



	ase update your EMR catalog with those appropriate to								•
New Test	Effective: 6/5/2017				Corrected R	esult Codes for th	e Gelatin Allergen (Bovine)		
Test Code	Test Name	Mnemonic	Category/Type						
5613375	Gelatin Allergen (Bovine)	GELATIN IC	Group	LOINC	Result Code	Mnemonic	Result Name	Reference Range UOM	Result Type
			•	n/a	5613350	Gelatin CL	Gelatin Allergen	<0.35 kU/L	Numeric XXX.
T: 86003	1 mL (0.1 mL) Serum Clot Activator SST (Red/Gray or Tiger Top)	Refrigerated		n/a	5613325	<b>Gelatin CT</b>	Gelatin Count	Class 0	Alpha
tient: \$30.05	Specimen Stability: refrigerated 4 weeks, frozen 4 weeks.			n/a	5606925	Allergen Interp	Allergen Interpretation	By Report	Alpha
	Unacceptable: Room Temperature  This is the suggested replacement to the discontinued test be This is Not a New Test but you may not have this built in you	<del>-</del>			See the Corre	cted Result codes fo	r the Gelatin Allergy test		
New Test	Effective: 06/12/2017								
		Mnemonic	Catagory/Type						
Test Code 6006452	Test Name Stratify JCV Antibody w/Index and Reflex to Inhibition Assay	JCV Ab/Index	Category/Type Group	LOINC	Result Code	Mnemonic	Result Name	Reference Range UOM	Result Type
0000432	Stratily Jev Antibody W/ muex and Reflex to inhibition Assay	JCV AD/IIIUEX	Group	70173-0	6006453	JCV Antibody	JCV Antibody		
T: 86711	Collect: Serum from Separator Tube (SST) or Plasma from Lavende	er (FDTA)		/01/3-0	6006454	JCV Antibody JCV Index	JCV Antibody JCV Index	Negative <0.20	Alpha Numeric X.X)
atient: \$0.00	Separate serum or plasma from cells.	ei (EDIA)			0000434	JCV IIIdex	JCV IIIdex	<b>\0.20</b>	Numeric X.X/
itient. 90.00	Transport 0.5 mL(0.25 mL) Serum or Plasma at Room Temperature	P	If Reflexed	Refl	ex Order Code:	6006473	JCV Antibody Inhibition Assay		
Reflexed	Unacceptable Conditions: Heparinized specimens.		ij nejrekeu	Iteli	ex order code.	0000170	Jev / Michaedy Milliantier / Nosay		
T: 86711	Stability: Ambient: 7 Days; Refrigerated: 14 Days; Frozen: 90 Days	5		LOINC	Result Code	Mnemonic	Result Name	Reference Range UOM	Result Type
ntient: \$0.00	Pricing is currently \$0.00 per the performing laboratory			N/A	6006473	JCV Inhb Ab	JCV Antibody Inhibition Assay	By report	By report
Modify Test Test Code 5960165	TESTS - Please update your EMR catalog with those applied by the second	Mnemonic	Category/Type Detail	LOINC	Result Code		Result Name	Reference Range UOM	Result Type
<b>Modify Test</b> Test Code 5960165 T: 87491	Effective: 6/5/2017 Test Name	Mnemonic REF CHLAM APTI types.	Category/Type	43304-5	5960165 6904843 6904845	Chlam Aptima APTIMA Media Type Source A2	Chlamydia Trachomatis by Amplified Detection	Negative Free Text Free Text	Result Type Alpha
Modify Test  Test Code  5960165  T: 87491	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the specific of the s	Mnemonic REF CHLAM APTI  types.  Jnisex Swab Specimen	Category/Type Detail  Prompt Prompt	For Urine, Va	5960165 6904843 6904845 ginal Swab, Mo Test Code 6910111	Chlam Aptima APTIMA Media Type Source A2  ale Urethral Swab, o Mnemonic CT Urine	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Tervial Brush in ThinPrep Pap See the approp Test Name C.trachomatis Urine	Negative Free Text Free Text	
Modify Test Test Code	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the specifical throat the specifical throat th	Mnemonic REF CHLAM APTI  types.  Jnisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt	For Urine, Va Urine Specimen Swab Specimen	5960165 6904843 6904845 ginal Swab, Mo Test Code 6910111 6910109	Chlam Aptima APTIMA Media Type Source A2  ale Urethral Swab, o Mnemonic CT Urine CT Swab	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab	Negative Free Text Free Text	-
Modify Test  Test Code  5960165  T: 87491	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the specific of the s	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt Thi	For Urine, Va Urine Specimer Swab Specimer	5960165 6904843 6904845 ginal Swab, Ma Test Code 6910111 6910109 6910107	Chlam Aptima APTIMA Media Type Source A2  ale Urethral Swab, o  Mnemonic CT Urine CT Swab CT PAP	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Tervial Brush in ThinPrep Pap See the approp Test Name C.trachomatis Urine	Negative Free Text Free Text	-
