ARUP LABORATORIES

A nonprofit enterprise of the University of Utah and its Department of Pathology

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0020284	HIV WBLOT	Human Immunodeficiency Virus Type 1 (HIV-1) Antibody Confirmation by Western Blot (Change effective as of 08/28/23: Refer to 2012669)																		x	
0070260	B12B	Vitamin B12 Binding Capacity (Inactive as of 10/02/23)																			x
0080216	CATE PF	Catecholamines Fractionated, Plasma			x	x	x	x	x	x							x				
0080957	CATE PF,EN	Catecholamines Fractionated (Epinephrine, Norepinephrine), Plasma (Change effective as of 10/02/23: Refer to 0080216 in the October Immediate Change Hotline)																		x	
2001613	CROHN PAN	Crohn Disease Prognostic Panel (Change effective as of 10/02/2023: Refer to 3003748)																		x	
2003184	B7	Vitamin B7 (Biotin) (Change effective as of 10/02/23: Refer to 3016932)																		x	

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2006526	HIV AGAB	Human Immunodeficiency Virus (HIV) Combo Antigen/Antibody (HIV-1/O/2) by CIA, with Reflex to HIV-1 Antibody Confirmation by Western Blot (Change effective as of 08/28/23: Refer to 2012674)																		x	
3006111	ST2 SOL	ST2, Soluble (Inactive as of 10/02/23)																			x
3016932	VITA B7	Vitamin B7, Serum or Plasma	x																		

TEST CHANGE

Catecholamines Fractionated, Plasma

0080216, CATE PF

Specimen Requirements:	
Patient Preparation:	Patient should be calm and seated for 15 minutes prior to collection. Alternately, patient may be calm and supine for 30 minutes prior to collection. Drugs and medications may affect results and should be discontinued for 72 hours prior to specimen collection, if possible.
Collect:	Green (sodium or lithium heparin), lavender (EDTA). Collect on ice.
Specimen Preparation:	Specimen should be centrifuged and frozen within one hour (refrigerated centrifuge is preferred but not required). Transfer 34 mL plasma to an ARUP standard transport tubeStandard Transport Tube. (Min: 12.1 mL)
Transport Temperature:	CRITICAL FROZEN. Separate specimens must be submitted when multiple tests are ordered.
Unacceptable Conditions:	SerumEDTA plasma, serum, or urine.
Remarks:	
Stability:	After separation from cells: Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen at -20120 Degrees C: 1 month; Frozen at -70170 Degrees C: 1 year
Methodology:	Quantitative High Performance Liquid Chromatography-Tandem Mass Spectrometry (HPLC)
Performed:	Sun, Tue-Sat
Reported:	1-4 days
Note:	Medications that may interfere with catecholamines and metabolites. include amphetamines and amphetamine-like compounds, alpha-blockers (phenoxybenzamine), beta-blockers (including labetalol), caffeine, calcium channel antagonists, carbidopa, cocaine, ephedrine, levodopa, monoamine oxidase inhibitors, nicotine, pseudoephedrine, theophylline, tricyclic antidepressants, and vasodilators. The effect of drugs on catecholamine results may not be predictable. (N Rifai, ANader,, Andrea R. Horvath, and C. 1955- Wittwer. Tietz Textbook of Clinical Chemistry and Molecular

	Diagnostics. Sixth edition. St. Louis, Missouri: Elsevier, 2018; Table 63.9.) For optimum assessmentresults, patient should be supine for 30 minutes prior to specimen collection. Children, particularly those under 2 years of age, often show an elevated catecholamine response to stress.
CPT Codes:	82384
New York DOH Approval Status:	This test is New York DOH approved.

Interpretive Data:

Small increases in catecholamines (less than 2 times the upper reference limit) are usually are the result of physiological stimuli, drugs, or improper specimen collection. Significant elevation of one or more catecholamines (2 or more times the upper reference limit) can result from is associated with an increased probability of a neuroendocrine tumor. Measurement of plasma or urine fractionated metanephrines should be used for assessment of suspected pheochromocytoma or paraganglioma.

