

Effective as of **11/02/2026**

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	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
0098726	NEURON CSF	Neuronal Cell Antibodies, Quantitative, CSF																		x
0099465	NEURON-SER	Neuronal Cell Antibodies, Quantitative, Serum																		x
2003126	ANTI IGA	Anti-IgA Antibody by ELISA (Test on Delay as of 03/18/2025)																		x
3000508	SYN CAN U	Synthetic Cannabinoid Metabolites, Qualitative, Urine			x		x													
3021255	LP(A)	Lipoprotein (a), Molarity	x																	

TEST CHANGE

Synthetic Cannabinoid Metabolites, Qualitative, Urine

3000508, SYN CAN U

Specimen Requirements:

Patient Preparation:

Collect: Urine.

Specimen Preparation: Transfer ~~23~~ mL urine with no additives or preservatives to an ARUP standard transport tube. (Min: ~~0.71-2~~ 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 month; Refrigerated: 1 month; Frozen: 1 month

Methodology: Qualitative High Performance Liquid Chromatography-Tandem Mass Spectrometry

Note:

~~Known Interferences: 4-carboxy-AMB-PINACA; 5-fluoro-PIC-ACID (5-fluoro-PB-22-3-carboxyindole); 5-fluoro-PIC-ACID; 5-fluoro-PICA 3,3-dimethylbutanoic acid; FUBINACA 3,3-dimethylbutanoic acid; quetiapine.~~

CPT Codes: 80352

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

Interpretive Data:

Reference Interval:

Refer to report

NEW TEST

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Lipoprotein (a), Molarity

3021255, LP(A)

Specimen Requirements:

Patient Preparation:

Collect: Serum Separator Tube (SST) or Plasma Separator Tube (PST). Also acceptable: Green (Lithium Heparin), Lavender (EDTA), or Pink (K2EDTA).

Specimen Preparation: Allow specimen to clot completely at room temperature. Separate from cells ASAP or within 2 hours of collection. Transfer 1 mL serum or plasma to an ARUP standard transport tube. (Min: 0.5 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Body fluids.

Remarks:

Stability: After separation from cells: Ambient: 24 hours; Refrigerated: 21 days; Frozen: 1 month. Freeze/Thaw: Up to 3 cycles.

Methodology: Quantitative Immunoturbidimetry

Note:

CPT Codes: 83695

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

Interpretive Data:

ASCVD Relative Risk by Lp(a) Concentration

Lp(a) (nmol/L)	Relative Risk of ASCVD
>430	4x
350-429	3x
250-349	2x
125-249	1.4x
75-124	1.2x
<75	Reference

Relative risks as shown in 2026 ACC/AHA Guideline on the Management of Dyslipidemia (Blumenthal et al., Circulation, 2026).

Reference Interval:

Test Number	Components	Reference Interval
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	Lipoprotein (a)	≤ 74
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HOTLINE NOTE: Refer to the Hotline Test Mix for interface build information.

Inactivations

The following will be discontinued from ARUP's test menu on **November 2, 2026**
Replacement test options are indicated when applicable.

Test Number	Test Name	Refer to Replacement Test
0098726	Neuronal Cell Antibodies, Quantitative, CSF	
0099465	Neuronal Cell Antibodies, Quantitative, Serum	
2003126	Anti-IgA Antibody by ELISA (Test on Delay as of 03/18/2025)	