

Directory of Services

037 Activated Partial Thromboplastin Time

Component

Activated Partial Thromboplastin Time

Specimen Req	Full Plasma Citrated Blue Tube
Stability	Room Temp. - 24 Hrs Frozen (-20°C) - 2 weeks Note: Specimen will be discarded after 7 days of storage.
Collection notes	<ol style="list-style-type: none"> 1. Draw blood into a buffered citrate collection tube (light blue top) filled to proper level. Do not overfill. 2. The blood-to-coagulant ratio should be 9:1; inadequate filling of the collection device will decrease this ratio and may lead to inaccurate results. 3. Invert gently to mix 4. Keep sample at room temperature.
Clinical Utility	This test measures the integrity of intrinsic coagulation pathway and monitoring heparin therapy.
Reference Range	25.0 – 35.0 seconds
Critical Value	> 60.0 seconds
Schedule	Sunday – Saturday

101 Albumin

Component

Albumin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	7 day(s) at 15 – 25 °C; 1 month(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage
Collection notes	1 mL serum separated within 1 hr of collection; avoid hemolysis.
Clinical Utility	Serum Albumin is used for the diagnosis of numerous diseases. Elevated levels of Albumin could be a result of dehydration. Low levels of Albumin may be caused by kidney or liver disease, infection, or severe burns.
Reference Range	3.5 – 5.7 g/dL
Schedule	Sunday – Saturday

102 Alkaline Phosphatase

Component

Alkaline Phosphatase

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 4 day(s) at 2-8°C; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	1 mL serum separated within 1 hr of collection; avoid hemolysis.
Clinical Utility	Evaluate hepatobiliary disease, bone disease associated with increased osteoblastic activity, and possible metastatic disease; detect cirrhosis, alcoholism, primary and metastatic neoplasia in liver and bone, healing infarct of heart and lung, infectious mononucleosis and many other entities. Transient elevations may be found during healing of bone fractures and the third trimester of pregnancy. Bone growth in children accounts for their alkaline phosphatase elevation.
Reference Range	34.0 – 104.0 U/L
Schedule	Sunday – Saturday

0233 Allergy Panel - Eastern

Component

Tree	Silver Birch Walnut Box Elder Elm, White Oak, White
Grass	Cocksfoot (Orchard) Cocklebur English Plantain/Ribwort Lamb's Quarters Timothy
Dust	House Mite (D farine)
Dander	Dog Cat
Insect	Cockroach Mix
Mold	Alternaria Aspergillus Cladosporium Penicillum
Food	Peanut

Specimen Req Stability	2 mL Serum; Serum Separator Tube (red-grey speckled top) Refrigerated - 7 Day(s), Frozen - 1 Month(s) Note: Specimen will be discarded after 14 days of storage.	
Reference Range	kUA/L <0.35 0.35- 0.70 0.70 – 3.50 3.50 – 17.50 > 17.5	Clinical Implications Normal Low Level Moderate Level High Level Very High Level
Schedule	Monday – Friday	

197 **Alpha-Fetoprotein Tumor Marker**

Component

Alpha-Fetoprotein

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage	
Clinical Utility	Monitor the course of liver or testicular cancer, patient response to treatment, and disease recurrence. Alpha-fetoprotein (AFP) is elevated in the serum of more than 70% of patients with hepatocellular carcinoma (HCC) and 70% of patients with non-seminomatous testicular carcinoma. In non-seminomatous testicular carcinoma, tumor recurrence is often accompanied by a rise in AFP.	
Reference Range	0.0 – 9.0 ng/mL	
Schedule	Sunday – Saturday	

106 **ALT (SGPT)**

Component

Alanine Transaminase (ALT)

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 3 day(s) at 2-8°C; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage	
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.	
Clinical Utility	Most commonly used and most prevalent in liver disease assessment. ALT = Alanine Aminotransferase. In comparison AST (aspartate aminotransferase) is present to the same extent in heart, skeletal muscle, and liver. AST and ALT increase rapidly during the onset of viral jaundice and remain elevated for 1-2 weeks. In toxic hepatitis, ALT and AST are elevated, but LD (lactate dehydrogenase) is elevated to an even greater extent as a result of hepatic cell	

necrosis. ALT and AST serum activities are elevated in myocardial infarction, renal infarction, progressive muscular dystrophy, and numerous diseases that only secondarily affect the liver, such as Gaucher's Disease, Niemann-Pick disease, infectious mononucleosis, myelocytic leukemia, diabetic ketacidosis, and hyperthyroidism.

Reference Range 7.0 – 52.0 U/L

Schedule Sunday-Saturday

105 Amylase

Component

Amylase

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability Ambient - 7 Day(s), Refrigerated - 1 Month(s)
 Note: Specimen will be discarded after 14 days of storage.

Collection notes Avoid hemolysis.

Clinical Utility Amylases are enzymes that degrade complex carbohydrate molecules into smaller components. Amylase is increased in serum and urine of patients suffering from pancreatitis. In acute pancreatitis a transient rise in serum amylase activity occurs within 2 to 12 hours of the onset; levels return to normal by the third or fourth day. The magnitude of elevation of serum enzyme activity is not related to the severity of pancreatic involvement; however, the greater the rise, the greater the probability of acute pancreatitis.

Reference Range 29.0 – 103.0 U/L

Schedule Sunday – Saturday

301 ANA Screen

Component

Antinuclear Antibodies

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability Ambient - 7 Day(s), Refrigerated - 1 Month(s)
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility Screening test for the detection of antibodies to nuclear antigens. Over 96% of patients with systemic lupus erythematosus (SLE) have values above 7.5 IU/mL. Less than 3-4% of healthy patients display ANA concentrations of 7.5 IU/mL or higher.

Reference Range < 0.7 Negative
 0.7 – 1.0 Equivocal

> 1.0 Positive

Schedule Monday – Saturday

302 Antistreptolysin O Antibodies

Component

ASO

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hours at 2 - 8°C; 1 month at -20°C
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility Group A streptococci cause different infections: skin diseases or angina tonsillaris that may be followed by glomerulonephritis acute endocarditis, sydenham's chorea, and acute rheumatic fever, when the upper respiratory tract is infected. These infections can later lead to damage of the heart or the kidneys. Early diagnosis, efficient treatment and monitoring of the patient can reduce these risks. The most clinically important antibody reactions are found against streptolysin O deoxyribonuclease and streptococcal-hyaluronidase. 85% of patients with acute rheumatic fever show increased ASO levels.

Reference Range 0 – 200 IU/mL

Schedule Monday – Saturday

354 Apolipoprotein A1

Component

Apolipoprotein A1

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 1 week(s) at 2 - 8°C; 1 year(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage

Clinical Utility Apolipoprotein A1 is the primary protein associated with HDL cholesterol. Like HDL cholesterol, increased concentrations are associated with reduced risk of cardiovascular disease.

Reference Range 100 – 200 mg/dL

Schedule Monday – Saturday

355 Apolipoprotein B

Component

Apolipoprotein B

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 week(s) at 2 - 8°C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Apolipoprotein B (APO B) has been reported to be a powerful indicator of CAD. In some patients with CAD, APO B is elevated even in the presence of normal LDL cholesterol.
Reference Range	50 – 155 mg/dL
Schedule	Monday – Saturday

107 AST (SGOT)

Component

Aspartate Aminotransferase (AST)

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 day 15 – 25°C; 4 week(s) at 2 – 5 °C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	Serum AST is one group of enzymes which catalyzes the interconversion of amino acids and keto acids by transfer of amino groups. Transaminases are widely distributed in body tissues with significant amounts found in the heart and liver. Lesser amounts are also found in skeletal muscles, kidneys, pancreas, spleen, lungs and brain. Injury to these tissues results in the release of the AST enzyme to general circulation.
Reference Range	13.0 – 39.0 U/L
Schedule	Sunday – Saturday

1255 B-cell Clonality Panel (IGH, IGK), PCR

ComponentClinical Indication
Specimen Source
Specimen ID
IGH
IGK

Interpretation

Specimen Req Stability	3 mL Whole Blood EDTA (lavender top) 7 day(s) at 2-8°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	This assay, which interrogates the immunoglobulin kappa light chain gene (IGK) and the immunoglobulin heavy chain (IGH), by a PCR method based on the BIOMED-2 consensus, is useful for establishing clonality of B-cell lymphoid neoplasms. It can be used also for identification of minimal residual disease or early recurrence in patients with a previous diagnosis of a B-cell neoplasm. Testing for both IGH and IGK gene rearrangements is reported to detect up to 99% of B-cell malignancies, compared to 80-90% for IGH and 85-90% for IGK alone.
Schedule	Sunday-Saturday

11 Basic Metabolic Panel

Component

Sodium
 Potassium
 Chloride
 Bicarbonate
 Glucose
 Urea Nitrogen
 Creatinine
 BUN/Creatinine Ratio
 Calcium (Total)

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) Ambient – 24 Hour(s), Refrigerated – 72 Hour(s), Frozen – 2 Month(s) Note: Specimen will be discarded after 14 days of storage.
Collection Notes	To avoid loss of bicarbonate, do NOT aliquot the specimen. Submit a spun SST for analysis. The patient should fast 10 – 16 hours prior to collection of specimen. State patient's age and gender on test requisition form. Avoid hemolysis and gross lipemia.
Schedule	Sunday-Saturday

1086 Beta-2-Glycoprotein I IgA Abs

Component

B2-Glycoprotein I (IgA) Ab

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	Beta-2-Glycoprotein 1, apolipoprotein H, is a cofactor in antiphospholipid antibody binding and is the critical antigen in the antiphospholipid antibody syndrome. Beta-2-Glycoprotein 1 Antibody is more specific than Cardiolipin Antibody that may express reactivity in patients with syphilis and other infectious diseases.
Reference Range	< 7.0 U/mL Negative 7 – 10 U/mL Equivocal > 10 U/mL Positive
Schedule	Sunday – Saturday

