

MEDICARE COVERAGE OF LABORATORY TESTING

Please remember when ordering laboratory tests that are billed to Medicare/Medicaid or other federally funded programs, the following requirements apply:

- Only tests that are medically necessary for the diagnosis or treatment of the patient should be ordered.
 Medicare does not pay for screening tests except for certain specifically approved procedures and may not pay for non-FDA approved tests or those tests considered experimental.
- If there is reason to believe that Medicare will not pay for a test, the patient should be informed. The patient should then sign an Advance Beneficiary Notice (ABN) to indicate that he or she is responsible for the cost of the test if Medicare denies payment.
- The ordering physician must provide an ICD-10 diagnosis code or narrative description, if required by the fiscal intermediary or carrier.
- Organ- or disease-related panels should be billed only when all components of the panel are medically necessary.
- Both ARUP- and client-customized panels should be billed to Medicare only when every component of the customized panel is medically necessary.
- Medicare National Limitation Amounts for CPT codes are available through the Centers for Medicare & Medicaid Services (CMS) or its intermediaries. Medicaid reimbursement will be equal to or less than the amount of Medicare reimbursement.

The CPT Code(s) for test(s) profiled in this bulletin are for informational purposes only. The codes reflect our interpretation of CPT coding requirements, based upon AMA guidelines published annually. CPT codes are provided only as guidance to assist you in billing. ARUP strongly recommends that clients reconfirm CPT code information with their local intermediary or carrier. CPT coding is the sole responsibility of the billing party.

The regulations described above are only guidelines. Additional procedures may be required by your fiscal intermediary or carrier.

Hotline Page #	Test Number	Summary of Changes by Test Name	Name Change	Methodology	Performed/Reported Schedule	Specimen Requirements	Reference Interval	Interpretive Data	Note	CPT Code	Component Change	Other Interface Change	New Test	Inactive
15	0091533	Acetaminophen and Oxycodone Quantitative, Serum or Plasma												X
5	<u>2014521</u>	Acetaminophen Quantitative, Urine			X									
5	0091366	Acetazolamide Quantitative, Serum or Plasma			X									
5	0091328	Acyclovir, Serum or Plasma			X									
5	0091204	Allopurinol and Metabolite, Serum or Plasma												
5	0091195	Amantadine Quantitative, Serum or Plasma			X	·	•	·						
5	0091236	Amoxapine and Metabolite Quantitative, Serum or Plasma			X									



Hotline Page #	Test Number	Summary of Changes by Test Name	Name Change	Methodology	Performed/Reported Schedule	Specimen Requirements	Reference Interval	Interpretive Data	Note	CPT Code	Component Change	Other Interface Change	New Test	Inactive
5	2014043	Amphetamines (D/L Differentiation), Urine			X									
5	2008682	Anabolic Steroids, Urine - Screen with Reflex to Confirmation			X									
5	0091570	Aspirin and Oxycodone Quantitative, Serum or Plasma			X									
5	0091282	Barium Quantitative, Serum or Plasma			X									
6	0091165	Barium Quantitative, Urine			X									
6	<u>2011411</u>	Bath Salts Panel, Serum or Plasma			X									
6	<u>2008650</u>	Bath Salts Panel, Urine			X									
6	<u>3000136</u>	Benzene Quantitative - Whole Blood			X									
6	0091330	Boron Quantitative, Serum or Plasma			X									
6	2014493	Bupivacaine Quantitative, Serum or Plasma			X									
6	<u>2014027</u>	Calcium, RBC			X									
6	0091352	Carbidopa and Levodopa Quantitative, Serum or Plasma			X									
6	<u>2014505</u>	Chromium, RBC			X									
6	2003302	Citalopram Quantitative, Serum or Plasma			X									
7	0091362	Clonidine, Serum or Plasma			X									
7	0091223	Clonidine, Urine			X									
15	2009380	Complement C3 Nephritic Factor												Х
15	0099078	Complement Component 1 Functional												X
15	0099131	Complement Component 6 Functional												X
15	0099121	Complement Component 7 Functional												Х
15	0099133	Complement Component 8 Functional												Х
15	0099120	Complement Component 9 Functional												X
15	2003304	Complement Component Level 3a												X
15	2003180	Complement Component Level 4a												X
15	0099072	Complement Component Level 6												X
15	2009416	Complement Factor H Level (B-1H)												X
15	2009382	Complement Factor I												Х
7	2007252	Copper, RBC			х									
7	0091301	Diazoxide Quantitative, Serum or Plasma			X									
7	2007763	Diuretic Survey Quantitative, Serum or Plasma			х									
7	2008603	ERBB2 (HER2/neu) Gene Amplification by FISH with Reflex, Tissue	Х		X	X			X	x		X		



