

Effective as of **May 1, 2023**

Additional ordering and billing information

[Information when ordering laboratory tests that are billed to Medicare/Medicaid](#)

[Information regarding Current Procedural Terminology \(CPT\)](#)

Test Number	Mnemonic	Test Name	New Test	Test Name Change	Specimen Requirements	Methodology	Performed/Reported	Note	Interpretive Data	Reference Interval	Component Charting Name	Component Change	Reflex Pattern	Result Type	Ask at Order Prompt	Numeric Map	Unit of Measure	CPT Code	Pricing Change	Inactivation w/ Replacement	Inactivation w/o Replacement
0099408	AL U	Aluminum, Urine (Inactive as of 05/01/23)																			x
2002483	HCV AB	Hepatitis C Virus Antibody by CIA (Change effective as of 05/01/23: Refer to 2010784)																		x	
2007220	ECHINO IGG	Echinococcus Antibody, IgG			x	x			x	x						x	x				
3006254	JCV AB	JC Virus Antibody by ELISA, Serum with Reflex to Inhibition Assay	x																		
3016444	PHOSPHO T	Phospho-Tau/Total-Tau/A Beta42, CSF	x																		

TEST CHANGE

Echinococcus Antibody, IgG

2007220, ECHINO IGG

Specimen Requirements:

Patient Preparation:

Collect: Serum separator tube (SST) or plain red.

Specimen Preparation: Separate serum from cells ASAP or within 2 hours of collection. Transfer 1 mL serum to an ARUP standard transport tube ~~Standard Transport Tube~~. (Min: 0.15 mL) Parallel testing is preferred and convalescent specimens must be received within 30 days from receipt of acute specimens. Mark specimens plainly as acute or convalescent.

Transport Temperature: Preferred transport temp: Refrigerated. Also acceptable: Frozen

Unacceptable Conditions: Contaminated, heat-inactivated, grossly hemolyzed, or severely lipemic specimens.

Remarks:

Stability: After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 monthyear (avoid repeated freeze/thaw cycles)

Methodology: Semi-Quantitative Enzyme-Linked Immunosorbent Assay (ELISA)

Performed: Mon, Thu

Reported: 1-5 days

Note:

CPT Codes: 86682

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Patients with collagen vascular diseases, hepatic cirrhosis, schistosomiasis, and other parasitic infections can produce false-positive results. There is a strong cross-reaction between echinococcosis- and cysticercosis-positive sera.

Seroconversion between acute and convalescent sera is considered strong evidence of recent infection. The best evidence for infection is a significant change on two appropriately timed specimens where both tests are done in the same laboratory at the same time.

Component	Interpretation
Echinococcus Antibody IgG	<p>0-8 U.....Negative: No significant level of Echinococcus IgG antibodies detected. 9-11 U.....Equivocal: Recommend repeat testing in 2-4 weeks with fresh sample. 12 U or greater.....Positive: IgG antibodies to Echinococcus detected, indicating current or past infection.</p>

Reference Interval:

Test Number	Interpretation	Components	Reference Interval
0.0-0.8 IV	Negative--No significant level of Echinococcus IgG antibody detected.		
0.9-1.1 IV	Equivocal--Questionable presence of Echinococcus IgG antibody detected. Repeat testing in 10-14 days may be helpful.		
1-2 IV or greater	Positive--Presence of IgG antibody to Echinococcus detected, suggestive of current or past infection.		
		Echinococcus Antibody IgG	8 U or less

- Deleted Cells
- Inserted Cells
- Inserted Cells

HOTLINE NOTE: There is a numeric map change associated with this test. Refer to the Hotline Test Mix for interface build information.

HOTLINE NOTE: There is a unit of measure change associated with this test. Refer to the Hotline Test Mix for interface build information.

NEW TEST

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JC Virus Antibody by ELISA, Serum with Reflex to Inhibition Assay

3006254, JCV AB

Specimen Requirements:

Patient Preparation:

Collect: Plain red or serum separator tube (SST). Also acceptable: Lavender (K2EDTA)

Specimen Preparation: Transfer 1 mL serum or plasma to an ARUP standard transport tube. (Min: 0.5 mL) Test is not performed at ARUP; separate specimens must be submitted when multiple tests are ordered.

Transport Temperature: Refrigerated. Also acceptable: Room temperature or frozen.

Unacceptable Conditions:

Remarks:

Stability: Ambient: 1 week; Refrigerated: 2 weeks; Frozen: 3 months

Methodology: Enzyme-Linked Immunosorbent Assay (ELISA)

Performed: Varies

Reported: 3-7 days

Note: If antibody result is indeterminate, then a confirmation (inhibition) assay will be added.

CPT Codes: 86711; if reflexed, add 86711

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Reference Interval:

By report

HOTLINE NOTE: Refer to the Hotline Test Mix for interface build information.

NEW TEST

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Phospho-Tau/Total-Tau/A Beta42, CSF

3016444, PHOSPHO T

Specimen Requirements:

Patient Preparation:

Collect: CSF

Specimen Preparation: Transfer 2 mL CSF to an ARUP standard transport tube. (Min: 0.5 mL).

Transport Temperature: Frozen

Unacceptable Conditions: Specimens with cell count greater than 500 erythrocytes/mm³.

Remarks:

Stability: Ambient: 72 hours, Refrigerated: 21 days, Frozen: 4 months

Methodology: Enzyme-Linked Immunosorbent Assay (ELISA)

Performed: Varies

Reported: 7-19 days

Note:

CPT Codes: 83520 x3

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Reference Interval:

Test Number	Components	Reference Interval

HOTLINE NOTE: Refer to the Hotline Test Mix for interface build information.

Inactivations

The following will be discontinued from ARUP's test menu on **May 1, 2023**
Replacement test options are indicated when applicable.

Test Number	Test Name	Refer to Replacement Test
0099408	Aluminum, Urine (Inactive as of 05/01/23)	
2002483	Hepatitis C Virus Antibody by CIA (Change effective as of 05/01/23: Refer to 2010784)	Hepatitis C Virus Antibody by CIA with Reflex to HCV by Quantitative NAAT (2010784)