1084
Beta-2-Glycoprotein I IgG Abs
Component

B2-Glycoprotein I (IgG) Ab

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	Beta-2-Glycoprotein 1, apolipoprotein H, is a cofactor in antiphospholipid antibody binding and is the critical antigen in the antiphospholipid antibody syndrome. Beta-2-Glycoprotein 1 Antibody is more specific than Cardiolipin Antibody that may express reactivity in patients with syphilis and other infectious diseases.
Reference Range	< 7.0 U/mL Negative 7 – 10 U/mL Equivocal > 10 U/mL Positive
Schedule	Sunday – Saturday

1085
Beta-2-Glycoprotein I IgM Abs
Component

B2-Glycoprotein I (IgM) Ab

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
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Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.	
Clinical Utility	Beta-2-Glycoprotein 1, apolipoprotein H, is a cofactor in antiphospholipid antibody binding and is the critical antigen in the antiphospholipid antibody syndrome. Beta-2-Glycoprotein 1 Antibody is more specific than Cardiolipin Antibody that may express reactivity in patients with syphilis and other infectious diseases.	
Reference Range	< 7.0 U/mL	Negative
	7 – 10 U/mL	Equivocal
	> 10 U/mL	Positive
Schedule	Sunday – Saturday	

147 **Beta-HCG**

Component

Beta-HCG, Total (Pregnancy)

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C	
	Note: Specimen will be discarded after 14 days of storage	
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.	
Clinical Utility	Primarily used for the confirmation of pregnancy.	
Reference Range	Male: 0.5 – 2.67 mIU/mL	
	Female: < 0.5 mIU/mL	
Schedule	Sunday – Saturday	

1255 **BCL2**

Component

Clinical Indication

Specimen Source

Specimen ID

Bcl-2

Interpretation

Specimen Req	3 mL Whole Blood EDTA (lavender top)	
Stability	7 day(s) at 2-8°C	
	Note: Specimen will be discarded after 14 days of storage	
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.	

Clinical Utility	45% of all patients with non-Hodgkin's lymphoma have a follicular lymphoma. More than 85% of follicular lymphomas and approximately 20% of diffuse large cell lymphomas carry at (14;18)(q32;Q21) gene translocation that causes deregulation of the expression of the bcl-2 gene, bcl-2 deregulation is associated with a poor prognosis. Detection of bcl-2 is useful in detecting and monitoring disease.
Schedule	Sunday-Saturday

130 Bicarbonate

Component

Bicarbonate

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) Several hour(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid loss of bicarbonate do NOT aliquot the specimen. Submit a spun SST for analysis.
Reference Range	21.0 – 31.0 mmol/L
Critical Value	< 10 mmol/L > 40 mmol/L
Schedule	Sunday – Saturday

113 Bilirubin Direct

Component

Bilirubin Direct

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 3 day at 2 – 8 °C; 3 months(s) at < -20°C Must be well protected from light. Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid loss of Bilirubin wrap the specimen in aluminum foil. Submit a spun SST for analysis.
Reference Range	0.03 – 0.18 mg/dL
Schedule	Sunday – Saturday

129 Bilirubin Total

Component

Bilirubin Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	3 day(s) at 2 - 8 °C; 3 month(s) at < -20°C Must be protected from light. Note: Specimen will be discarded after 14 days of storage
Collection notes	To avoid loss of Bilirubin wrap the specimen in aluminum foil. Submit a spun SST for analysis.
Reference Range	0.3 – 1.0 mg/dL
Schedule	Sunday – Saturday

136 BUN

Component

Urea Nitrogen

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 day 15 – 25°C; 3 day(s) at 2 – 5 °C; 2-3 months(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Reference Range	7.0 – 25.0 mg/dL
Critical Value	> 90 mg/dL
Schedule	Sunday – Saturday

1536 C-Reactive Protein, High Sensitivity (Inflammation)

Component

C-Reactive Protein High Sensitivity

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	11 days at 15-25°C; 2 month(s) at 2 - 8°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Lipemic, icteric, or hemolyzed samples are not suitable for analysis.
Reference Range	1.0 – 3.0 mg/L

Schedule Monday – Saturday

664 C3, Complement

Component

C3, Complement

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) Ambient - 72 hour(s), Refrigerated - 7 day(s), Frozen – 30 day(s) Note: Specimen will be discarded after 14 days of storage
Collection notes	Use only SST for collection. Centrifuge after clotting. Do not remove stopper or expose to air.
Clinical Utility	Activation of the complement system takes place via a classical and an alternative route. Depressed values are observed in a number of inflammatory and infectious diseases. Primary causes are systemic lupus erythematosus(SLE), rheumatoid arthritis, subacute bacterial endocarditis, viremia, parasitic infections or bacterial sepsis. As an acute phase protein C3 is produced to an increased extent during inflammatory processes. It is elevated in systemic infections, non-infectious chronic inflammatory conditions (primarily chronic polyarthritis) and physiological states (pregnancy).
Reference Range	87.0 – 200.0 mg/dL
Schedule	Sunday – Saturday

665 C4, Complement

Component

C4, Complement

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) Ambient - 72 hour(s), Refrigerated - 7 day(s), Frozen – 30 day(s) Note: Specimen will be discarded after 14 days of storage
Collection notes	Use only SST for collection. Centrifuge after clotting. Do not remove stopper or expose to air.
Clinical Utility	The complement system can be activated via the classical and the alternative route. A decrease in C4 is common, but complete absence is rare. A lowered concentration or the complete absence of C4 occurs in immunocomplex diseases, systemic lupus erythematosus (SLE) autoimmune thyroiditis and juvenile dermatomyositis. Low C4 with high dsDNA autoantibodies confirms the diagnosis of SLE and may help monitor activity.
Reference Range	19.0 – 52.0 mg/dL

Schedule Sunday – Saturday

684 CA 125
Component

CA 125

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Monitor the course of ovarian cancer, patient response to treatment, and disease recurrence. Serum CA 125 concentrations are elevated in about 80% of women with carcinoma of the ovary, 26% of women with benign ovarian tumors and 66% of women with non-neoplastic conditions, but in only 3% of normal healthy women. CA 125 should not be used alone to diagnose or screen for cancer, but it is useful for monitoring patients with an established diagnosis of a gynecological malignancy that is associated with elevated CA 125 at diagnosis.
Reference Range	0.0 – 35.0 U/mL
Schedule	Sunday – Saturday

529 CA 15-3
Component

CA 15-3

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Elevated serum CA 15-3 concentrations are found in 5% of stage I, 29% of stage II, 32% of stage III, and 95% of stage IV carcinoma of the breast. Most (96%) patients with a CA 15-3 increase of greater than 25% have disease progression. Most (nearly 100%) patients with a CA 15-3 decrease of greater than 50% are responding to treatment.
Reference Range	0.0 – 31.0 U/mL
Schedule	Sunday – Saturday

284 CA 19-9
Component

CA 19-9

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Useful for monitoring gastrointestinal, pancreatic, liver, and colorectal malignancies.
Reference Range	0.0 – 35.0 U/mL
Schedule	Sunday-Saturday
Reported	Next day

103 Calcium

Component

Calcium (Ionized)

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 7 day(s) at 15 – 25°C; 22 day(s) at 2 – 5 °C; 6 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	8.6 – 10.3 mg/dL
Critical Value	< 7.0 mg/dL > 13.0 mg/dL
Schedule	Sunday – Saturday

3374 Cardioplin Antibodies IgA

Component

Cardioplin Abs IgA

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	Cardioplin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjogren's syndrome.

Reference Range	< 14.0 U/mL	Negative
	14 – 20 U/mL	Equivocal
	> 20 U/mL	Positive

Schedule Sunday – Saturday

3372 Cardioliipin Antibodies IgG

Component

Cardioliipin Abs IgG

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hour(s) at 2-8°C; Frozen at < -20°C
 Note: Specimen will be discarded after 14 days of storage

Collection notes Avoid hemolysis. Avoid repeated freeze-thaw cycles.

Clinical Utility Cardioliipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjogren's syndrome.

Reference Range	< 10.0 U/mL	Negative
	10 – 40 U/mL	Equivocal
	> 40 U/mL	Positive

Schedule Sunday – Saturday

3373 Cardioliipin Antibodies IgM

Component

Cardioliipin Abs IgM

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hour(s) at 2-8°C; Frozen at < -20°C
 Note: Specimen will be discarded after 14 days of storage

Collection notes Avoid hemolysis. Avoid repeated freeze-thaw cycles.

Clinical Utility Cardioliipin Antibodies are seen in a subgroup of patients with autoimmune disorders, particularly Systemic Lupus Erythematosus (SLE), who are at risk for vascular thrombosis, thrombocytopenia, cerebral infarct and/or recurrent spontaneous abortion. Elevations of associated with increased risk have also been seen in idiopathic thrombocytopenic purpura, rheumatoid and psoriatic arthritis, and primary Sjogren's syndrome.

Reference Range	< 10.0 U/mL	Negative
	10 – 40 U/mL	Equivocal
	> 40 U/mL	Positive

Schedule Sunday – Saturday

1109 Centromere B Antibody

Component

Centromere B Abs

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C	
	Note: Specimen will be discarded after 14 days of storage	
Collection notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.	
Clinical Utility	Centromere antibodies are recognized as a serological marker of a form of systemic sclerosis or scleroderma that is commonly referred to as CREST syndrome (calcinosis, Raynaud's phenomenon, esophageal immotility, sclerodactyly, and telangiectasia). Patients with centromere antibodies tend to have a more benign form of scleroderma with less systemic involvement and these patients tend to produce no other antinuclear antibodies including SCL-70.	
Reference Range	< 7.0 U/mL	Negative
	7.0 – 10.0 U/mL	Equivocal
	> 10.0 U/mL	Positive
Schedule	Sunday – Saturday	

383 CEA

Component

CEA

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C	
	Note: Specimen will be discarded after 14 days of storage	
Collection notes	Use only SST for collection. Centrifuge after clotting. Do not remove stopper or expose to air.	
Clinical Utility	Carcinoembryonic antigen (CEA) monitors the course of adenocarcinoma of the lung, patient response to treatment, and disease recurrence. CEA has broad tumor specificity; CEA elevation is seen in cancers of the colon, rectum, stomach, breast, lung, pancreas, etc.	