Hotline Page #	Test Number	Summary of Changes by Test Name	Name Change	Methodology	Performed/Reported Schedule	Specimen Requirements	Reference Interval	Interpretive Data	Note	CPT Code	Component Change	Other Interface Change	New Test	Inactive
7	0091319	Ethambutol Quantitative, Serum or Plasma			X									
8	0091116	Flunitrazepam and Metabolites, Serum or Plasma, Screen with Reflex to Confirmation/Quantitation			X									
8	3000183	Flunitrazepam and Metabolites, Urine Screen with Reflex to Confirmation/Quantitation			X									
8	0091341	Fluoride Quantitative, Serum or Plasma			X									
8	<u>2014180</u>	Fluoxetine and Metabolite Quantitative, Serum or Plasma			X									
8	0091234	Fluvoxamine Quantitative, Serum or Plasma			X									
8	0091517	Formic Acid, Serum or Plasma			X									
8	0091263	Furosemide Quantitative, Serum or Plasma			X									
8	0091203	Heroin - Screen with Reflex to Confirmation/Quantitation - Serum or Plasma			X									
8	<u>0091586</u>	Heroin - Screen with Reflex to Confirmation/Quantitation - Urine			X									
9	2008326	Hydrocarbon and Oxygenated Volatiles Panel, Blood			X									
9	2014183	Ibuprofen Quantitative, Serum or Plasma			X									
9	0091507	Ketamine and Metabolite Quantitative, Serum or Plasma			X									
9	<u>2011413</u>	Lead, RBC			X									
9	0091197	Lidocaine and Metabolite Quantitative, Serum or Plasma			x									
9	0091200	LSD, Serum or Plasma - Screen with Reflex to Confirmation/Quantitation			x									
9	0091224	LSD, Urine - Screen with Reflex to Confirmation/Quantitation			X									
10	3000394	Malignancy Risk Assessment, Pelvic Mass, OVA1											X	
10	2007254	Manganese, RBC			X									
15	0098816	Melatonin												X
10	3000248	Meperidine and Metabolite Quantitative, Urine			X									
10	0091272	Mercury, Hair			X									
10	0092390	Metformin Quantitative, Serum or Plasma			Х									
10	0091090	Methaqualone Quantitative, Serum or Plasma			Х									
10	2006299	Methaqualone Quantitative, Urine			Х									
11	3000251	Methsuximide Metabolite, Serum or Plasma			X									
11	3000253	Methylphenidate and Metabolite Quantitative, Serum or Plasma			х									
11	0091453	Metoprolol Quantitative, Serum or Plasma			X									



Hotline Page #	Test Number	Summary of Changes by Test Name	Name Change	Methodology	Performed/Reported Schedule	Specimen Requirements	Reference Interval	Interpretive Data	Note	CPT Code	Component Change	Other Interface Change	New Test	Inactive
11	2013014	Mitotane, Serum or Plasma			X									
11	0091280	Molybdenum Quantitative, Serum or Plasma			X									
11	<u>2013025</u> <u>2013008</u>	Perampanel Quantitative, Serum or Plasma Periprosthetic Joint Infection (PJI) Detection			X									$\overline{}$
		(Synovasure)				X								
11	0091565	Phenobarbital, Free, Serum or Plasma			X									
11	0091551	Phenobarbital, Total/Free/Bound, Serum or Plasma			X									
12	<u>2014041</u>	Potassium, Total, RBC			X									
12	0091538	Propylene Glycol, Serum or Plasma			X									
12	2013011	Selenium, RBCs			X									
12	0091222	Silver Quantitative, Serum or Plasma			X									
12	0091228	Silver, Urine			X									
12	0091229	Silver, Whole Blood			X									
12	<u>2008426</u>	SLCO1B1, 1 Variant	X					X				X		
13	<u>0091574</u>	Strychnine, Serum or Plasma			X									
13	<u>0091568</u>	Sulfhemoglobin Quantitative, Whole Blood			X									
13	3000508	Synthetic Cannabinoid Metabolites, Qualitative, Urine			x									
13	3000584	Tapentadol, Free, Serum or Plasma			X									
13	0091386	Temazepam and Metabolite Quantitative, Serum or Plasma			X									
13	0091585	Tin Total Quantitative, Serum or Plasma			X									
13	0091555	Tin, Total, Whole Blood			X									
13	0091434	Titanium Quantitative, Serum or Plasma			X									
13	0091399	Trihexyphenidyl Quantitative, Serum or Plasma			X									
13	0091396	Trimethoprim, Serum or Plasma			Х									
14	0091286	Vanadium Quantitative, Serum or Plasma			X									
14	2011039	Vigabatrin Quantitative, Serum or Plasma			X									
14	0090805	Warfarin Quantitative, Serum or Plasma			х									
14	2006460	Zinc, RBC			X									



