML) began performing CA 19-9 assays in house. Previously, this test had been a send out test to Quest Laboratories. The CA 19-9 assay performed by AML is the same method as that used by Quest (Chemiluminescence Immunoassay (ICMA) on the Siemens Centaur). This assay shows an average mean negative bias of 2% when compared to Quest Laboratories but individual samples can show a greater bias. Clinicians using CA 19-9 as a tumor marker to closely monitor patients may wish to consider rebaselining if the result received does not correspond to previous results. In order to request rebaselining on a patient, please call ANW Chemistry at 612-863-4077.

CA 19-9 has a role as tumor marker in the monitoring of patients with cancer, especially pancreatic, gallbladder, gastric, bile duct and colorectal cancers. Patients must possess the ability to express the Lewis blood group antigen. Patients unable to express the Lewis blood group antigen will be unable to produce the CA 19-9 antigen even in the presence of proven malignancy.

Test Name:	CA 19-9
Test Number:	259/C19
Collect:	1 ml Serum
Alternate Collect:	1ml serum from Plain Red /separated and sent in Plastic Transfer Vial
Container:	Serum Separator Tube (SST)
Processing:	Spin
Transport/ Stability:	Refrigerated: 2 Days; Frozen : 1 month
Alternate Names:	CARBOHYDRATE ANTIGEN 19-9
Days Set Up:	M - Sa
Expected TAT:	2 Days
Ref. Ranges:	0 - 35 U/ml
Collection/ Processing Details:	Reject: Plasma specimens of if Grossly Hemolyzed. (Usually Gastric and Pancreatic Marker) Should not be used as a screening test.

Please direct any questions to Jorge Ferreiro, M.D. at 651-241-8779.

CONTINUING EDUCATION

❖ **Phlebotomy: The Complete Picture**

On March 26, 2008, AML along with the Point of Care Testing at Mercy & Unity Hospitals will be holding a Phlebotomy Seminar on the Mercy Hospital Campus in Coon Rapids.

This seminar, presented by Dennis J Ernst, MT(ASCP) and Amy Tolbert, PhD, will address important issues on phlebotomy technique, procurement of high quality specimens, diversity and multicultural issues in the work environment.

Brochures with additional course content information and registration materials will be mailed to all clients and past attendees. The brochure is also available on under the Continuing Education link on our website at www.allina.com/medicallaboratories.

CUSTOMER SERVICE

❖ **Telephone/Verbal Order Policy**

Telephone/Verbal orders should be used only in emergency patient care situations. It is a CMS (Medicare) requirement that all verbal orders for laboratory work are followed up with a written or electronic order within 48 hours.

If a telephone/verbal order is received by Allina Medical Laboratories, a form will be completed by the staff person to document the order. The caller will be asked to provide information necessary to initiate the test request and the AML staff person will then read the information back to the caller to verify accuracy. They will then inform the caller that they must submit written or electronic orders for the testing within 48 hours of the call. The completed form will be faxed to the ordering physician for signature and return to AML for documentation of written order.

❖ **Communication of Laboratory Results to Patients**

It is Allina policy that only the holder of the medical record can give results to a patient. This is to ensure that results are reviewed by a physician before being given to the patient. When a specimen is referred from a clinic to AML for testing, AML does not hold the medical record, the clinic does.

Please remember that AML staff is unable to release results to a patient. If a patient is in need of a copy of results, they should be referred to your clinic and not to AML.

❖ **Metro Hospital Laboratory Reception Update**

Effective May 1, 2008, AML metro hospital sites (Abbott Northwestern, Mercy, United and Mercy) will not longer be open for reference laboratory specimen collection on Sundays and Holidays.

Please also be aware that it is AML policy that orders for testing will not be accepted from out of state physicians unless they are co-signed by a physician from within Minnesota.

Kit draws from Mayo Medical Laboratories, the University of Minnesota and established AML reference laboratory clients will be collected, processed and shipped by AML. Kits draws from laboratories other than those listed can not be accommodated.

Any other miscellaneous requests **MUST** be preapproved by a manager. Please contact AML Customer Service at 612-863-4678 prior to sending patients to any Allina metro site with any questions to verify that we can provide the service.