Reference Range	0.0 – 3.0 ng/mL
Schedule	Sunday – Saturday
Reported	Same day

135 Chloride

Component

Chloride

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 1 week(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage
Reference Range	98.0 – 107.0 mmol/L
Critical Value	< 80.0 mmol/L > 115.0 mmol/L
Schedule	Sunday – Saturday

109 Cholesterol

Component

Cholesterol

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 7 day(s) at 2-8°C; 3 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	< 200.0 mg/dL
Schedule	Sunday – Saturday

3133 Cyclic Citrullinated Peptide Antibody IgG

Component

CCP Antibody (IgG)

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	A synthetic circular peptide containing citrulline called CCP IgG (cyclic citrullinated peptide) has been found to be better at discriminating Rheumatoid Arthritis patients from patients with other diseases such as

hepatitis C infection. Rheumatoid Arthritis Classification Criteria include CCP IgG Antibody, rheumatoid factor, C-reactive protein and erythrocyte sedimentation rate (ESR). Approximately 70% of patients with Rheumatoid Arthritis are positive for Anti-CCP IgG, while only about 2% of random blood donors and disease controls subjects are positive.

Reference Range	< 7.0 U/mL	Negative
	7.0 – 10.0 U/mL	Equivocal
	> 10.0 U/mL	Positive

Schedule Sunday – Saturday

20 Complete Blood Count + Diff

Component	Reference Range	Critical Values
WBC	3.8 – 10.5 10 ³ uL	< 2.0uL ; > 30uL
RBC Total Count	M: 4.2 – 5.8 10 ⁶ uL F: 3.8 – 5.2 10 ⁶ uL	
Hemoglobin	M: 13.0 – 17.0 g/dL F: 11.5 – 15.5 g/dL	< 7.0 g/dL ; > 22.0 g/dL
Hematocrit	M: 42.0 – 52.0 % F: 37.0 – 47.0 %	< 21.0% ; > 60.0%
MCV	M: 80.0 – 94.0 fL F: 80.0 – 90.0 fL	
MCH	27.0 – 34.0 pg	
MCHC	32.0 – 36.0 g/dL	
RDW	11.5 – 15.5 %	
Platelet Count	150 – 400 10 ³ uL	< 50 10 ³ uL ; > 800 10 ³ uL
MPV	7.4 – 10.4 fL	
Segmented Neutrophils %	40.0 – 75.0 %	
Segmented Neutrophils #	1.80 – 7.40 10 ³ uL	
Lymphocytes %	13.0 – 44.0 %	
Lymphocytes #	1.0 – 3.0 10 ³ uL	
Monocytes %	2.0 – 11.0 %	
Monocytes #	0.0 – 0.9 10 ³ uL	
Eosinophils %	0.0 – 6.0 %	
Eosinophils #	0.0 – 0.5 10 ³ uL	
Basophils %	0.0 – 2.0 %	
Basophils #	0.0 – 0.2 10 ³ uL	
RBC Morphology		
Reticulocyte	0.5- 1.5%	

Specimen Req A full lavender Whole Blood EDTA
 Stability 24 hour(s) at 15 - 25° C; 7 day(s) at 2 - 8° C
 Note: Specimen will be discarded after 7 days of storage

Schedule Sunday – Saturday

12 Comprehensive Metabolic Panel

Component

Sodium
 Potassium
 Chloride
 Bicarbonate
 Glucose
 Urea Nitrogen
 Creatinine
 Calcium (Total)
 Total Protein
 Albumin
 Alkaline Phosphatase
 Aspartate Transaminase (AST)
 Alanine Transaminase (ALT)
 Bilirubin Total
 BUN/Creatinine Ratio
 Globulin Total
 A/G Ratio

Specimen Req	1 mL Serum Separator Tube (red-grey speckled top)
Stability	7 day(s) at 15 – 25°C; 22 day(s) at 2 – 5 °C; 6 month(s) at < -20°C
Collection Notes	Sample must be protected from light in foil-wrap or amber tube. To avoid loss of bicarbonate DO NOT aliquot the specimen. Submit a spun SST for analysis. The patient should fast 10 – 16 hours prior to collection of specimen. State patient's age and gender on test requisition form.
Schedule	Sunday – Saturday

141 Cortisol (Serum)

Component

Cortisol

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Acetic and boric acid are acceptable additives. Add 12.5 mL of 50% acetic acid or 5 g of boric acid at the start of a 24 hour collection. Measure the total volume, mix the specimen and transfer the aliquot to a clean, leak proof screw cap tube. Record the total volume on specimen container and requisition form.
Clinical Utility	Asses adrenal function; particularly useful in the diagnosis of Cushing syndrome. Recent data suggest that urinary free cortisol concentrations can be significantly altered in patients taking inhaled corticosteroids.
Reference Range	6.7 – 22.6 ug/dL
Schedule	Monday, Wednesday, Friday

112 **Creatinine**

Component

Creatinine

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	7 day at 2 – 8 °C; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Icteric samples are not acceptable.
Reference Range	0.6 – 1.3 mg/dL
Critical Value	> 10.0 mg/dL
Schedule	Sunday – Saturday

110 **Creatine Kinase**

Component

Creatine Kinase Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	4 hours at 15 - 25°C; 8 - 12 hour(s) at 2 - 5°C; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection notes	Avoid hemolysis. Icteric samples are not acceptable.
Clinical Utility	Total creatine kinase is made up of the various isoenzyme components (CK-MM, CK-MB, and CK-BB). Increases in any one or more of these three isoenzymes will contribute to an increase in total creatine kinase. If total creatine kinase is elevated, consider running CK Isoenzymes to determine which component is elevated and also Troponin I, to rule out cardiac muscle injury, for clinical relevance of each isoenzymes.
Reference Range	30.0 – 223.0 U/L
Schedule	Sunday – Saturday

148 **Digoxin**

Component

Digoxin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
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Stability	7 day(s) at 2 - 8°C; 6 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	The test to measure digoxin is ordered at the beginning of drug therapy to ensure correct dosage. Digoxin takes approximately one to two weeks to reach a steady level in the blood and in the target organ, the heart. A test done at that time will reflect more accurately whether a person is receiving the right amount of digoxin.
Reference Range	0.8 – 2.0 ng/mL
Critical Value	> 2.5 ng/mL
Schedule	Monday, Wednesday, Friday

Dilantin

See Phenytoin, Free, #151

332 DNA (ds) Antibody

Component

DNA (ds) Antibody

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage	
Clinical Utility	dsDNA Antibody is detected in patients with active systemic lupus erythematosus (SLE) and approximately 20% of patients with mixed connective tissue disease.	
Reference Range	< 10.0 U/mL	Negative
	10.0 – 15.0 U/mL	Equivocal
	> 15.0 U/mL	Positive
Schedule	Sunday – Saturday	

5000 Drug Comprehensive Panel

<u>Component</u>	<u>Cutoff Value</u>	<u>5008 - Anticonvulsives</u>	
5001 - Alcohol		❖ Gabapentin	>1000 ng/mL
❖ Ethyl Glucuronide	>250 ng/mL	❖ Pregabalin	>1000 ng/mL
❖ Ethyl Sulfide	>50 ng/mL	5011 - Antidepressants	
5004 - Amphetamines		❖ Amitriptyline	>25 ng/mL
❖ Amphetamine	>250 ng/mL	❖ Doxepin	>25 ng/mL
❖ Methamphetamine	>150 ng/mL	❖ Imipramine	>25 ng/mL
❖ Methylphenidate	>10 ng/mL	❖ Nortriptyline	>100 ng/mL

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❖ Desipramine >20 ng/mL

5017 - Barbiturates

 ❖ Butalbital >200 ng/mL
 ❖ Pentobarbital >200 ng/mL
 ❖ Butobarbital >200 ng/mL
 ❖ Phenobarbital >200 ng/mL
 ❖ Secobarbital >200 ng/mL

5023 - Benzodiazepines

 ❖ Alprazolam >100 ng/mL
 ❖ Alpha-Hydroxyalprazolam >40 ng/mL
 ❖ Clonazepam >100 ng/mL
 ❖ 7-Amoniclonazepam >100 ng/mL
 ❖ Diazepam >100 ng/mL
 ❖ Nordiazepam >100 ng/mL
 ❖ Flunitrazepam >100 ng/mL
 ❖ 7-Aminoflunitrazepam >50 ng/mL
 ❖ Hydroxyethylflurazepam >20 ng/mL
 ❖ Lorazepam >50 ng/mL
 ❖ Oxazepam >100 ng/mL
 ❖ Temazepam >50 ng/mL
 ❖ Triazolam >20 ng/mL
 ❖ Hydroxytriazolam >20 ng/mL

5038 - Illicits

 ❖ 6MAM >10 ng/mL
 ❖ a-PVP >25 ng/mL
 ❖ Benzoylcgonine(Cocaine) >50 ng/mL
 ❖ LSD >50 ng/mL
 ❖ MDA >50 ng/mL
 ❖ MDEA >50 ng/mL

5076 - Non-Opioid Analgesics

 ❖ Tramadol >200 ng/mL
 ❖ O-Desmethyl-Cis-Tramadol >100 ng/mL
 ❖ Tapentadol >50 ng/mL