2014521	Acetaminophen Quantitative, Urine	ACETA U
Performed: Reported:	Varies 4-7 days	
0091366	Acetazolamide Quantitative, Serum or Plasma	ACETAZOLAM
Performed: Reported:	Varies 4-7 days	
0091328	Acyclovir, Serum or Plasma	ACYCLOV
Performed: Reported:	Varies 7-10 days	
0091204	Allopurinol and Metabolite, Serum or Plasma	ALLOPUR SP
Performed: Reported:	Varies 7-10 days	
0091195	Amantadine Quantitative, Serum or Plasma	AMANTADIN
Performed: Reported:	Varies 4-7 days	
0091236	Amoxapine and Metabolite Quantitative, Serum or Plasma	AMOXAPINE
Performed: Reported:	Varies 7-10 days	
2014043	Amphetamines (D/L Differentiation), Urine	AMP DLDIFF
Performed: Reported:	Varies 7-10 days	
2008682	Anabolic Steroids, Urine - Screen with Reflex to Confirmation	STEROIDS
Performed: Reported:	Varies 7-17 days	
0091570	Aspirin and Oxycodone Quantitative, Serum or Plasma	PERCODAN S
Performed: Reported:	Varies 7-10 days	
0091282	Barium Quantitative, Serum or Plasma	BARIUM SP
Performed: Reported:	Varies 4-7 days	



0091165	Barium Quantitative, Urine	BARIUM URN
Performed: Reported:	Varies 7-10 days	
2011411	Bath Salts Panel, Serum or Plasma	BATHSLT SP
Performed: Reported:	Varies 7-10 days	
2008650	Bath Salts Panel, Urine	BATH SALTS
Performed: Reported:	Varies 7-10 days	
3000136	Benzene Quantitative - Whole Blood	BENZE BLD
Performed: Reported:	Varies 4-7 days	
0091330	Boron Quantitative, Serum or Plasma	BORON SP
Performed: Reported:	Varies 7-10 days	
2014493	Bupivacaine Quantitative, Serum or Plasma	BUPIVAC SP
Performed: Reported:	Varies 4-7 days	
2014027	Calcium, RBC	CA RBC
Performed: Reported:	Varies 4-7 days	
0091352	Carbidopa and Levodopa Quantitative, Serum or Plasma	SINEMET SP
Performed: Reported:	Varies 7-10 days	
2014505	Chromium, RBC	CR RBC
Performed: Reported:	Varies 7-10 days	
2003302	Citalopram Quantitative, Serum or Plasma	CITALO
Performed: Reported:	Varies 4-7 days	



0091362 Clonidine, Serum or Plasma CLONIDI SP

Performed: Varies **Reported:** 7-10 days

0091223 Clonidine, Urine CLONID UR

Performed: Varies **Reported:** 7-10 days

2007252 Copper, RBC COPPER RBC

Performed: Varies **Reported:** 7-10 days

0091301 Diazoxide Quantitative, Serum or Plasma DIAZOXID

Performed: Varies **Reported:** 7-10 days

2007763 Diuretic Survey Quantitative, Serum or Plasma DIURET SP

Performed: Varies **Reported:** 7-10 days

2008603 ERBB2 (HER2/neu) Gene Amplification by FISH with Reflex, Tissue ERBB2 FISH

Performed: Mon-Fri **Reported:** 3-9 days

Specimen Required: Collect: Tumor tissue.

