

Effective as of **January 3, 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
0051506	TD PAN	Thanatophoric Dysplasia, Types 1 and 2 (FGFR3) 13 Mutations (Change effective as of 1/3/2023: Refer to 2012015 in the January Hotline)																		x	
0051508	TD PAN FE	Thanatophoric Dysplasia, Types 1 and 2 (FGFR3) 13 Mutations, Fetal (Change effective as of 1/3/2023: Refer to 2012010 in the January Hotline)																		x	
3006111	ST2 SOL	ST2, Soluble	x																		

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ST2, Soluble

3006111, ST2 SOL

Specimen Requirements:

Patient Preparation:

Collect: Plain red. Also acceptable: Serum separator tube (SST).

Specimen Preparation: Transfer 1 mL serum to an ARUP standard transport tube. (Min: 0.2 mL) Test is not performed at ARUP; separate specimens must be submitted when multiple tests are ordered.

Transport Temperature: Frozen. Also acceptable: Refrigerated.

Unacceptable Conditions:

Remarks:

Stability: Ambient: 72 hours; Refrigerated: 1 week; Frozen: 3 months

Methodology: Quantitative Enzyme-Linked Immunosorbent Assay

Performed: Varies

Reported: 3-11 days

Note:

CPT Codes: 83006

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.

Inactivations

The following will be discontinued from ARUP's test menu on **January 3, 2023**
Replacement test options are indicated when applicable.

Test Number	Test Name	Refer to Replacement Test
0051506	Thanatophoric Dysplasia, Types 1 and 2 (FGFR3) 13 Mutations (Change effective as of 1/3/2023: Refer to 2012015 in the January Hotline)	Skeletal Dysplasia Panel, Sequencing and Deletion/Duplication (2012015)
0051508	Thanatophoric Dysplasia, Types 1 and 2 (FGFR3) 13 Mutations, Fetal (Change effective as of 1/3/2023: Refer to 2012010 in the January Hotline)	Skeletal Dysplasia Panel, Sequencing and Deletion/Duplication (2012015)