5080 - Non-Benzo Hypnotics

 ❖ Zolpidem >10 ng/mL
 ❖ Zolpidem-Phenyl-COOH >50 ng/mL

5083 - Miscellaneous Drugs

 ❖ Dextromethorphan >150 ng/mL
 ❖ Ketamine >20 ng/mL
 ❖ Cotinine >100 ng/mL
 ❖ Phentermine >100 ng/mL

❖ MDMA >50 ng/mL

 ❖ MDPV >50 ng/mL
 ❖ Mephedrone >100 ng/mL
 ❖ Methcathinone >50 ng/mL
 ❖ Methylone >25 ng/mL
 ❖ Phencyclidine (PCP) >25 ng/mL
 ❖ THC-COOH >50 ng/mL
 ❖ Cannabidiol >50 ng/mL
 ❖ 25I-NBOMe >25 ng/mL

5054 - Muscle Relaxants

 ❖ Carisoprodol >50 ng/mL
 ❖ Meprobamate >200 ng/mL

5057 - Opioids (Natural)

 ❖ Morphine >50 ng/mL
 ❖ Codeine >50 ng/mL

5060 - Opioids (Semi-Synthetic)

 ❖ Buprenorphine >50 ng/mL
 ❖ Norbuprenorphine >100 ng/mL
 ❖ Dihydrocodeine >50 ng/mL
 ❖ Desomorphine >25 ng/mL
 ❖ Hydrocodone >50 ng/mL
 ❖ Hydromorphone >50 ng/mL
 ❖ Oxycodone >50 ng/mL
 ❖ Oxymorphone >50 ng/mL

5069 - Opioids (Synthetic)

 ❖ Fentanyl >3 ng/mL
 ❖ Norfentanyl >10 ng/mL
 ❖ Meperidine >100 ng/mL
 ❖ Naloxone >100 ng/mL
 ❖ Methadone >100 ng/mL
 ❖ EDDP >100 ng/mL

Specimen Req 3 mL Urine; Sterile urine container

Stability 1 week(s) at 2 - 8°C

Note: Specimen will be discarded after 7 days of storage

Clinical Utility

Intended as a screen for the quantitative comprehensive analysis of drugs of abuse in human urine samples.

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Schedule

Monday-Friday

Reported

72 Hours

33

Drug of Abuse Screen Urine

Component

Opiates
 Cocaine Metabolites
 Benzodiazepines
 Cannabinoids
 Amphetamines
 Barbiturates
 Methadone
 Phencyclidine

Specimen Req	1 mL Urine; Sterile urine container
Stability	1 week(s) at 2 - 8°C Note: Specimen will be discarded after 7 days of storage
Clinical Utility	Intended as a screen for the qualitative analysis of drugs of abuse in human urine samples.
Reference Range	Negative
Schedule	Tuesday, Thursday, Saturday
Reported	Same day

246

ESR (Erythrocyte Sedimentation Rate)

Component

ESR

Specimen Req	1 EDTA Plasma (Lavender Tube)
Stability	Ambient – 12 Hours, Refrigerated – 7 days Note: Specimen will be discarded after 14 days of storage.
Collection notes	Clotted, or insufficient samples are not suitable for analysis.
Clinical Utility	ESR is an acute reactant, which can be used as a general screening aid for inflammatory diseases, infections, and neoplastic diseases. In addition to its usual value as an acute phase reactant, ESR in large concentration (>5.0 mg/L) predicts progression of erosions in rheumatoid arthritis. Elevated ESR is characteristic of bacterial, but not viral, meningitis or meningoencephalitis. It may be useful in monitoring the clinical course of these illnesses. ESR concentrations characteristically return to normal after 7 days of appropriate treatment or bacterial meningitis if no complications develop.
Reference Range	M: 0.0 – 15.0 mm/Hour F: 0.0 – 20.0 mm/Hour

185
Estradiol
Component

Estradiol

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)			
Stability	23 hour(s) at 20-25°C; 2 day(s) at 2 – 8°C; 6 month(s) at < -20°C			
	Note: Specimen will be discarded after 14 days of storage			
Reference Range	M:	52.8 – 63.2 pg/mL		
	F:	Follicular Phase	Ovulation Phase	Luteal Phase
		172.4-314.4	316.5-524.4	293.4-751.6
				Postmenopause
				51.5-313.3
Schedule	Sunday – Saturday			
Reported	Same day			

0424
Factor II
Component

Factor II

Specimen Req	1-3 mL Whole Blood EDTA; Lavender Tube
Stability	1 week at 2 - 8°C;
	Note: Specimen will be discarded after 14 days of storage.
Reference Range	Negative
Schedule	Monday, Wednesday, Friday
Reported	Same day

1966
Factor V
Component

Factor V

Specimen Req	1-3 mL Whole Blood EDTA; Lavender Tube
Stability	1 week at 2 - 8°C;
	Note: Specimen will be discarded after 14 days of storage.
Reference Range	Negative
Schedule	Monday, Wednesday, Friday

115 **Ferritin**

Component

Ferritin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	M: 23.9 – 336.2 ng/mL F: 11.0 – 306.8 ng/mL
Schedule	Sunday – Saturday

163 **Folate**

Component

Folate

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	8 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	5.9 – 24.8ng/mL
Schedule	Sunday – Saturday

139 **Follicle-Stimulating Hormone**

Component

Follicle-Stimulating Hormone

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hours(s) 2 - 10°C; Frozen at - 20 °C Note: Specimen will be discarded after 14 days of storage
Reference Range	M: 1.27 – 19.26 mIU/mL F: 3.85 – 22.51 mIU/mL
Schedule	Sunday – Saturday

0891 **Food Allergy Panel**

ComponentWheat IgE
Peanut IgE
Milk IgE

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 Shrimp IgE
 Egg White IgE
 Codfish IgE
 Corn IgE
 Sesame Seed IgE
 Soybean IgE
 Clam IgE
 Walnut IgE
 Scallop IgE

Specimen Req	2 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	Refrigerated - 7 Day(s), Frozen - 1 Month(s) Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Screening for allergens
Reference Range	< 0.35 kUA/l
Schedule	Tuesday, Thursday, Saturday

626
Fructosamine
Component

Fructosamine

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	3 day 15 – 25°C; 2 week(s) at 2 – 5 °C; 2 month(s) at (-15) – (-25)°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Avoid Hemolysis
Clinical Utility	Because the Half-life of serum proteins (average 17 days) is shorter than that of hemoglobin (average 60 days), fructosamine measurements offer the advantage of monitoring glucose status over a shorter time frame (1-3 weeks) than glycated hemoglobin (6-8 weeks). Serum fructosamine has been shown to be more sensitive than glycated hemoglobin in detecting deterioration in diabetic control after discontinuing oral hypoglycemic drugs. The fructosamine assay may be run every 2-3 weeks to monitor short-term changed in diabetic control. In addition, the fructosamine concentration determined on a single random sample provides a simple and reliable assessment of glucose homeostasis.
Reference Range	205.0 – 285.0 umol/L
Schedule	Sunday – Saturday

116
Gamma-glutamyl Transferase (GGT)
Component

GGT

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
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Stability	1 day 15 – 25°C; 4 week(s) at 2 – 5 °C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles.
Clinical Utility	GGT is useful in the evaluation of obstructive liver diseases, being more organ specific than Alkaline Phosphatase (ALP). GGT is also elevated in chronic alcoholics, when other tests are normal. Disproportionate elevation of ALP and GGT indicates drug induced cholestasis. GGT is also increased during antiepileptic therapy.
Reference Range	9.0 – 64.0 U/L
Schedule	Sunday – Saturday

1196
Gliadin Antibody IgA
Component

Gliadin Abs IgA

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)						
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage						
Clinical Utility	Detection of antibodies to gliadin, one of the major protein components of gluten, is a sensitive assay useful in diagnosing Celiac Disease. However, gliadin antibodies may be found in individuals without Celiac Disease; thus gliadin antibody assays are less specific than assays measuring antibodies to endomysium and transglutaminase. Recent work has revealed that gliadin-reactive antibodies from Celiac patients bind to a very limited number of specific epitopes on the gliadin molecule. Further, deamidation of gliadin results in enhanced binding of gliadin antibodies. Based on this information, assays using deamidated gliadin peptides bearing the celiac-specific epitopes have much higher diagnostic accuracy for Celiac Disease when compared to standard gliadin antibody assays.						
Reference Range	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">< 7.0 U/mL</td> <td>Negative</td> </tr> <tr> <td>$7.0 - 10.0$ U/mL</td> <td>Equivocal</td> </tr> <tr> <td>> 10.0 U/mL</td> <td>Positive</td> </tr> </table>	< 7.0 U/mL	Negative	$7.0 - 10.0$ U/mL	Equivocal	> 10.0 U/mL	Positive
< 7.0 U/mL	Negative						
$7.0 - 10.0$ U/mL	Equivocal						
> 10.0 U/mL	Positive						
Schedule	Sunday – Saturday						

1197
Gliadin Antibody IgG
Component

Gliadin Abs IgG

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage

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Clinical Utility

Detection of antibodies to gliadin, one of the major protein components of gluten, is a sensitive assay useful in diagnosing Celiac Disease. However, gliadin antibodies may be found in individuals without Celiac Disease; thus gliadin antibody assays are less specific than assays measuring antibodies to endomysium and transglutaminase. Recent work has revealed that gliadin-reactive antibodies from Celiac patients bind to a very limited number of specific epitopes on the gliadin molecule. Further, deamidation of gliadin results in enhanced binding of gliadin antibodies. Based on this information, assays using deamidated gliadin peptides bearing the celiac-specific epitopes have much higher diagnostic accuracy for Celiac Disease when compared to standard gliadin antibody assays.