Specimen Preparation: Formalin fix (10 percent neutral buffered formalin) and paraffin-embed tissue. Fixative duration: 6-72 hours. Protect paraffin block from excessive heat. Transport block or 7 unstained (4 micron thick sections) positively charged slides in a tissue transport kit (ARUP supply #47808) available online through eSupply using ARUP ConnectTM or contact ARUP Client Services at (800) 522-2787 (kit recommended but not necessary). (Min 4 slides)

Storage/Transport Temperature: Room temperature. Also acceptable: Refrigerated. Ship in cooled container during summer months. Remarks: Include surgical pathology report.

<u>Unacceptable Conditions:</u> Specimens fixed or processed in alternative fixatives (alcohol, Prefer) or heavy metal fixatives (B-4 or B-5).

No tumor in tissue. Decalcified specimens. Tissue fixed for less than 6 hours or greater than 72 hours.

Stability (collection to initiation of testing): Ambient: Indefinitely; Refrigerated: Indefinitely; Frozen: Unacceptable

Note: Breast tissue results of FISH group 2, 3, or 4 will be reflexed to *ERBB2 (HER2/neu)* (HercepTest) with Interpretation by Immunohistochemistry, Tissue (ARUP test code 0049174). Additional charges apply. Gastric and other non-breast tissue results of Equivocal will be reflexed to an alternate probe in an effort to resolve amplification status. Additional charges apply.

CPT Code(s): 88377, if reflexed add 88360 or 88377

HOTLINE NOTE: There is a reflexive pattern change associated with this test. Add reflex to 0049174, *ERBB2(HER2/neu)* (HERCEP) w/Interpretation

0091319 Ethambutol Quantitative, Serum or Plasma ETHAMBUT

Performed: Varies **Reported:** 7-10 days



0091116	Flunitrazepam and Metabolites, Serum or Plasma, Screen with Reflex to Confirmation/Quantitation	FLUNITR SP
Performed: Reported:	Varies 4-11 days	
3000183	Flunitrazepam and Metabolites, Urine Screen with Reflex to Confirmation/Quantitation	FLUNI URN
Performed: Reported:	Varies 4-11 days	
0091341	Fluoride Quantitative, Serum or Plasma	FLUORIDE
Performed: Reported:	Varies 7-10 days	
2014180	Fluoxetine and Metabolite Quantitative, Serum or Plasma	FLUOX SP
Performed: Reported:	Varies 4-7 days	
0091234	Fluvoxamine Quantitative, Serum or Plasma	FLUVOXAM
Performed: Reported:	Varies 4-7 days	
0091517	Formic Acid, Serum or Plasma	FORMIC P
Performed: Reported:	Varies 7-10 days	
0091263	Furosemide Quantitative, Serum or Plasma	FUROSEM
Performed: Reported:	Varies 7-10 days	
0091203	Heroin - Screen with Reflex to Confirmation/Quantitation - Serum or Plasma	HEROIN SP
Performed: Reported:	Varies 3-9 days	
0091586	Heroin - Screen with Reflex to Confirmation/Quantitation - Urine	HEROIN URN
Performed: Reported:	Varies 3-9 days	



2008326	Hydrocarbon and Oxygenated Volatiles Panel, Blood	HYDRO OX B
Performed:	Varies	
Reported:	4-7 days	
2014183	Ibuprofen Quantitative, Serum or Plasma	IBUPRO SP
Performed:	Varies	
Reported:	7-10 days	
0091507	Ketamine and Metabolite Quantitative, Serum or Plasma	KETAMINE S
Performed:	Varies	
Reported:	4-7 days	
2011413	Lead, RBC	LEAD RBC
Performed:	Varies	
Reported:	7-10 days	
0091197	Lidocaine and Metabolite Quantitative, Serum or Plasma	LIDOCAIN
Performed:	Varies	
Reported:	4-7 days	
0091200	LSD, Serum or Plasma - Screen with Reflex to Confirmation/Quantitation	LSD SP
Performed:	Varies	
Reported:	7-17 days	
0091224	LSD, Urine - Screen with Reflex to Confirmation/Quantitation	LSD URN
Performed:	Varies	
Reported:	7-17 days	



New Test 3000394 Malignancy Risk Assessment, Pelvic Mass, OVA1 OVA1

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Methodology: Electrochemiluminescent Immunoassay (ECLIA)/Fixed-Rate-Time Nephelometry

Performed: Varies **Reported:** 4-8 days

Specimen Required: Collect: Serum Separator Tube (SST).