CYTOLOGY

❖ **Thin Prep Specimen Packaging Reminder**

When packaging Thin Prep Pap vials for transport to AML, It is important for staff to make sure that the cap of vial is replaced tightly. When securing the cap, try to line up the small line on the lid with the small line on the vial.

If the cap is not tightly screwed onto the vial, the contents of the vial may leak into the BioHazard specimen bag. The vial contains a preservative which removes the ink from the patient label that you apply to the vial. Depending on the amount of specimen that leaks, the label can be rendered completely unreadable and the patient's specimen cannot be identified. If this occurs, the specimen will be rejected and will need to be recollected.

MICROBIOLOGY

❖ **Group B Strep Rapid DNA PCR**

New Microbiology Test for Labor & Delivery Patients

Effective Immediately, AML is offering a new Group B Strep Rapid DNA PCR test for Labor & Delivery patients.

The Group B Strep Rapid DNA PCR test provides rapid detection of group B *Streptococcus* (GBS) from vaginal/rectal swab specimens of OB patients at the time of delivery. For women who have no prenatal care, who deliver preterm, or whose 35-37 week GBS culture results are unknown at the time of delivery, intrapartum testing can provide results in time to administer antibiotics before delivery, if needed. The potential impact of this testing is decreased use of unnecessary antibiotics in women not otherwise indicated for prophylaxis, while providing adequate treatment of GBS colonized women and subsequent decreased risk of neonatal sepsis and meningitis.

This test is for Labor and Delivery patients. The screening of OB patients at 35-37 weeks will continue to be done by Vaginal/Rectal OB Strep culture (6568/VRS).

Test Name:	GROUP B STREP RAPID DNA PCR
Test Number:	8127/GBS
Collect:	Vaginal/rectal on same swab
Alternate Collect:	None
Container:	Copan Venturi Transystem - Double Transport Swab
Processing:	Submit Entire Specimen
Transport/Stability:	Ambient within 24 hours; Refrigerated within 6 days
Alternate Names:	GBS PCR, Rapid GBS
Performing Lab:	AML - MI
Days Set Up:	M - Su
Expected TAT:	Stat: 2.5 hours
Ref. Ranges:	NA
Collection/	
Processing Details:	Primarily for Labor & Delivery patients.
Method:	Real Time PCR
CPT Codes:	87653

Collection Instructions:

- 1) Excessive secretions or discharge **MUST** be wiped away from the vaginal/rectal area. Use of gel or lubricant before collection or failure to remove excessive secretions or discharge may cause the test to abort and require a recollect.
- 2) Using the Copan Venturi Transystem double swabs, sample secretions from the mucosa of the lower third of the vagina. Rotate the swabs 3 times to ensure uniform sampling of both swabs.
- 3) Using the same swabs, insert 2.5 cm beyond the anal sphincter and rotate to sample anal crypts. Place swabs back in the tube.

Unacceptable: other collection swabs, vaginal only, rectal only, cervical, other sources

SENDOUTS

❖ Discontinuation of Select Vendor Services

As of March 1 2008, Allina Medical Laboratories (AML) will no longer use Athena and Prometheus Laboratories as reference laboratories. AML will no longer honor requests testing to these specific laboratories.

This decision is made due to:

- Poor third party reimbursement for these testing - the typical reimbursement is 20% of what these laboratories charge.
- Other healthcare systems have discontinued doing business with these laboratories.
- Athena will bill insurance if clinics send specimens directly to them. Please refer to their website: <http://www.athenadiagnostics.com/content/ordering/>
- Prometheus Laboratories will bill patients insurance if clinics send specimens directly. Please refer to their web site: <http://www.prometheuslabs.com/>

Please contact Dr. Chris Chong at 612-262-5013 with any questions regarding this change.

❖ Oxygen Dissociation, P50 Unavailable

We have received notice from Mayo Medical Laboratories (MML) that at this time, they are unable to perform this test. There is no foreseen date for resumption of testing at MML, and we have been unable to locate an alternate laboratory to perform the testing. Specimens for Oxygen Dissociation, P50 testing should not be collected until you receive further notice indicating that MML is able to resume testing.