Modify Test Test Code 5960165 T: 87491	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of the collection of the collection of the collection with the collection of the collection with the collection of	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt Thi	For Urine, Va Urine Specimer Swab Specimer	5960165 6904843 6904845 ginal Swab, Ma Test Code 6910111 6910109 6910107	Chlam Aptima APTIMA Media Type Source A2  ale Urethral Swab, o  Mnemonic CT Urine CT Swab CT PAP	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP	Negative Free Text Free Text	7.
Test Code 5960165 T: 87491 tient \$129.75	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the collection of the collection of the collection with the collection of the collection with the collection of	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt Thi	For Urine, Va Urine Specimer Swab Specimer	5960165 6904843 6904845 ginal Swab, Ma Test Code 6910111 6910109 6910107	Chlam Aptima APTIMA Media Type Source A2  ale Urethral Swab, o  Mnemonic CT Urine CT Swab CT PAP	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP	Negative Free Text Free Text	
Test Code 5960165 T: 87491 Tient \$129.75	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the specifically those collection to the specifical specifically those collection to the specifical	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test efrigerated. ent: 2 months; Refrigerate	Category/Type Detail  Prompt Prompt  Thi  ed: 2 months; Froze	For Urine, Va Urine Specimer Swab Specimer	5960165 6904843 6904845 ginal Swab, Ma Test Code 6910111 6910109 6910107	Chlam Aptima APTIMA Media Type Source A2  Ale Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP	Negative Free Text Free Text	-
Modify Test Test Code 5960165 T: 87491 ient \$129.75  Modify Test Test Code 5960185	Effective: 6/5/2017  Test Name  Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the collection of the collection of the collection with the collection of the collection of the collection with the collection of the endocervix and the endocer	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Prompt ed: 2 months; Froze	43304-5  For Urine, Va  Urine Speciment Swab Speciment nPrep Speciment en: 1 year	5960165 6904843 6904845  ginal Swab, Ma Test Code 6910111 6910109 6910107 For Test Build  Result Code 5960185	Chlam Aptima APTIMA Media Type Source A2  Ale Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  e 05/22/2017 LiveWire.  Result Name Neisseria Gonorrhoeae by Amplified Detection	Negative Free Text Free Text  riate test below.	Alpha
Test Code 5960165 : 87491 ent \$129.75  Modify Test Test Code 5960185 : 87591	Effective: 6/5/2017  Test Name  Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the transport of the transport of the transport of the endocervix and Specimens in any transport media other than indicated above. Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambie Effective: 6/5/2017  Test Name	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Category/Type Detail  Category/Type Detail	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Italian	5960165 6904843 6904845  ginal Swab, Mo Test Code 6910111 6910109 6910107  For Test Build  Result Code 5960185 6904843	Chlam Aptima APTIMA Media Type Source A2  Methral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Mnemonic GC Aptima APTIMA Media Type	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  e 05/22/2017 LiveWire.  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type	Negative Free Text Free Text  riate test below.  Reference Range UOM  Negative Free Text	Result Type
Modify Test  Test Code  5960165  1: 87491 1:ent \$129.75  Modify Test  Test Code  5960185	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab. Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambie Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection in	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Prompt Category/Type Detail	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Italian	5960165 6904843 6904845  ginal Swab, Ma Test Code 6910111 6910109 6910107 For Test Build  Result Code 5960185	Chlam Aptima APTIMA Media Type Source A2  Methral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Mnemonic GC Aptima	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  e 05/22/2017 LiveWire.  Result Name Neisseria Gonorrhoeae by Amplified Detection	Negative Free Text Free Text  riate test below.  Reference Range UOM Negative	Result Type