Reference Range	< 7.0 U/mL	Negative
	7.0 – 10.0 U/mL	Equivocal
	> 10.0 U/mL	Positive

Schedule	Sunday – Saturday
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1325 **Glomerular Filtration Rate (GFR), Estimated**

Component

Creatinine
 Glomerular Filtration Rate (calculation)

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	7 day at 2 – 8 °C; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage

Clinical Utility	Glomerular Filtration Rate (GFR) is the index of kidney function.
Schedule	Sunday-Saturday

117 **Glucose**

Component

Glucose

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	8 hour(s) at 15 - 25°C; 72 hour(s) at 2 - 8°C Note: Specimen will be discarded after 14 days of storage

Reference Range	55.0 – 100.0 mg/dL
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Critical Value	< 51.0 mg/dL > 449.0 mg/dL
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Schedule	Sunday – Saturday
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119P **Hemoglobin A1c**

Component

Hemoglobin A1c

Specimen Req	0.5 mL Whole Blood EDTA: Lavender Top Tube
Stability	24 hour(s) at 15 - 25° C; 7 day(s) at 2 - 8° C
	Note: Specimen will be discarded after 7 days of storage
Reference Range	< 5.7 %
Schedule	Monday – Saturday

27 Hepatic Function Panel

Component

Albumin
 Bilirubin Total
 Bilirubin Direct
 Alkaline Phosphatase
 Aspartate Transaminase (AST)
 Alanine Transaminase (ALT)
 Total Protein

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	Ambient - 7 Day(s), Refrigerated - 1 Month(s)
	Note: Specimen will be discarded after 14 days of storage.
Collection Notes	Sample must be protected from light in foil-wrap or amber tube. 1 mL serum separated within 1 hr of collection; avoid hemolysis.
Reference Range	Refer to individual tests
Schedule	Sunday – Saturday

324 Hepatitis A Virus Total Antibodies

Component

Hepatitis A Virus Antibodies

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	7 days at 2 - 8°C; 3 months at -20°C
	Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Evaluate hepatitis A
Reference Range	Nonreactive
Schedule	Sunday – Saturday

0254 Hepatitis Profile

Component

Hepatitis A Virus Antibodies
 Hepatitis B Virus Core Total Antibodies
 Hepatitis B Virus Surface Antibodies

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 Hepatitis B Virus Surface Antigen
 Hepatitis C Virus Total

Specimen Req Stability	1.5 mL Serum; Serum Separator Tube (red-grey speckled top) 7 days at 2 - 8°C; 3 months at -20°C Note: Specimen will be discarded after 14 days of storage.
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Collection Notes	**All positive HBsAG results are confirmed by neutralization and can require up to 2 mL of additional specimen. Sample requirement must be met to prevent a QNS (Quantity Not Sufficient) result.
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Schedule	Sunday – Saturday
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321 Hepatitis B Core Antigen

Component

Hepatitis B Virus Core Total Antibodies

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 5 days at 2 - 8°C; 2 months at -20°C Note: Specimen will be discarded after 14 days of storage.
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Reference Range	Nonreactive
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Schedule	Sunday – Saturday
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320 Hepatitis B Surface Antibodies

Component

Hepatitis B Virus Surface Antibodies

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey marble) 5 days at 2 - 8°C; 2 months at -20°C Note: Specimen will be discarded after 14 days of storage.
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Reference Range	Negative: < 8.5 mIU/mL Equivalent: 8.5 – 11.5 mIU/mL Positive: >11.5 mIU/mL
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Schedule	Sunday – Saturday
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319 Hepatitis B Surface Antigen w/ Reflex to Confirmation

Component

 Hepatitis B Virus Surface Antigens
 HBsAg Neutralization

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 5 days at 2 - 8°C; 3 months at -20°C Note: Specimen will be discarded after 14 days of storage.
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Reference Range Nonreactive

Schedule Sunday – Saturday

971 Hepatitis C Virus Antibodies

Component

Hepatitis C Virus Antibodies

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	21 days at 2 - 8°C; 3 months at -20°C
	Note: Specimen will be discarded after 14 days of storage.

Reference Range	Nonreactive
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Schedule	Tuesday-Saturday
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Reported	Same day
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677 Homocysteine

Component

Homocysteine

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) (must be frozen if longer)
	Note: Specimen will be discarded after 14 days of storage

Collection Notes	Patient should be fasting for 12 hours overnight, prior to collection. Specimen (plasma or serum) must be centrifuged within one hour of collection. Longer storage of whole blood samples at room temperature has been found to increase Homocysteine concentration in the plasma. Serum values are expected to be higher than plasma values. Slightly higher Homocysteine values are observed in non-fasting patients.
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Clinical Utility	Evaluate homocystinuria. Predictor of risk for ischemic stroke and myocardial infarction. Homocysteine is elevated in patients with cobalamin and/or folate deficiency, and is more sensitive than serum cobalamin and serum folate concentrations in diagnosing these vitamin deficiencies.
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Reference Range	4.0 – 15.4 umol/L
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Schedule	Sunday – Saturday
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701 IgA

Component

IgA Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
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Stability	3 day(s) at 2 - 8°C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Evaluate humoral immunity; monitor therapy in IgA myeloma. Selective IgA deficiency has an increased association with allergies, recurrent sinopulmonary infection, autoimmune disease, and the HLA A28, B14 or A1, B14 types. IgA deficiency accompanied by a deficiency of subclass IgG2 is associated with recurrent sinopulmonary infections.
Reference Range	66.0 – 433.0 mg/dL
Schedule	Sunday – Saturday

138
IgE
Component

IgE

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Immunoglobulin E (IgE) is firmly bound to mast cells and only trace amounts are normally present in serum. When antigen (allergen) cross-links two IgE molecules, the mast cell is stimulated to release histamine and other vasoactive amines. These vasoactive amines are responsible for the vascular permeability and smooth muscle contraction occurring in such allergic reactions as hay fever, asthma, urticaria, and eczema.
Reference Range	1.31 – 165.3 IU/mL
Schedule	Sunday-Saturday

703
IgG
Component

IgG Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	3 day(s) at 2 - 8°C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Evaluate humoral immunity; monitor therapy in IgG myeloma; quantitate IgG; evaluate patients, especially children and those with lymphoma, with propensity to infections. In congenital hypogammaglobulinemia, the IgG is less than 200 mg/dL by 6 months of age. Acquired hypogammaglobulinemia may occur at any age and has IgG concentrations less than 500 mg/dL. IgG concentrations may also be decreased in combines cell-mediated and antibody immunodeficiencies.
Reference Range	635.0 – 1741.0 mg/dL

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Schedule

Monday – Saturday

705
IgM
Component

IgM Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	3 day(s) at 2 - 8°C; 1 year(s) at < -20°C
	Note: Specimen will be discarded after 14 days of storage

Clinical Utility	Evaluate humoral immunity; establish the diagnosis and monitor therapy in macroglobulinemia of Waldernstrom or plasma cell myeloma. IgM levels are used to evaluate likelihood of in utero infections or acuteness of infection.
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Reference Range	45.0 – 281.0 mg/dL
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Schedule	Monday – Saturday
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1045
Immunoglobulin Quantitative Profile
Component

 IgG Total
 IgM Total
 IgA Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey marble)
Stability	3 day(s) at 2 - 8°C; 1 year(s) at < -20°C
	Note: Specimen will be discarded after 14 days of storage.

Schedule	Monday – Saturday
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120
Iron
Component

Iron

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	4 days at 2 - 8 °C
	Note: Specimen will be discarded after 14 days of storage

Collection Notes	Avoid hemolysis. Separate serum/plasma from the clot within 1 hour after collection. Morning specimen preferred.
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Reference Range	50.0 – 212.0 ug/dL
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Schedule	Sunday – Saturday
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121 Iron Binding Capacity

ComponentIron
Iron Binding Capacity Total
% Saturation

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	4 days at 2 - 8 °C Note: Specimen will be discarded after 14 days of storage.
Collection Notes	Avoid hemolysis. Separate serum/plasma from the clot within 1 hour after collection. Morning specimen preferred.
Clinical Utility	Increased total iron binding capacity is often seen in iron deficiency states, parental iron administration, pregnancy without iron supplements, and hepatitis or hepatic necrosis. Decreased concentrations are often seen in chronic disorders, kwashiorkor, chronic iron overloading, and malignancies.
Reference Range	250.0 – 410.0 ug/dL
Schedule	Sunday – Saturday

0696 Iron Saturation

ComponentIron
Iron Binding Capacity Total

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	4 days at 2 - 8 °C Note: Specimen will be discarded after 14 days of storage.
Collection Notes	Avoid hemolysis. Separate serum/plasma from the clot within 1 hour after collection. Morning specimen preferred.
Clinical Utility	Increased total iron binding capacity is often seen in iron deficiency states, parental iron administration, pregnancy without iron supplements, and hepatitis or hepatic necrosis. Decreased concentrations are often seen in chronic disorders, kwashiorkor, chronic iron overloading, and malignancies.
Reference Range	M: 20.0 – 50.0 % F: 20.0 – 55.0 %
Schedule	Sunday – Saturday

1208
Jo-1 Antibody
Component

Jo-1 Antibody

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2-8°C; Frozen at < -20°C Note: Specimen will be discarded after 14 days of storage	
Clinical Utility	Jo-1 Antibody is found in patients with idiopathic inflammatory myopathies including approximately one-fourth of patients with advanced polymyositis and dermatomyositis. Jo-1 Antibody is associated with pulmonary disease and arthropathy.	
Reference Range	< 7.0 U/ml 7.0 – 10.0 U/mL > 10.0 U/mL	Negative Equivocal Positive
Schedule	Sunday – Saturday	

1098
Kappa Free Light Chains
Component

Kappa FLC

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 21 days at 2 - 8 °C Note: Specimen will be discarded after 14 days of storage	
Collection Notes	Avoid hemolysis. Separate serum/plasma from the clot within 1 hour after collection. Morning specimen preferred.	
Clinical Utility	Aid in the evaluation of a number of conditions involving red cell production and destruction, iron metabolism, iron transport, deficiency, or anemia.	
Reference Range	3.3 – 19.4 mg/L	
Schedule	Sunday – Saturday	

123
Lactate Dehydrogenase
Component

Lactate Dehydrogenase

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 8 hour(s) at 15 - 25°C; 48 hours(s) at 2 -8 °C124 Note: Specimen will be discarded after 14 days of storage	
Collection Notes	Avoid hemolysis.	