❖ Pyruvate (446/PY) Specimen Collection Reminders

In an effort to decrease the number of cancelled pyruvate tests and subsequent redraws for patients, Mayo Medical Laboratories (MML) has provided the following reminders of the more critical points of specimen collection for this test:

Phlebotomists must be aware of the following:

- MML's special collection tube containing 2/5ml of 6% perchloric acid must be used. These tubes are pre-weighed; any loss of perchloric acid will render the tube unsatisfactory for use. Do NOT use the tube if the sample label is initially green (indication of leakage during transit), the cap is loose or the expiration date has been exceeded. If any of these occurs, discard the tube and select another.
- Draw a minimum of 1.0ml of blood directly into a syringe (no anticoagulant). Carefully twist to remove the cap of the special collection tube and **immediately** add **exactly** 1.0ml of blood from the syringe.
- Cap the collection tube **tightly**; shake the tube vigorously to mix. If there is any loss of the mixture, redraw the patient using a new tube. If the sample label turns green, or any spillage occurs, repeat the entire collection.
- DO NOT place any labels over the number on the vial, as this number is used in the calculation of the result.
- Transport the specimen at refrigerated temperatures.

Pyruvate, in conjunction with lactic acid determined from a blood specimen collected at the same time, is used to assess the L/P ratio. The L/P ratio is considered a helpful (not diagnostic) too. Pyruvate levels alone have little value.

The above collection information is also available in the AML on line Collection Manual at www.allina.com/medicallaboratories.

❖ Acetylcholine Antibodies Update

Other than Acetylcholine Binding Antibody (AML Test code ABD), Mayo Medical Laboratories, our referral laboratory, does not offer individual Acetylcholine antibodies.

If multiple antibodies are desired, MML offers the following Myasthenia Gravis panel:

Test Name:	MYASTHENIA GRAVIS EVALUATION
Test Number:	8072/MGE
Collect:	3.0 ml Serum - Plain Red
Peds Collect:	2.0 ml Serum - Plain Red
Alternate Collect:	SST
Container:	MAYO - Screw Cap Transfer Vial
Processing:	Spin and Separate
Transport/Stability:	Refrigerated: Ambient: OK; Frozen: OK
Alternate Names:	AChR; Muscle End-Plate antibodies; Myoid Antibodies; Striational Antibodies
Performing Lab:	Mayo Medical Labs (83370)
Days Set Up:	M - F (varies)
Expected TAT:	3 - 7 Days
Ref. Ranges:	See Report
Collection/ Processing Details:	If SST is drawn please transfer to screw cap vial before transport. Reflex tests include: AChR Ganglionis Neuronal Antibody; ACh receptor blocking antibody and CRMP- IgG is appropriate.
Method:	RIA; EIA and Western Blot
CPT Codes:	83519-90 x2; 83520-90

This initial panel for Myasthenia Gravis includes both the Binding and the Modulating antibodies. In addition the Striational Antibody is measured.

❖ Testosterone Specimen Reminder

It has been brought to our attention that we are seeing an increasing number of specimen rejections for Total & Free Testosterone testing due to insufficient specimen quantity.

When submitting a specimen for Total & Free Testosterone, you MUST draw a dedicated 8.5 ml Plain Red Top for this test. The serum from the tube CANNOT be shared with any other test requests as this test requires 2.0 ml of serum. One 8.5 ml Red Top will yield approximately 2.5ml of serum.

Test Name: TESTOSTERONE, TOTAL + FREE
Test Number: 646/TTF
Collect: 3.0 ml Serum - Plain Red
Peds Collect: 2.0 ml Serum - Plain Red
Container: MAYO - Screw Cap Transfer Vial
Processing: Spin and Separate
Transport/Stability: Refrigerated
Alternate Names:
Performing Lab: Mayo Medical Labs (8508)
Days Set Up: M - Sa
Expected TAT: 3 -4 Days
Ref. Ranges: See Report
Collection/
Processing Details: Spin and Separate. NOTE: Serum Separator Tubes are NOT Acceptable. Include patients Age and Sex
Method: Equilibrium Dialysis; LC-MS/MS
CPT Codes: 84402-90 84403-90

❖ Topiramate Specimen Transport Change Notification

We have received notice from Mayo Medical Laboratories that due to a change in temperature requirements by the test kit manufacturer, effective immediately, the preferred transport temperature for Topiramate, Serum (2922/TOP) has been changed from refrigerated to *Frozen*. Refrigerated specimens will only be acceptable if received at Mayo within 24 hours.