Modify Test  Test Code 5960165  T: 87491 Tient \$129.75  Modify Test  Test Code 5960185  T: 87591	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab.  Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambien Stability: Swab in APTIMA Swab Specimen Transport Tube: Ambien Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Category/Type Detail  Category/Type Detail	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Prep Speciment In LOINC 24111-7	5960165 6904843 6904845  ginal Swab, Ma Test Code 6910111 6910109 6910107 For Test Build  Result Code 5960185 6904843 6904845	Chlam Aptima APTIMA Media Type Source A2  Media Type Source A2  Memonic CT Urine CT Swab CT PAP  Information See the Memonic GC Aptima APTIMA Media Type Source A2	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  e 05/22/2017 LiveWire.  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type
Modify Test  Test Code 5960165  T: 87491 Tient \$129.75  Modify Test  Test Code 5960185  T: 87591	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab. Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambie Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection in	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Category/Type Detail  Category/Type Detail	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Prep Speciment In LOINC 24111-7	5960165 6904843 6904845  ginal Swab, Ma Test Code 6910111 6910109 6910107 For Test Build  Result Code 5960185 6904843 6904845	Chlam Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Mnemonic GC Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Media Type Information Source A2	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  E 05/22/2017 LiveWire.  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source  Tervial Brush in ThinPrep Pap See the approp	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type
Modify Test  Test Code  5960165  T: 87491 Tient \$129.75  Modify Test  Test Code  5960185  T: 87591	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unacceptable Conditions: Large white swab included in APTIMA Collection kit is for preparatory cleaning of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab.  Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambie Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection to the test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.	Mnemonic REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA	Category/Type Detail  Prompt Prompt Category/Type Detail  Prompt Prompt	43304-5  For Urine, Va  Urine Speciment Swab Speciment nPrep Speciment tolonc 24111-7  For Urine, Va	5960165   6904843   6904845   Test Code   6910109   6910107   For Test Build   Result Code   5960185   6904843   6904845	Chlam Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Mnemonic GC Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  Test Name  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type
Modify Test  Test Code 5960165  Γ: 87491 tient \$129.75  Modify Test  Test Code 5960185  Γ: 87591	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab.  Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambies  Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of the	Mnemonic  REF CHLAM APTI  types.  Unisex Swab Specimen I is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA  types.  Unisex Swab Specimen	Category/Type Detail  Prompt Prompt  ad: 2 months; Froze  Category/Type Detail  Prompt Prompt Prompt	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Prep Speciment In Prep Speciment In Prep Speciment In	5960165   6904843   6904845   Test Code   6910111   6910109   6910107   For Test Build   5960185   6904843   6904845   Test Code   6910117	Chlam Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Manemonic GC Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic GC Urine	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  Test Name  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name N.gonorrhoeae Urine	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type