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Clinical Utility

Assessment of myocardial infarction, liver disease, pernicious and megaloblastic anemia, pulmonary embolus, malignancy, and muscular dystrophy.

Reference Range

140.0 – 271.0 U/L

Schedule

Sunday – Saturday

1099
Lambda Free Light Chains
Component

Lambda FLC

 Specimen Req
 Stability

 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 21 days at 2 - 8 °C
 Note: Specimen will be discarded after 14 days of storage

Collection Notes

Avoid hemolysis. Separate serum/plasma from the clot within 1 hour after collection. Morning specimen preferred.

Clinical Utility

Aid in the evaluation of a number of conditions involving red cell production and destruction, iron metabolism, iron transport, deficiency, or anemia.

Reference Range

5.71 – 26.3 mg/L

Schedule

Sunday – Saturday

124
Lipase
Component

Lipase

 Specimen Req
 Stability

 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 4 week(s) at 2 - 8°C
 Note: Specimen will be discarded after 14 days of storage

Reference Range

11.0 – 82.0 U/L

Schedule

Sunday – Saturday

38
Lipid Profile
Component

 Triglycerides
 Cholesterol, Total
 HDL Cholesterol

 LDL (calc)
 Cholesterol/HDL Ratio

Reference Range

 < 150 mg/dL
 < 200 mg/dL
 M: >35.0 mg/dL
 F: >45.0 mg/dL
 < 100.0 mg/dL
 M: 0.0 – 4.97 mg/dL
 F: 0.0 – 4.44 mg/dL

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 7 day(s) at 2-8°C; 3 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage.
Collection notes	Patient should be fasting 10-16 hrs to collection of specimen. State patient's age and gender on test requisition form.
Schedule	Sunday – Saturday

739 Lithium

Component

Lithium

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 1 week(s) at 2 - 8°C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Lithium is widely used in the treatment of manic depression psychosis.
Reference Range	1.0 – 1.2 mmol/L
Critical Value	> 1.5 mmol/L
Schedule	Sunday – Saturday

140 Luteinizing Hormone

Component

Luteinizing Hormone

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	LH measurement is in evaluating the normalcy of hypothalamic-pituitary-gonadal axis.
Reference Range	M: 1.24 – 8.62 mIU/mL F: 2.12 – 10.89 mIU/mL
Schedule	Sunday – Saturday

0651 Lyme IgG/IgM

Component

Lyme IgG EIA

Lyme IgM EIA

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
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Stability	7 days at 2 - 8°C; 3 months at -20°C Note: Specimen will be discarded after 14 days of storage.
Collection Notes	Whole-cell sonicate (WCS) Borrelia burgdorferi antigens are utilized to measure both IgM and IgG antibody responses to B. burgdorferi in human serum, using an enzyme-immunoassay methodology (EIA).
Clinical Utility	Aid in the diagnosis of infection with the Lyme disease agent.
Reference Range	< 0.8
Schedule	Monday, Wednesday, Friday

125
Magnesium
Component

Magnesium

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 1 week(s) at 2 - 8°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Use fresh, nonhemolyzed fasting serum collected by standard venipuncture technique. Separate serum from the clot immediately to avoid false elevations due to elution of magnesium from the red cells. Hemolyzed specimens are unacceptable. Draw blood using a "clean stick" technique to avoid false increased values due to the admixture of blood with tissue fluid.
Reference Range	1.9 – 2.7 mg/dL
Schedule	Sunday – Saturday

990
Measles IgG
Component

Measles IgG Antibodies

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hours at 2 - 8°C; 3 months at -20°C Note: Specimen will be discarded after 14 days of storage.
Reference Range	< 0.9
Schedule	Sunday – Saturday

212
Microalbumin Urine Random
Component

Microalbumin Urine

Specimen Req Stability	1 mL Urine; Sterile urine container 1 week(s) at 2 - 8°C; 1 year(s) at < -20°C
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Collection Notes

Note: Specimen will be discarded after 1 days of storage
After voided midstream urine collection is complete, mix the specimen and transfer a 10 mL aliquot of urine to a clean leakproof container with a screw cap. Transfer tubes are available from *Enigma*. Refrigerated specimen is preferred (store at 2-8 C). Ship within 24 hours of collection by overnight courier.

Reference Range

< 20.0 mg/L

Schedule

Monday – Saturday

0396**MMR**

ComponentMeasles IgG Antibodies
Mumps IgG Antibodies
Rubella IgG AntibodiesSpecimen Req
Stability0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
48 hours at 2 - 8°C; 3 months at -20°C
Note: Specimen will be discarded after 14 days of storage.

Schedule

Sunday – Saturday

9650**Mumps IgG**

Component

Mumps IgG Antibodies

Specimen Req
Stability0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
48 hours at 2 - 8°C; 3 months at -20°C
Note: Specimen will be discarded after 14 days of storage.

Reference Range

< 0.9

Schedule

Sunday – Saturday

1698**MTHFR**

Component

MTHFR C677T, A1298C

Specimen Req
Stability1-3 mL Whole Blood EDTA; Lavender Tube
1 week at 2 - 8°C;
Note: Specimen will be discarded after 14 days of storage.

Clinical Utility

The Methylene tetrahydrofolate Reductase (MTHFR) enzyme plays a major role in homocysteine metabolism and contains several known polymorphisms, of which the most common is C677T. This mutation is reported to reduce MTHFR activity, resulting in hyperhomocysteinemia. This condition is a risk factor for cardiovascular disease, increased risk for arterial and venous thrombosis, and

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Fax: 718-851-3919

an increased risk for obstetrical complications, e.g., preeclampsia, abruptio placentae, fetal growth retardation, and stillbirth.

Reference Range	Negative
Schedule	Monday, Wednesday, Friday

787 Parathyroid Hormone

Component

Parathyroid Hormone, Intact

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	8 hour(s) at 15 - 25 °C; 2 day(s) at 2-8°C; 6 month(s) at -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	15.0 – 65.0 pg/mL
Schedule	Sunday, Tuesday, Saturday

151 Phenytoin

Component

Phenytoin Free

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 month(s) at 2 - 8°C; 3 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Anticonvulsant drugs are used in the treatment of epilepsy as well as seizure disorders that are secondary to other disease. The most common anticonvulsants are phenytoin. Elimination half-life of Phenytoin is 7-42 hours, and steady-state levels are reached at 7-10 days after initiation of therapy.
Reference Range	10.0 – 20.0 ug/mL
Critical Value	>30.0 ug/mL
Schedule	Sunday – Saturday

127 Phosphorus (Inorganic)

Component

Phosphorus

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	8 hour(s) at 15 - 25°C; 1 week(s) at 2 - 8°C Note: Specimen will be discarded after 14 days of storage

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Collection notes	Use only SST for collection. Centrifuge after clotting. Do not remove stopper or expose to air. Ambient or refrigerated only. Frozen or aliquoted specimens are not acceptable.
Reference Range	2.5 – 5.0 mg/dL
Schedule	Sunday – Saturday

134
Potassium
Component

Potassium

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 week(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage
Collection notes	Do not allow serum/plasma to remain on the cells after centrifugation. Potassium from the red cells will diffuse into the serum, giving falsely elevated results. Gross lipemic specimens should be cleared by ultracentrifugation.
Reference Range	3.5 – 5.1 mmol/L
Critical Value	< 3.0 mmol/L > 5.9 mmol/L
Schedule	Sunday – Saturday

181
Prolactin
Component

Prolactin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Collect 3-4 hours after patient has awakened
Clinical Utility	First test for work-up of galactorrhea (inappropriate lactation). Pituitary function test useful in the detection of Prolactin secreting pituitary tumors (microadenomas, macroadenomas) with or without galactorrhea, with or without structural evidence of sellar enlargement. An adult female premenopausal patient having amenorrhea and galactorrhea is highly suspect of pituitary prolactinoma and is a <i>candidate</i> for radiologic evaluation of the pituitary as well as serum prolactin levels. Elevated Prolactin may be associated with corpus luteum insufficiency or anovulation. Sequelae of hyperprolactinemia include amenorrhea, anovulation, and decreased bone density. Prolactin greater than 200 ng/mL in a non-pregnant woman is

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Fax: 718-851-3919

suggestive of a pituitary microadenoma; milder degrees of hyperprolactinemia (20-200 ng/mL) suggest compression of the pituitary stalk by a macroadenoma.

Reference Range

M:	2.64 – 13.13 ng/mL	
F:	Premenopausal	Postmenopausal
	(< 50 years of age)	(> 50 years of age)
	3.34 – 26.72 ng/mL	2.74 – 19.64 ng/mL

Schedule

Sunday – Saturday

578
Protein Electrophoresis, Serum
Component

 Protein Total
 Albumin
 Alpha 1
 Alpha 2
 Beta
 Gamma
 A/G Ratio
 Protein Electrophoresis

Reference Range

 6.40 – 8.90 g/dL
 3.70 – 4.70 g/dL
 0.20 – 0.40 g/dL
 0.60 – 1.00 g/dL
 0.60 – 1.00 g/dL
 0.60 – 1.40 g/dL
 1.00 – 2.50 ratio
 Interpretation

**Specimen Req
 Stability**

 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 7 Day(s) at 15 – 25°C; 1 Month(s) at 2 – 8°C
 Note: Specimen will be discarded after 14 days of storage.