Lowerprovides better diagnostic sensitivity than measurement of catecholamines.

Higher catecholamine concentrations are observed in specimens collected from supineupright or standing adults.

To convert to picograms per milliliter (pg/mL), multiply the reported concentration for dopamine Epinephrine may be increased by 0.153, epinephrine by 0.163, andapproximately 20 percent; norepinephrine by 0.169

Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).up to 700 pg/mL; dopamine, unchanged.

Supine Reference Intervals	
Dopamine	Less than or equal to 240 pmol/L
Epinephrine	Less than or equal to 265 pmol/L
Norepinephrine	680-3100 pmol/L

Reference Interval:

Test Number	Components	Reference Interval		
	Epinephrine			
		18 years and older ~~Age~~	~~Reference Interval (pg/mL)~~	
		Seated (15 min)~~2-10 days 11 days-3 months 4-11 months 12-23 months 24-35 months 3-17 years 18 years and older~~	Less than or equal to 330 pmol/L~~36-400 55-200 55-440 36-640 18-440 18-460 10-200~~	
	Norepinephrine			
		18 years and older~~Age~~	~~Reference Interval (pg/mL)~~	
		Seated (15 min)~~2-10 days 11 days-3 months 4-11 months 12-23 months 24-35 months 3-17 years 18 years and older~~	1050-4800 pmol/L~~170-1180 370-2080 270-1120 68-1810 170-1470 85-1250 80-520~~	
	Dopamine	~~2 days and older: 0-20 pg/mL~~		
		18 years and older		
		Seated (15 min)	Less than or equal to 240 pmol/L	

Supine

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

Click for Pricing

Vitamin B7, Serum or Plasma

3016932, VITA B7

Specimen Requirements:	
Patient Preparation:	
Collect:	Plain red or 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:	Frozen
Unacceptable Conditions:	Separator tubes
Remarks:	
Stability:	Ambient: 72 hours; Refrigerated: 72 hours; Frozen: 2 weeks
Methodology:	Quantitative Liquid Chromatography-Tandem Mass Spectrometry
Performed:	Varies
Reported:	3-10 days
Note:	
CPT Codes:	84591
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.

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Inactivations

The following will be discontinued from ARUP's test menu on October 2, 2023
Replacement test options are indicated when applicable.

Test Number	Test Name	Refer to Replacement Test
0020284	Human Immunodeficiency Virus Type 1 (HIV-1) Antibody Confirmation by Western Blot (Change effective as of 08/28/23: Refer to 2012669)	Human Immunodeficiency Virus Types 1 and 2 (HIV-1/2) Antibody Differentiation, Supplemental, with Reflex to HIV-1 Quantitative NAAT, Plasma (2012669)
0070260	Vitamin B12 Binding Capacity (Inactive as of 10/02/23)	
0080957	Catecholamines Fractionated (Epinephrine, Norepinephrine), Plasma (Change effective as of 10/02/23: Refer to 0080216 in the October Immediate Change Hotline)	Catecholamines Fractionated, Plasma (0080216)
2001613	Crohn Disease Prognostic Panel (Change effective as of 10/02/2023: Refer to 3003748)	Inflammatory Bowel Disease Differentiation Panel (3003748)
2003184	Vitamin B7 (Biotin) (Change effective as of 10/02/23: Refer to 3016932)	Vitamin B7, Serum or Plasma (3016932)
2006526	Human Immunodeficiency Virus (HIV) Combo Antigen/Antibody (HIV-1/O/2) by CIA, with Reflex to HIV-1 Antibody Confirmation by Western Blot (Change effective as of 08/28/23: Refer to 2012674)	Human Immunodeficiency Virus (HIV) Combo Antigen/Antibody (HIV-1/O/2) by CIA, Reflexive Panel (2012674)
3006111	ST2, Soluble (Inactive as of 10/02/23)	