Test Code 5960165 T: 87491 tient \$129.75  Modify Test Test Code	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen Collection kit is for preparatory cleaning of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab.  Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambie Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen Collection kit.	Mnemonic  REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA  types.  Unisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt  Category/Type Detail  Prompt Prompt Prompt	43304-5  For Urine, Va  Urine Specimer Swab Specimer nPrep Specimer  LOINC 24111-7  For Urine, Va  Urine Specimer Swab Specimer Swab Specimer	5960165   6904843   6904845   Test Code   6910111   6910109   6910107   For Test Build   For Test Build   6904843   6904845   6910117   6910115	Chlam Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Source A2  Memonic GC Aptima APTIMA Media Type Source A2  Ile Urethral Swab, of Mnemonic GC Urine GC Swab	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  Test Name  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name N.gonorrhoeae Urine N.gonorrhoeae Swab	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type
Test Code 5960165 T: 87491 tient \$129.75  Modify Test Test Code 5960185 T: 87591	Effective: 6/5/2017  Test Name Chlamydia trachomatis DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of this test is to be used only for Rectal/Throat/Eye specimen types in an APTIMA Unisex Swab Specimen Collection kit.  Unacceptable Conditions: Large white swab included in APTIMA Unisex Swab Specimen of the endocervix and Specimens in any transport media other than indicated above. Specimens in swab transport media without a swab.  Specimen source is required. Storage/Transport Temperature: Restability: Swab in APTIMA Swab Specimen Transport Tube: Ambies  Effective: 6/5/2017  Test Name Neisseria Gonorrhoeae DNA Rectal/Throat/Eye (Aptima Probe)  Name Changed: Use This order specifically those collection of the	Mnemonic  REF CHLAM APTI  types.  Unisex Swab Specimen is unacceptable for test efrigerated. ent: 2 months; Refrigerate  Mnemonic REF GC APTIMA  types.  Unisex Swab Specimen is unacceptable for test	Category/Type Detail  Prompt Prompt  Category/Type Detail  Prompt Prompt Prompt	43304-5  For Urine, Va  Urine Speciment Swab Speciment In Prep Speciment In Prep Speciment In Prep Speciment In Prep Speciment In	5960165   6904843   6904845   Test Code   6910111   6910109   6910107   For Test Build   Result Code   5960185   6904843   6904845   Test Code   6910117   6910115   6910113	Chlam Aptima APTIMA Media Type Source A2  Ale Urethral Swab, of Mnemonic CT Urine CT Swab CT PAP Information See the Source A2  APTIMA Media Type Source A2  Ale Urethral Swab, of Mnemonic GC Urine GC Swab GC PAP	Chlamydia Trachomatis by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name C.trachomatis Urine C.trachomatis Swab C.trachomatis PAP  Test Name  Result Name Neisseria Gonorrhoeae by Amplified Detection APTIMA Transport Media Type Specimen Source  Test Name N.gonorrhoeae Urine	Negative Free Text  Free Text  riate test below.  Reference Range UOM  Negative  Free Text  Free Text  Free Text	Result Type





Modify Test	Effective : 6/5/2017								
Test Code	Test Name	Mnemonic	Category/Type						
5560335	GC and Chlamydia Rectal/Throat/Eye (Aptima Probe)	REF GC/CHL APT	Detail	LOINC	Result Code	Mnemonic	Result Name	Reference Range UOM	Result Type
				43304-5	5960165	Chlam Aptima	Chlamydia Trachomatis by Amplified Detection	Negative	Alpha
T: 87491; 87591	Name Changed: Use This order specifically those collection	n types.		24111-7	5960185	GC Aptima	Neisseria Gonorrhoeae by Amplified Detection	Negative	Alpha
tient \$259.50			Promp	t	6904843	APTIMA Media Type	APTIMA Transport Media Type	Free Text	
			Promp	t	6904845	Source A2	Specimen Source	Free Text	
	This test is to be used only for Rectal/Throat/Eye specimen typ	es							
	in an APTIMA Unisex Swab Specimen Collection kit.			For Urine, Vag	inal Swab, Mo	le Urethral Swab, o	r Cervial Brush in ThinPrep Pap See the approp	riate test below.	
					Test Code	Mnemonic	Test Name	  -	
	Unacceptable Conditions: Large white swab included in APTIM			Urine Specimen	6910129	CT/GC Urine	C.trachomatis, N.gonorrhoeae Urine	-	
	Collection kit is for preparatory cleaning of the endocervix a	-		Swab Specimen	6910127	CT/GC Swab	C.trachomatis, N.gonorrhoeae Swab	_	
	Specimens in any transport media other than indicated above	re.	Th	inPrep Specimen	6910125	CT/GC PAP	C.trachomatis, N.gonorrhoeae PAP		
	Specimens in swab transport media without a swab.				For Test Build	Information See the	e 05/22/2017 LiveWire.		