Collection Notes

Plasma and hemolyzed serum are not suitable for analysis. Split into 2 plastic tubes.

Clinical Utility

Evaluate serum protein, nutritional status; work up liver disease, including chronic active hepatitis; useful in the evaluation of myeloma, macroglobulinemia of Waldenstrom,, collagen diseases, and monoclonal gammopathies; evaluate inflammatory states; evaluate low back pain, arthritis, amyloidosis; evaluate lymphoma, leukemia, anemia.

Schedule

Tuesday – Saturday

036
Prothrombin Time
Component

 Prothrombin Time
 International Normalized Ratio

**Specimen Req
 Stability**

 Full Plasma Citrated Blue Tube
 24 hour(s) at 15 – 25°C; 2 week(s) at < -20 °C
 Note: Specimen will be discarded after 7 days.

Collection notes

1. Draw blood into a buffered citrate collection tube (light blue top) Fill completely.
2. Mix by gentle inversion

Clinical Utility

This test measures the integrity of extrinsic and common pathway.

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Reference Range	P.T.	10.2 – 12.0 seconds
	INR	0.8 – 1.1 ratio

Critical Value	P.T.	> 35.0 seconds
	INR	> 4.0 ratio

Schedule	Monday – Saturday
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196
PSA
Component

Prostate Specific Antigen

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2 - 10 °C; Frozen at -20°C
	Note: Specimen will be discarded after 14 days of storage

Clinical Utility	PSA is elevated in about 30% of all cases with nodular prostatic enlargement. If all malignant tissue is removed at the time of radical prostatectomy, PSA should decline to undetectable levels within 3 weeks of the operation. Recurrence should then be checked quarterly in the first year and then at intervals of 4-6 months in succeeding years.
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Reference Range	0.0 – 4.0 ng/mL
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Schedule	Sunday – Saturday
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989
PSA, Free
Component

Prostate Specific Antigen

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2 - 10 °C; Frozen at -20°C
	Note: Specimen will be discarded after 14 days of storage

Clinical Utility	PSA is elevated in about 30% of all cases with nodular prostatic enlargement. If all malignant tissue is removed at the time of radical prostatectomy, PSA should decline to undetectable levels within 3 weeks of the operation. Recurrence should then be checked quarterly in the first year and then at intervals of 4-6 months in succeeding years.
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Schedule	Sunday – Saturday
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3550
PSA, Free & Total
Component

 Prostate Specific Antigen Total
 Prostate Specific Antigen Free
 % Prostate Specific Antigen Free

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	The percent free PSA is inversely proportional to the risk of prostate cancer. Elevated total PSA and low % free PSA indicate an increased likelihood of finding prostate cancer. Conversely, low total PSA and elevated % free PSA indicate a decreased likelihood of finding prostate cancer. Serial measurements of PSA are useful in determining recurrence of prostate cancer after treatment.
Reference Range	By Report
Schedule	Sunday – Saturday

305 Rapid Plasma Reagin (RPR)

Component

Rapid Plasma Reagin

Specimen Req Stability	1.0 mL Serum; Serum Separator Tube (red-grey speckled top) 1 week(s) at 2-8°; 1 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	RPR is a test for Syphilis. It is a qualitative and semi quantitative non treponemal flocculation test for the detection of regain antibodies in human serum
Reference Range	Nonreactive
Schedule	Sunday – Saturday

304 Rheumatoid Factor

Component

Rheumatoid Factor

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 8 day(s) at 2 - 8°C; 3 month(s) at -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Rheumatoid factor is essentially an IgM antibody that is directed toward IgG. Although it is a non-specific marker, it is associated with autoimmunity and rheumatoid arthritis. IgG antibodies may be altered to be recognized as “foreign,” resulting in an autoimmunity.
Reference Range	< 14.0 IU/mL
Schedule	Monday – Saturday

311 Rubella IgG Antibodies

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Fax: 718-851-3919

Component

Rubella IgG Antibodies

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	7 day(s) at 15 – 25°C; 1 month(s) at 2 – 8°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Presence of Rubella IgG antibodies indicates current or past infection or vaccination. Acute infections can be serologically confirmed by a significant (2 to 4-fold) rise in Rubella IgG antibody titer in acute and convalescent (collected >7 days after acute specimen) samples, or by the presence of Rubella IgM antibodies.
Reference Range	< 9.0 IU/mL
Schedule	Sunday – Saturday

0386
Scl-70 Antibody
Component

Scl-70 Abs

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)						
Stability	48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage.						
Clinical Utility	Scleroderma may be localized or diffuse (Progressive Systemic Sclerosis (PSS) that may involve skin, gastrointestinal tracts, lungs, vascular and cardiac systems, and kidneys. Scl-70 Antibody is present in approximately 40% of patients with PSS.						
Reference Range	<table> <tr> <td>< 7.0 U/mL</td> <td>Negative</td> </tr> <tr> <td>7.0 – 10.0 U/mL</td> <td>Equivocal</td> </tr> <tr> <td>> 10.0 U/mL</td> <td>Positive</td> </tr> </table>	< 7.0 U/mL	Negative	7.0 – 10.0 U/mL	Equivocal	> 10.0 U/mL	Positive
< 7.0 U/mL	Negative						
7.0 – 10.0 U/mL	Equivocal						
> 10.0 U/mL	Positive						
Schedule	Sunday – Saturday						

986
Sex Hormone Binding Globulin (SHBG)
Component

Sex Hormone Binding Globulin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 week(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Testosterone, dihydrotestosterone and estrogens circulate in serum bound to Sex Hormone Binding Globulin (SHBG). SHBG concentrations are increased in pregnancy, hyperthyroidism, cirrhosis, oral estrogen administration and by certain drugs. Concentrations are decreased by testosterone, hypothyroidism, cushings syndrome, acromegaly and obesity.

Reference Range	M: 13.3 – 89.5	
	F: Age 20 – 46	Age >47
	18.2 – 135.5	16.8 – 125.2 nmol/L
Schedule	Sunday – Saturday	

133 Sodium

Component

Sodium

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	1 week(s) at 2 – 8 °C	
	Note: Specimen will be discarded after 14 days of storage	
Reference Range	136.0 – 145.0 mmol/L	
Critical Value	< 125.0 mmol/L	
	> 155.0 mmol/L	
Schedule	Sunday – Saturday	

336 Sm Antibody

Component

Scl-70 Abs

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C	
	Note: Specimen will be discarded after 14 days of storage.	
Clinical Utility	Smith Antibody is highly specific for SLE. Smith Antibody is detected in approximately 15% of patients with systemic lupus erythematosus. Smith Antibody is detected in more than half of young African American women with SLE.	
Reference Range	< 7.0 U/mL	Negative
	7.0 – 10.0 U/mL	Equivocal
	> 10.0 U/mL	Positive
Schedule	Sunday – Saturday	

1545 SS-A

Component

SS-A

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)	
Stability	48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C	

Note: Specimen will be discarded after 14 days of storage.

Clinical Utility Sjogren's Antibody (SS-A) is detected in most patients with Sjogren's syndrome, 40-50% of patient with spontaneous systemic lupus erythematosus (SLE), approximately 60% of patients with ANA-negative SLE, 20% of patients with polymyositis, 5% of patients with rheumatoid arthritis and scleroderma, and most women who have delivered babies with neonatal lupus.

Reference Range

< 7.0 U/mL	Negative
7.0 – 10.0 U/mL	Equivocal
> 10.0 U/mL	Positive

Schedule Sunday – Saturday

1546

SS-B

Component

SS-B

Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility Sjogren's Antibody (SS-B) is detected in approximately 15% of patients with Sjogren's Syndrome. Sjogren's Antibody (SS-B) is present only if Sjogren's Antibody (SS-A) is also detected. The presence of both antibodies (SS-A and SS-B) strengthen the diagnosis of Sjogren's Syndrome and conveys prognostic information.

Reference Range

< 7.0 U/mL	Negative
7.0 – 10.0 U/mL	Equivocal
> 10.0 U/mL	Positive

Schedule Sunday – Saturday

1274

T-Cell Clonality Panel (TCRB, TCRG) PCR

Component

Clinical Indication

Specimen Source

Specimen ID

TCRG

TCRB

Interpretation

Specimen Req 3 mL Whole Blood EDTA (lavender top)
Stability 7 day(s) at 2-8°C
 Note: Specimen will be discarded after 14 days of storage

Collection notes Avoid hemolysis. Avoid repeated freeze-thaw cycles.

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Clinical Utility

This test, which interrogates both the T-cell receptor beta (TCRB) locus and the T-cell receptor gamma (TCRG) locus by a PCR method based on the BIOMED-2 consensus, is useful in patients with suspected T-cell malignancies or to evaluate for residual disease after treatment. Several published studies have demonstrated that the combination of TCRB and TCRG PCR using the BIOMED-2 method can detect virtually all clonal T-cell populations.

Schedule

Sunday-Saturday

187
Testosterone, Total
Component

Testosterone

 Specimen Req
 Stability

0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility

Reliable indicator of LH secretion and Leydig cell function; evaluate gonadal and adrenal function; helpful in the diagnosis of hyprogonadism in males and hirsutism and virilization in females. Total testosterone includes free testosterone, weakly bound testosterone (bound to albumin), and tightly bound testosterone (bound to SHBG or sex hormone binding globulin).

Reference Range

M: 270 – 1070 ng/dL
 F: 10 – 75 ng/dL

Schedule

Sunday – Saturday

186
Testosterone, Free
Component

Testosterone Free

 Specimen Req
 Stability

0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility

Reliable indicator of LH secretion and Leydig cell function; evaluate gonadal and adrenal function; helpful in the diagnosis of hyprogonadism in males and hirsutism and virilization in females. Total testosterone includes free testosterone, weakly bound testosterone (bound to albumin), and tightly bound testosterone (bound to SHBG or sex hormone binding globulin).