Specimen Preparation: Transfer 2.2 mL serum to an ARUP Standard Transport Tube. (Min: 1.1 mL)

Storage/Transport Temperature: Refrigerated. Also acceptable: Frozen.

Stability (collection to initiation of testing): Ambient: Unacceptable; Refrigerated: 8 days; Frozen: 9 weeks

Reference Interval: By Report

Note: Biomarkers: CA-125 II, Apoliproprotein A1 (Apo A-1), Beta-2 Microglobulin (B2M), Transferrin, and Prealbumin.

CPT Code(s): 81503

New York DOH Approved.

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

2007254	Manganese, RBC	MANG RBC
Performed:	Varies	
Reported:	4-7 days	
3000248	Meperidine and Metabolite Quantitative, Urine	MEPERI U
Performed:	Varies	
Reported:	4-7 days	
0091272	Mercury, Hair	MERCUR H
Performed:	Varies	
Reported:	8-11 days	
0092390	Metformin Quantitative, Serum or Plasma	METFORM SP
Performed:	Varies	
Reported:	7-10 days	
0091090	Methaqualone Quantitative, Serum or Plasma	METHAQ SP
Performed:	Varies	
Reported:	7-10 days	
2006299	Methaqualone Quantitative, Urine	METHAQ UR
Performed:	Varies	
Reported:	7-10 days	



METHSU SP 3000251 Methsuximide Metabolite, Serum or Plasma Performed: Varies Reported: 7-10 days METHYL SP 3000253 Methylphenidate and Metabolite Quantitative, Serum or Plasma Performed: Varies Reported: 7-10 days METOPRO SP 0091453 Metoprolol Quantitative, Serum or Plasma Performed: Varies Reported: 7-10 days 2013014 Mitotane, Serum or Plasma MITOT SP Performed: Varies Reported: 7-10 days **MOLYBDEN** 0091280 Molybdenum Quantitative, Serum or Plasma Performed: Varies Reported: 7-10 days 2013025 Perampanel Quantitative, Serum or Plasma **PERAMP** Performed: Varies Reported: 7-10 days 2013008 Periprosthetic Joint Infection (PJI) Detection (Synovasure) SYNOVA PJI Specimen Required: Collect: Synovial fluid in Plain Red. Specimen Preparation: Transport 1 mL synovial fluid in the original collection tube. (Min: 0.5 mL) Separate specimens must be submitted when multiple tests are ordered. Storage/Transport Temperature: Refrigerated. Remarks: Specimen Source is required. (eg., left knee, right shoulder, etc.) Stability (collection to initiation of testing): Ambient: 72 hours; Refrigerated: 1 week; Frozen: Unacceptable 0091565 PHENOBAR F Phenobarbital, Free, Serum or Plasma Performed: Varies Reported: 7-10 days

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PHENOBAR

Phenobarbital, Total/Free/Bound, Serum or Plasma

0091551

Varies

7-10 days

Performed:

Reported:



2014041 Potassium, Total, RBC K RBC

Performed: Varies **Reported:** 4-7 days

0091538 Propylene Glycol, Serum or Plasma PROPY GLY

Performed: Varies **Reported:** 7-10 days

2013011 Selenium, RBCs SELENI RBC

Performed: Varies **Reported:** 4-7 days

0091222 Silver Quantitative, Serum or Plasma SILVER SP

Performed: Varies **Reported:** 7-10 days

0091228 Silver, Urine SILVER URN

Performed: Varies **Reported:** 7-10 days

0091229 Silver, Whole Blood SILVER BLD

Performed: Varies **Reported:** 7-10 days

Interpretive Data:

Background Information for SLCO1B1, 1 Variant:

Characteristics: Simvastatin is a commonly prescribed hypolipidemic drug used for cholesterol reduction and control. Approximately 1-5 percent of exposed individuals may experience a dose-dependent myopathy (skeletal muscle toxicity). Symptoms may include pain, muscle weakness, and cramps. The organic anion transporter polypeptide 1B1, encoded by *SLCO1B1*, transports active simvastatin acid from the blood stream into the liver. This test detects a common variant that reduces the function of the transporter, resulting in an increased plasma concentration of the drug.