	Specimen source is required. Storage/Transport Temperature:								
	Stability: Swab in APTIMA Swab Specimen Transport Tube: Am	pient: 2 months; Refrige	rated: 2 months; Froz	zen: 1 year					
Modify Tost	Effective : 6/E/2017								
Modify Test	Effective: 6/5/2017	Mamonis	Catagory/Type						
Test Code 6900571	Test Name  Thiopuring Metabolites (6 TC, 6 MMAD)	Mnemonic Thiopuring Mot	Category/Type	LOINC	Result Code	Mnemonic	Result Name	Poforonco Pango LIOM	Posult Tuno
09003/1	Thiopurine Metabolites (6-TG, 6-MMP)	Thiopurine Met	Group	32660-3	6900573	6-TG Nucleotid	6-TG Nucleotides RBC	Reference Range UOM	Result Type Numeric XXXXX
T: 80299	Change in Specimen Requirements and TAT			32654-6	6900575	6-MMP Nucleotid	6-MMP Nucleotides RBC	230-400 pmol/8 x 108 RBC Less than 5701 pmol/8 x 108 RBC	Numeric XXXXX
tient \$ 345.00	Collection: 5.0 mL (2.5mL) Whole Blood. Refrigerated			32034-0	0900373	0-IVIIVIP INUCIEOTIU	0-IVIIVIF INUCIEOLIUES RBC	Less than 5701 photos x 100 kbc	Numeric AAAAA
itient \$ 545.00	Specimen: EDTA (Lavender Top)								
	Stability: Room temperature: 24 hours, Refrigerated: 5 days, Fr	ozen: Unacceptable							
	Set-up: Varies TAT: 3-8 days	ozem emaceptable							
	Set up. varies TATES o days								
Modify Test									
Modify Test Test Code	Effective: 6/5/2017 Test Name	Mnemonic	Category/Type						
	Effective : 6/5/2017	Mnemonic PLT REFAB	Category/Type Detail	LOINC	Result Code	Mnemonic	Result Name	Reference Range UOM	Result Type
Test Code	Effective: 6/5/2017 Test Name		Category/Type Detail	LOINC	Result Code 5577425	Mnemonic PLT Ref Ab	Result Name Platelet Refractory Antibody	Reference Range UOM Negative	Result Type Alpha
Test Code 5577425	Effective: 6/5/2017 Test Name			LOINC					
Test Code 5577425 PT: 86022	Test Name  Platelet Refractory Antibody	PLT REFAB		LOINC					
Test Code 5577425 PT: 86022	Test Name Platelet Refractory Antibody  Change in Specimen Requirements	PLT REFAB efrigerated or Frozen	Detail		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R	PLT REFAB  efrigerated or Frozen vever if specimen is not	Detail going to be tested wi		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how	PLT REFAB  efrigerated or Frozen vever if specimen is not	Detail going to be tested wi		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how	PLT REFAB  efrigerated or Frozen vever if specimen is not	Detail going to be tested wi		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022 Itient \$ 160.00	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch	PLT REFAB  efrigerated or Frozen vever if specimen is not	Detail going to be tested wi		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022 Itient \$ 160.00	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch	efrigerated or Frozen vever if specimen is not ange from reagent vend	Detail going to be tested wi		5577425	PLT Ref Ab			
Test Code 5577425 PT: 86022 atient \$ 160.00  Modify Test Test Code	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch	efrigerated or Frozen vever if specimen is not ange from reagent vend	Detail going to be tested wi or.  Category/Type	ithin 48 hours the	5577425	PLT Ref Ab	Platelet Refractory Antibody	Negative	Alpha
Test Code 5577425  PT: 86022 Patient \$ 160.00	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch	efrigerated or Frozen vever if specimen is not ange from reagent vend	Detail going to be tested wi		5577425  n freeze the spe	PLT Ref Ab cimen.  Mnemonic	Platelet Refractory Antibody  Result Name	Negative  Reference Range UOM	Alpha  Result Type
Test Code 5577425 PT: 86022 atient \$ 160.00  Modify Test Test Code 1501625	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative	efrigerated or Frozen vever if specimen is not ange from reagent vend	Detail going to be tested wi or.  Category/Type	ithin 48 hours the	5577425	PLT Ref Ab	Platelet Refractory Antibody	Negative	Alpha
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test Test Code 1501625  PT: 85379	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch	efrigerated or Frozen vever if specimen is not ange from reagent vend	Detail going to be tested wi or.  Category/Type	LOINC	n freeze the spen	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan	Platelet Refractory Antibody  Result Name  D-dimer Quantitative	Negative  Reference Range UOM  <0.50 ug/mL FEU	Alpha  Result Type
