PHYSICIANS LABORATORY SERVICES
www.physlab.com

TECHNICAL BULLETIN

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PHYSICIANS LABORATORY – WEBSITE

www.physlab.com

Our website offers our clients valuable information and time saving resources. In order to provide you with the most current information and advanced IT capabilities, we offer the following via our website:

- TEST DIRECTORY
- CAP & CLIA CERTIFICATES
- ONLINE SUPPLY ORDERS
- INTERNET BILL PAY
- PATIENT RESULTS VIA ONLINE PORTAL
- PAST TECHNICAL BULLETINS & MEMOS

Please call or email Kacey Moreland if you would like access to online patient results or have questions regarding any of the services mentioned above.

(402)677-8872 or kmoreland@physlab.com

SPECIMEN REQUIREMENTS

COAGULATION TESTING

Sodium Citrate tubes submitted for coagulation testing must be filled to the proper fill line to ensure an accurate ratio of anticoagulant to blood. Underfilling or overfilling of these specimen tubes will adversely affect results that are used for screening and therapeutic dosage of patients. In order to provide accurate results for this type of testing, specimens that do not meet this requirement may lead to cancellation of testing.

URINALYSIS TESTING

The BD Vacutainer Culture and Sensitivity Tubes have been validated strictly for the use of transporting urine culture specimens. The preservative present in the tubes may interfere with chemical testing and the low volume of specimen prohibits accurate quantitation of urinalysis microscopic results. In order to provide quality results to our clients, Physicians Laboratory requests a minimum volume of 10 mL of urine submitted in a sterile urine cup. Results for specimens submitted with less than 10 mL of urine will include the following notation:

URINE SPECIMEN RECEIVED WAS LESS THAN 10 ML; THE NORMALS REPORTED DO NOT APPLY FOR THIS SPECIMEN.

SEMEN ANALYSIS TESTING

In an effort to provide our clientele with a more comprehensive semen analysis test, PLS has added semen viability to test #213 Semen Analysis, Fertility. Due to the addition of this component, the price of this test will increase to $50.00. These changes will go into effect on September 1st.

HELICOBACTER PYLORI ANTIGEN, FECAL

Effective August 1st, Helicobacter Pylori Antigen (Fecal), will now be sent to a new reference laboratory. This allows us to provide significant savings to our clients as well as decrease turn-around-time. Due to this change, a new test number has been created.

#2095 H Pylori Antigen, Fecal by EIA (Replaces #1533)
Spec Requirements: 5.0g (1.0g) Unpreserved Stool.
Storage: Refrigerated 3 days. Frozen 1 week.
CPT: 87338
Price: $45.00

RAPID HIV TESTING

Rapid HIV testing will now be performed using the Clearview HIV ½ Stat-Pak method. All Rapid HIV testing will now require a Whole Blood EDTA (Lavender) tube. All STAT Exposure panels will require a Serum Separator Tube for Hepatitis testing and a Whole Blood EDTA tube for the Rapid HIV test. The revised test numbers and pricing information are included below:

4680 Rapid HIV ½
Specimen Requirements: Whole Blood EDTA
Storage: Refrigerated 3 days.
CPT Code: 86703
Price: $85.00

3680 STAT Exposure Panel

4680	Rapid HIV
945	Hepatitis C
568	Hepatitis B Surface Antibody
565	Hepatitis B Surface Antigen

Spec Requirements: Whole Blood EDTA & Serum Separator Tube
Temperature: Refrigerated 3 days.
CPT Codes: 86703, 86803, 86706, 87340
Price: $140.00

CSF WEST NILE IGG & IGM #9283

Specimen Requirement Update:
1.0 mL CSF and 1.0 mL Serum must now be submitted in order to perform testing at NPHL. Both samples should be submitted refrigerated and clearly labeled with the specimen type and proper patient identification.

CONNECTIVE TISSUE DISEASE PANEL EFFECTIVE AUGUST 15TH

The Connective Tissue Disease Profile (test #1799) is being modified to allow for the addition of detection of anti-centromere antibodies (ACA) and anti-chromatin antibodies. Anti-centromere antibodies occur in auto-immune disorders and are commonly found in limited systemic scleroderma (formerly called CREST Syndrome), as well as occasionally being located in the diffuse form of scleroderma. They are rare in other rheumatic conditions and in healthy persons. The specificity of this test is >98%. Thus, a positive anti-centromere antibody finding is strongly suggestive of limited systemic scleroderma. Additionally, these antibodies are present early in the course of disease making their presence predictive of limited cutaneous involvement and a decreased likelihood of aggressive internal organ involvement.

Anti-chromatin antibodies are believed to occur in SLE before the appearance of dsDNA antibodies. Chromatin appears to be a major immunogen in SLE. These antibodies are both sensitive and specific for SLE, and are a useful marker for an increased risk of lupus nephritis. Anti-chromatin antibodies seem to be a promising marker useful in early diagnosis and assessment of disease activity in SLE patients especially in patients who are negative for anti-dsDNA antibodies. They are also useful in the evaluation of drug-induced LE and appear to be more specific and sensitive than Anti-Histone antibodies which will no longer be performed.

Components of the assay will now detect the following antibodies:

-ssDNA	-dsDNA
-SSA	-SSB
-Scl-70	-Sm
-RNP	-Chromatin
-Centromere	

Due to the change in components and CPT codes, a new test code has been created.

2099 Connective Tissue Disease Profile
Spec Requirements: Serum Separator Tube
Stability: Refrigerated 2 weeks.
CPT Codes: 86235x7 86225 86226
Price $95.00

REFERENCE RANGE UPDATE TOTAL T3, TRIIODOTHYRONINE

Total T3, Triiodothyronine (Test# 306) will have a reference range update. The units will be changed to reflect current laboratory trends.

Physicians Laboratory currently reports Total T3 in ng/mL. The new report will be in ng/dL. This is a conversion factor of 100.

For example, if a previous TT3 report was 4.32 ng/mL it will now be reported as 432 ng/dL. Look for the change September 1, 2011.

Your reports will be flagged to indicate
"NEW REFERENCE RANGE"

BILLING UPDATES

PT/INR
Please note that a pre-operative diagnosis code (Ex: V72.84) is not acceptable for PT/INR testing. If the patient is having the PT/INR performed for pre-operative purposes, then they must have the testing performed by the facility that is performing their surgery. The cost of the PT/INR will be included in that facility's payment for the surgical procedure.

VITAMIN D TESTING
Physicians Laboratory is still receiving numerous requests for Vitamin D testing with diagnosis codes that do not support medical necessity. Effective 12/15/2010 an LCD was issued for Vitamin D testing. **Insurance will no longer pay for Vitamin D testing for screening purposes**. There must be a medical condition that warrants the testing in order for insurance to pay for this test. A complete list of payable codes is provided on the Wisconsin Medicare Website at http://www.wpsmedicare.com

SPUTUM CULTURE W/ GRAM STAIN

All Sputum Cultures (Test #604) automatically include gram stain testing. For this reason, both 87070 and 87205 will be billed for this test effective September 1, 2011. The price for the Sputum Culture & Gram Stain is $21.00.

#604 Sputum Culture w/ Gram Stain
CPT: 87070 & 87205
Price: $21.00
Performed: Daily
Reported: 2-3 Days