The AML on line Collection Manual, located at www.allina.com/medicallaboratories, has been revised to reflect this new transport temperature.

If you have any questions regarding this change, please contact your AML Account Representative.

❖ Syphilis Testing

Syphilis IgG and IgM testing is now available thru Mayo Medical Laboratories.

The standard RPR test will not detect latent or tertiary syphilis - it will detect current untreated cases of syphilis and it will automatically reflex to an FTA sent to the State for Confirmation. If the provider suspects latent or tertiary syphilis, it is recommended that the Mayo - Syphilis IgG & IgM test (7988/SYA) be ordered.

All tests for FTA will require communication with the clinic and provider to determine the correct test to order. FTA alone is no longer available from any vendor - FTA is a confirmation for positive RPR only, and it is an automatic reflex for positive RPR at Allina Medical Laboratories.

Test Name:	SYPHILIS ANTIBODY IGG + IGM
Test Number:	7988/SYA
Collect:	1.0 ml Serum - Plain Red
Peds Collect:	0.5 ml Serum - Plain Red
Alternate Collect:	SST
Container:	MAYO - Screw Cap Transfer Vial
Processing:	Spin and Separate
Transport/Stability:	Refrigerated; Frozen: OK; Ambient: NO
Alternate Names:	Treponema pallidum, T. pallidum; FTA testing not going to MDH.
Performing Lab:	Mayo Medical Labs (84425)
Days Set Up:	M - Sa
Expected TAT:	1 - 2 Days
Ref. Ranges:	IgG & IgM : Negative
Collection/ Processing Details:	Recommended test for LATENT SYPHILIS. Positive tests REFLEX to Rapid Plasma Reagin Test at additional charge. If SST is drawn please transfer to screw cap vial before transport. Read Clinical Test Information for appropriate use of this test.
Method:	EIA and Flocculation
CPT Codes:	86592-90 x2; 86592 -90 (RPR if appropriate)

SUPPLIES

❖ Supply Delivery Tracking Enhancement Initiated

In order to facilitate tracking of supply deliveries, effective immediately, supplies from AML delivered to your office by MedStat couriers will be accompanied by a Supply Delivery Receipt.

MedStat staff will be completing the receipt form with the exception of the recipient Signature/Name line. The person receiving the supplies at your office will be presented with the form and asked for their signature/name acknowledging receipt of the supply delivery. The completed form will be returned to AML by the MedStat couriers.

❖ **New 7ml SST Tubes in Use**

Effective immediately, AML has transitioned from the 5ml (3.5ml draw) Gold Top SST tube to a new 7ml tube which will draw approximately 5ml of whole blood.

When you receive your first shipment of the new tubes please note the following; if you are placing an Ultra label on the tube for specimen identification, please place the label directly under the tube cap, not over the tube label area. Patient management system labels used for specimen identification may be placed anywhere on the tube.

The AML on line supply catalog will be updated to reflect this supply change.

WEB SITE

❖ **CEU Tapes Available for Checkout**

AML sponsors quarterly continuing education presentations in the Twin Cities area. For those unable to attend, we record each presentation and make the videotapes available for viewing.

Upcoming CEU event information as well as a listing of available tapes and a Tape Request Form can be found by clicking on the ***Continuing Education Listings*** link on our website homepage at www.allina.com/medicallaboratories.

HELP US HELP YOU

❖ **Keeping Your Physician List Current**

Please review your AML requisitions on a regular basis to make sure that we are maintaining a complete and accurate physician listing for your clinic. If any updates (removals or additions) are needed, please contact your Account Representative.

THANK YOU FOR CHOOSING ALLINA MEDICAL LABORATORIES! WE VALUE YOUR BUSINESS!

www.allina.com/medicallaboratories