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test Test Code 1501625  PT: 85379	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data	efrigerated or Frozen vever if specimen is not a lange from reagent vend  Mnemonic DDIMR QUAN	Detail going to be tested wi or.  Category/Type	LOINC	n freeze the spen	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan	Platelet Refractory Antibody  Result Name	Negative  Reference Range UOM  <0.50 ug/mL FEU	Alpha  Result Type
Test Code 5577425  PT: 86022 Ptient \$ 160.00  Modify Test Test Code 1501625  PT: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te	efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic DDIMR QUAN  mperature	Detail going to be tested wi or.  Category/Type	LOINC	75577425  In freeze the special specia	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary e	Platelet Refractory Antibody  Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is	Reference Range UOM <0.50 ug/mL FEU	Alpha  Result Type
Test Code 5577425  T: 86022 Itient \$ 160.00  Modify Test  Test Code 1501625  T: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube Fr	efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic DDIMR QUAN  mperature	Detail going to be tested wi or.  Category/Type	LOINC	Result Code 1501625  Cut off for excl	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value	Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is <0.50 ug/mL FEU and patients have a low or mo	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability	Result Type Numeric XXX.XX
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test Test Code 1501625  PT: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube Fr Please indicate anticoagulant therapy.	PLT REFAB  efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic  DDIMR QUAN  mperature ozen	Detail going to be tested without.  Category/Type Detail	LOINC	Result Code 1501625  Cut off for excl	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value	Platelet Refractory Antibody  Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability	Result Type Numeric XXX.XX
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test Test Code	Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube Fr Please indicate anticoagulant therapy. Each 2.7mL Sodium Citrate 3.2% (Blue Top) tube must be filled	PLT REFAB  efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic  DDIMR QUAN  mperature ozen  to the proper level, no h	Detail going to be tested without.  Category/Type Detail  emolysis.	LOINC	Result Code 1501625  Cut off for excl When the quar of having veno	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value us thromboembolism	Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is <0.50 ug/mL FEU and patients have a low or mo (PE or DVT), the negative predictive value of this to	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability test is 100% for DVT and is 99.7% for P	Result Type Numeric XXX.XX
Test Code 5577425 PT: 86022 atient \$ 160.00  Modify Test Test Code 1501625 PT: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how  EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te  or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube For  Please indicate anticoagulant therapy.  Each 2.7 mL Sodium Citrate 3.2% (Blue Top) tube must be filled  Improperly filled tubes can give erroneous results. Whole bloo	PLT REFAB  efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic DDIMR QUAN  mperature ozen  to the proper level, no hed must be transported to	Detail going to be tested without.  Category/Type Detail  emolysis. Lab immediately.	LOINC	Result Code 1501625  Cut off for excl When the quar of having veno	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value us thromboembolism  t can be used in conjunt	Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is <0.50 ug/mL FEU and patients have a low or mo (PE or DVT), the negative predictive value of this trunction with the qualitative D-Dimer to diagnose D	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability test is 100% for DVT and is 99.7% for P	Result Type Numeric XXX.XX