Inheritance: Autosomal co-dominant.

Cause: Simvastatin hypersensitivity reaction is strongly associated with the *SLCO1B1**5 allele. The mechanism is related to changes in the activity of organic anion-transporter polypeptide 1B1 (OATP1B1). The *1 allele (normal transporter function) is presumed when the *5 allele is not detected. One copy of the *5 allele predicts decreased transporter function; two copies of the *5 allele predicts poor transporter function.

Allele Tested: SLCO1B1*5 (rs4149056, c.521T>C).

Allele Frequency: Middle Eastern 5 percent, Caucasian 1-3 percent, African 0-2 percent, Asian 0-2 percent, Less than 1 percent in other populations. Clinical Sensitivity: Drug-dependent.

Methodology: Polymerase Chain Reaction (PCR) and Fluorescence Monitoring.

Analytical Sensitivity and Specificity: Greater than 99 percent.

Limitations: Only the targeted *SLCO1B1* variant will be detected. Diagnostic errors can occur due to rare sequence variations. Risk of therapeutic failure or adverse reactions with statins may be affected by genetic and non-genetic factors that are not detected by this test. This result does not replace the need for therapeutic or clinical monitoring.

See Compliance Statement C: www.aruplab.com/CS

HOTLINE NOTE: There is a clinically significant charting name change associated with this test.

Change the charting name for component 2008427 from Statin Sensitivity SLCO1B1, Specimen to SLCO1B1, 1 Variant, Specimen. Change the charting name for component 2008428 from Statin Sensitivity SLCO1B1,*5 Genotype to SLCO1B1, 1 Variant,*5 Genotype



0091574	Strychnine, Serum or Plasma	STRYCHNI S
Performed: Reported:	Varies 4-10 days	
0091568	Sulfhemoglobin Quantitative, Whole Blood	SULFHEMOGL
Performed: Reported:	Varies 7-10 days	
3000508	Synthetic Cannabinoid Metabolites, Qualitative, Urine	SYN CAN U
Performed: Reported:	Varies 4-7 days	
3000584	Tapentadol, Free, Serum or Plasma	TAPEN SP
Performed: Reported:	Varies 7-10 days	
0091386	Temazepam and Metabolite Quantitative, Serum or Plasma	TEMAZEPAM
Performed: Reported:	Varies 3-7 days	
0091585	Tin Total Quantitative, Serum or Plasma	TIN SP
Performed: Reported:	Varies 4-7 days	
0091555	Tin, Total, Whole Blood	TIN BLD
Performed: Reported:	Varies 4-7 days	
0091434	Titanium Quantitative, Serum or Plasma	TITANIU SP
Performed: Reported:	Varies 4-7 days	
0091399	Trihexyphenidyl Quantitative, Serum or Plasma	ТПІНЕХУРНЕ
Performed: Reported:	Varies 7-10 days	
0091396	Trimethoprim, Serum or Plasma	TRIMETHOPR
Performed: Reported:	Varies 7-10 days	



0091286	Vanadium Quantitative, Serum or Plasma	VANADIU SP
Performed:	Varies	
Reported:	7-10 days	
2011039	Vigabatrin Quantitative, Serum or Plasma	VIGABAT
Performed:	Varies	
Reported:	7-10 days	
0090805	Warfarin Quantitative, Serum or Plasma	WARF SP
Performed:	Varies	
Reported:	7-10 days	
2006460	Zinc, RBC	ZINC RBC
Performed:	Varies	
Reported:	7-10 days	



The following will be discontinued from ARUP's test menu on November 5, 2018. Replacement test options are supplied if applicable.

Test Number	Test Name	Refer To Replacement
0091533	Acetaminophen and Oxycodone Quantitative, Serum or Plasma	
2009380	Complement C3 Nephritic Factor	
0099078	Complement Component 1 Functional	
0099131	Complement Component 6 Functional	
0099121	Complement Component 7 Functional	
0099133	Complement Component 8 Functional	
0099120	Complement Component 9 Functional	
2003304	Complement Component Level 3a	
2003180	Complement Component Level 4a	
0099072	Complement Component Level 6	
<u>2009416</u>	Complement Factor H Level (B-1H)	
2009382	Complement Factor I	
<u>0098816</u>	Melatonin	