Reference Range

M: 4.7 – 24.4 ng/dL
 F: 0.06 – 0.68 ng/dL

Schedule

Sunday – Saturday

29 Thyroid Profile

Component

T3
 T3, Free
 T4, Free
 TSH

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Free thyroxine (Free T4) is used to evaluate thyroid function independent of binding protein status. T4 and T3 circulate in the blood as equilibrium mixtures of free and protein-bound hormones. Changes in concentration or affinity of TBG or other transport proteins profoundly affect the total hormone concentration in serum. The free hormone is independent of these binding protein variations and remains almost constant.
Schedule	Sunday – Saturday

352 Thyroglobulin Autoantibodies

Component

Thyroglobulin Autoantibodies

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hours at 2 - 8°C; or freeze at -20°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Useful in the differential diagnosis of congenital hypothyroidism and the management of nonmedullary differentiated thyroid carcinoma. Thyroglobulin and/or thyroid peroxidase autoantibodies occur in sera of most autoimmune thyroid disease patients. Individuals with thyroid peroxidase autoantibodies go on to develop hypothyroidism at a rate of about 3% per year.
Reference Range	< 4.0 IU/mL
Schedule	Sunday – Saturday

353 Thyroid Peroxidase Autoantibodies

Component

Thyroid Peroxidase Autoantibodies

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hours at 2 - 8°C; or freeze at -20°C Note: Specimen will be discarded after 14 days of storage.
Clinical Utility	Autoantibodies to thyroid peroxidase (TPO), which is the major antigen of thyroid microsomes, can be detected in the serum of patients with

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Fax: 718-851-3919

autoimmune thyroid disease (e.g., Hashimoto, Graves) and predict elevated serum TSH concentrations.

Reference Range < 9.0 IU/mL

Schedule Sunday – Saturday

146 Thyroid Stimulating Hormone (TSH)

Component

TSH

 Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hour(s) at 2 - 10 °C; Frozen at -20°C
 Note: Specimen will be discarded after 14 days of storage

Clinical Utility Differential diagnosis of primary hypothyroidism and hyperthyroidism from normal; differential diagnosis of primary hypothyroidism from secondary and tertiary hypothyroidism; thyroid function test (TSH is high in primary hypothyroidism, low in hyperthyroidism); evaluate hypothyroid patients receiving replacement doses of various thyroid hormone preparations; detect hypopituitarism; follow up on low T4 newborn screen results.

Reference Range 0.34 – 5.60 µIU/mL

Schedule Sunday – Saturday

252 Thyroxine, (T4) Free

Component

Thyroxine, (T4) Free

 Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hour(s) at 2 - 10 °C; Frozen at -20°C
 Note: Specimen will be discarded after 14 days of storage

Reference Range 0.61 – 1.12 ng/dL

Schedule Sunday – Saturday

1009 Tissue Transglutaminase Antibody IgA

Component

(tTG) Ab, IgA

 Specimen Req 0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 Stability 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage.

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Fax: 718-851-3919

Clinical Utility

Tissue Transglutaminase Antibody, IgA, is useful in diagnosing gluten-sensitive enteropathies, such as Celiac Sprue Disease, and an associated skin condition, dermatitis herpetiformis.

Reference Range

< 7.0 U/mL	Negative
7.0 – 10.0 U/mL	Equivocal
> 10.0 U/mL	Positive

Schedule

Sunday – Saturday

1027

Tissue Transglutaminase Antibody IgG

Component

(tTG) Ab, IgG

 Specimen Req
 Stability

0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C
 Note: Specimen will be discarded after 14 days of storage.

Clinical Utility

Celiac Disease is characterized by gluten intolerance leading to a chronic malabsorptive disorder due to inflammation of the intestinal mucosa and flattening of the epithelium. Several studies have demonstrated that the target endomysial antigen in IgA anti-gliadin and anti-reticulín assays has been identified as the calcium dependent, protein cross-linking, enzyme tissue transglutaminase.

Reference Range

< 7.0 U/mL	Negative
7.0 – 10.0 U/mL	Equivocal
> 10.0 U/mL	Positive

Schedule

Sunday – Saturday

131

Total Protein

Component

Total Protein

 Specimen Req
 Stability

0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
 1 week(s) 15 - 25°C; 1 month(s) at 2 - 5 °C
 Note: Specimen will be discarded after 14 days of storage

Reference Range

6.4 – 8.9 g/dL

Schedule

Sunday – Saturday

231

Transferrin

Component

Transferrin

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 week(s) at 2 – 5 °C; 40 day(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Differential diagnosis of anemia; monitor its effectiveness of treatment for anemia.
Reference Range	203.0 – 362.0 mg/dL
Schedule	Monday – Saturday

132 Triglycerides
Component

Triglycerides

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 day 15 – 25°C; 4 week(s) at 2 – 5 °C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Patient should be fasting 12 – 16 hours prior to collection of specimen. Avoid hemolysis.
Reference Range	< 150 mg/dL
Schedule	Sunday – Saturday

980 Triiodothyronine (T3)
Component

Triiodothyronine (T3)

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Thyroid function test, particularly useful in the diagnosis of T3 thyrotoxicosis and confirmation of hyperthyroidism. Needed in patients with clinical evidence of hyperthyroidism, in whom thyroid profile is normal or borderline.
Reference Range	87.7 – 178.0 ng/dL
Schedule	Sunday – Saturday

978 Triiodothyronine (T3), Free
Component

Triiodothyronine (T3) Free

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Clinical Utility	Used to evaluate thyroid function and binding protein status. In hyperthyroidism if TSH levels are low but the FT4 level is normal, a T3 measurement should be performed, since the serum T3 concentration is often elevated earlier in the course of hyperthyroidism and to a greater degree than the T4 concentration.
Reference Range	2.5 – 3.9 pg/mL
Schedule	Sunday – Saturday

1122 U1-snRNP
Component

U1-snRNP

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 – 8°C; 2 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage.						
Clinical Utility	Smith (Sm)/U1-RNP Antibody is detected in patients with mixed connective tissue disease (having features of systemic lupus erythematosus (SLE), scleroderma, and polymyositis).						
Reference Range	<table> <tr> <td>< 5.0 U/mL</td> <td>Negative</td> </tr> <tr> <td>5.0 – 10.0 U/mL</td> <td>Equivocal</td> </tr> <tr> <td>> 10.0 U/mL</td> <td>Positive</td> </tr> </table>	< 5.0 U/mL	Negative	5.0 – 10.0 U/mL	Equivocal	> 10.0 U/mL	Positive
< 5.0 U/mL	Negative						
5.0 – 10.0 U/mL	Equivocal						
> 10.0 U/mL	Positive						
Schedule	Sunday – Saturday						

0121 UIBC
Component

Uric Acid

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 4 day(s) at 15-25°C; 7 day(s) at 2 – 8 °C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles
Reference Range	155 – 355 ug/dL
Schedule	Sunday-Saturday

137 Uric Acid

Phone: 718-851-5773

Fax: 718-851-3919

Component

Uric Acid

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	3-5 day(s) at 2 – 5 °C; 6 month(s) at < -20°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Avoid hemolysis. Avoid repeated freeze-thaw cycles
Reference Range	M: 4.4 – 7.6 mg/dL F: 2.3 – 6.6 mg/dL
Schedule	Sunday – Saturday

030
Urinalysis
Component
Reference Range

Color	yellow
Clarity	clear
Glucose	neg
Bilirubin	neg
Ketones	neg
Specific Gravity	1.003 – 1.029
Blood	neg
pH	5.0 – 8.0
Protein	neg
Urobilinogen	0.0 – 1.0 mg/dL
Nitrite	neg
Leukocytes	neg
WBCs	0-4/hpf
RBCs	M: 0-3/hpf F: 0-5/hpf
Bacteria	none
Epithelial Cells	rare

Specimen Req	20-50 mL Sterile Urine Container or Tube
Stability	24 hour(s) at 2 – 8°C

Collection Notes: Collect a freshly voided random urine sample and pour approximately 20-50mL into a properly labeled urine container or tube. Label should have patient name and requisition ID number.

Schedule	Sunday – Saturday
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962
Valproic Acid
Component

Valproic Acid

Specimen Req	0.5 mL Serum; Serum Separator Tube (red-grey speckled top)
Stability	1 week(s) at 2 - 8°C; 1 year(s) at < -20°C Note: Specimen will be discarded after 14 days of storage

Collection Notes	Serum separator tubes are not acceptable; use polypropylene tubes and ship on cold pack by overnight courier. Collect at trough concentration, i.e. within 30 minutes of next dose.
Reference Range	50.0 – 100.0 ug/mL
Critical Value	> 101.0 ug/mL
Schedule	Sunday – Saturday

162 Vitamin B12

Component

Vitamin B12

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Reference Range	180.0 –914.0 pg/mL
Schedule	Sunday – Saturday

39 Vitamin B12 & Folate

Component

Folate

Vitamin B12

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Schedule	Sunday – Saturday

995 Vitamin D 25-OH

Component

Vitamin D (25-hydroxy)

Specimen Req Stability	0.5 mL Serum; Serum Separator Tube (red-grey speckled top) 48 hour(s) at 2 - 10 °C; Frozen at -20°C Note: Specimen will be discarded after 14 days of storage
Collection Notes	Refrigerated 48hr; otherwise freeze serum.
Reference Range	30.0 – 100.0 ng/mL



3611 14TH Ave. STE. 220
Brooklyn, NY 11218

Phone: 718-851-5773

Schedule

Monday – Friday

Fax: 718-851-3919