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test  Test Code 1501625  PT: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube Fr Please indicate anticoagulant therapy. Each 2.7mL Sodium Citrate 3.2% (Blue Top) tube must be filled Improperly filled tubes can give erroneous results. Whole bloo If testing cannot be started within 4 hours of collection the specimens.	PLT REFAB  efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic DDIMR QUAN  mperature ozen  to the proper level, no hed must be transported to cimen must be double s	Detail going to be tested without.  Category/Type Detail  emolysis. Lab immediately. Dun	LOINC	Result Code 1501625  Cut off for excl When the quar of having veno Other tests tha and MRI. Antit	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value us thromboembolism t can be used in conjuntombotic therapy an	Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is <0.50 ug/mL FEU and patients have a low or mo (PE or DVT), the negative predictive value of this trunction with the qualitative D-Dimer to diagnose D and prevention of thrombosis, American College of C	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability test is 100% for DVT and is 99.7% for P	Result Type Numeric XXX.XX
Test Code 5577425  PT: 86022 atient \$ 160.00  Modify Test  Test Code 1501625  PT: 85379	Effective: 6/5/2017  Test Name  Platelet Refractory Antibody  Change in Specimen Requirements  2mL (0.2) Serum Clot Activator SST (Red/Gray or Tiger Top) R  Separate Serum from cells ASAP. Keep Serum refrigerated; how  EDTA Plasma is No Longer Acceptable Specimen Type due to ch  Effective: 6/5/2017  Test Name  D-dimer Quantitative  Change in Reference Range and Interpretive Data  2.7 mL Whole Blood Sodium Citrate 3.2% (Blue Top) Room Te  or 1.5 mL Double Spun Plasma Sterile, Capped Plastic Tube For  Please indicate anticoagulant therapy.  Each 2.7 mL Sodium Citrate 3.2% (Blue Top) tube must be filled  Improperly filled tubes can give erroneous results. Whole bloo	PLT REFAB  efrigerated or Frozen vever if specimen is not ange from reagent vend  Mnemonic DDIMR QUAN  mperature ozen  to the proper level, no hed must be transported to cimen must be double s	Detail going to be tested without.  Category/Type Detail  emolysis. Lab immediately. Dun	LOINC	Result Code 1501625  Cut off for excl When the quar of having veno Other tests tha and MRI. Antit	PLT Ref Ab  cimen.  Mnemonic Ddimr Quan  usion of pulmonary entified D-Dimer value us thromboembolism t can be used in conjuntombotic therapy an	Result Name D-dimer Quantitative  mbolism (PE) and deep venous thrombosis (DVT) is <0.50 ug/mL FEU and patients have a low or mo (PE or DVT), the negative predictive value of this trunction with the qualitative D-Dimer to diagnose D	Reference Range UOM  <0.50 ug/mL FEU  s <0.50 ug/mL FEU  derate pre-test probability test is 100% for DVT and is 99.7% for P	Result Type Numeric XXX.XX





CTIVE	Effective : 6/5/2017	- Please update your E	MR catalog with t	hose appropriate	to your practice	
Test Code	Test Name	Mnemonic	Repla	cement Informati	ion	
5508725	Gelatin Bovine Allergen	GEL BOVINE	Mnemonic	Test Code	Test Name	
			GELATIN IC	5613375	Gelatin Allergen (Bovine)	
			See Bu	ild information i	in the NewTest Section of this Live Wire	
VACTIVE	Effective : 6/5/2017	- Please update your E	MR catalog with t	hose appropriate	to your practice	
		Mnemonic	Ponla	cement Informati	ion	
Test Code	Test Name	IMITELLIOLIC	nepiu	tement mjormati	on	
6904891	Borrelia hermsii Antibody Panel, IFA	Borrelia herm Ab	Mnemonic	<u> </u>	Test Name	
			<del>-</del>	Test Code		
	Borrelia hermsii Antibody Panel, IFA  The performing laboratory has discontinued this test and a	Borrelia herm Ab	Mnemonic n/a nent assay at thi	Test Code n/a s time.	Test Name n/a	
6904891	Borrelia hermsii Antibody Panel, IFA	Borrelia herm Ab	Mnemonic n/a nent assay at thi	Test Code n/a s time. hose appropriate	Test Name n/a  to your practice	
6904891 VACTIVE	The performing laboratory has discontinued this test and a Effective: 6/30/17	Borrelia herm Ab does not offer a replacer - Please update your E	Mnemonic n/a nent assay at thi	Test Code n/a s time. hose appropriate	Test Name n/a  to your practice	
VACTIVE Test Code	The performing laboratory has discontinued this test and a series of the	Borrelia herm Ab  does not offer a replacer  - Please update your E  Mnemonic	Mnemonic n/a nent assay at thi  MR catalog with t	Test Code n/a s time. hose appropriate cement Information	Test Name n/a  to your practice ion	
VACTIVE Test Code	The performing laboratory has discontinued this test and a series of the	Borrelia herm Ab  does not offer a replacer  - Please update your E  Mnemonic  TRICH APTI	Mnemonic n/a ment assay at thi MR catalog with t Replac	Test Code n/a s time.  hose appropriate cement Information Test Code	Test Name n/a  to your practice fon Test Name	