

**MEDICAL CENTER OF CENTRAL GEORGIA**  
**MEDICAL LABORATORIES COMMUNIQUE'**  
**VOLUME 21, NUMBER 3**  
**November 2008**

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**TOXICOLOGY**

**Change in Urine Drug Screen Orders:** Effective September 29, 2008 the orders available for performance of urine drug screens have changed. These changes were made to provide care givers the most specific orders possible to prevent unnecessary testing. All of the previous tests remain available just the way they are ordered has changed. The new orders are:

Medical Drug Screen 7 (includes: amphetamines, barbiturates, opiates, cannabinoids, cocaine, PCP and benzodiazepines) – Available Stat 24/7.

Medical Drug Screen 9 (includes: medical drug screen 7, plus oxycodone and methadone) – Available Routine Day Shift Only, beginning December 1, 2008 available Stat 24/7.

Medical Drug Screen 11 (includes: medical drug screen 9, plus propoxyphene and ethanol) – Available Routine Day Shift Only.

Urine Drug Screen Comprehensive (includes medical drug 9 plus chromatographic analysis for ~ 150 additional drugs). – Available Routine M-F Day Shift Only.

**MICROBIOLOGY**

**Rapid Group B *Streptococcus* (GBS)Antigen:**  
The laboratory is discontinuing the rapid GBS test for vaginal or cervical swab analysis effective December 1, 2008. The rapid GBS antigen test currently in use is being discontinued by the manufacturer.

The rapid antigen assay has been shown to be significantly less sensitive than the GBS culture procedure which is the only GBS screening procedure recommended by CDC for prenatal screening.

**CHEMISTRY**

**Ceruloplasmin:** The laboratory is now performing ceruloplasmin analysis on serum. The assay is performed daily Monday through Sunday with a 10 a.m. cut-off. Split sample correlation studies with a reference laboratory demonstrated good correlation. Regression analysis yielded a slope of 0.93 and an intercept of 2.4 with an “r” of 0.970.

**ACTH:** The laboratory will begin adrenocorticotrophic hormone (ACTH) testing on plasma

effective December 1, 2008. Testing will be performed daily on Monday

through Sunday with a 10 a.m. cut-off time. Split sample correlation studies with our primary reference laboratory, Mayo Medical Laboratories which uses the same method, demonstrated excellent correlation. Regression analysis yielded a slope of 1.08 and an intercept of -0.45 with an “r” of 0.998.

**New Estradiol Method:** On November 24, 2008 the laboratory will implement a new Estradiol method. The new assay has been restandardized to the international reference method, Isotope Dilution-Gas Chromatography (ID-GDMS). We have evaluated the new assay and have confirmed that patient values with the new standardization will read approximately 20% higher than previously. Correlation analysis yielded a slope of 1.23 & intercept of -63 with an “r” of 0.99.

**URINALYSIS**

**Change in Urinalysis Critical Value:** The laboratory Critical Value List will be modified effective November 24, 2008 to eliminate the combination of a Urine glucose > 1000 mg/dl & a Positive Ketone as a critical value. Consequently urine samples with this combination of results will no longer be called.

**HEMATOLOGY**

**Thrombelastograph (TEG) Testing**

**Expansion:** Effective November 3, 2008 the laboratory will expand TEG testing performance to include the Night Shift. This expansion will provide optimal on demand TEG analysis 24 hr. per day Monday through Friday.

TEG analysis will be available during the weekends only by special request to the laboratory weekend supervisor. Due to the time required to warm reagents and QC instrumentation the analysis time for a weekend performed TEG will be approximately an hour longer.

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**Test Information Guide – New Tests**

**Ceruloplasmin**

Specimen: Serum only  
Minimum Volume: 0.5 ml serum  
Test Code: Ceru  
Stability: 8 hr Room Temp  
72 hr at 2 – 8° C  
3 months frozen  
Available: Monday – Sunday, 1st Shift  
Turnaround Time: 4 hr  
Method: Immunoassay - rate nephelometry  
CPT: 82390  
Normal Range: 22.9 – 49.0 mg/dL

**ACTH**

Specimen: EDTA plasma, in an ice-cooled tube  
Minimum Volume: 1.0 mL plasma  
Test Code: ACTH  
Collection: draw in an ice-cooled, lavender top (EDTA) tube. Centifuge immediately & separate plasma from cells. Place in a plastic vial and freeze if not tested immediately.  
Stability: 60 min on ice with cells,  
6 hr on ice separated plasma,  
4 weeks – frozen - 20° C  
Availability: Monday – Sunday 1<sup>st</sup> shift.  
Turnaround Time: 3 hr  
Method: Automated chemiluminescent immunoassay.  
Normal Range: 10 – 6- pg/mL (a.m. draw – 6 to 10 a.m.)  
Adults & Children  
Note: Samples for demonstration of circadian rhythm should be drawn between 6 AM – 10 AM and between 9 PM and Midnight. There are no normals for the PM collection.  
CPT: 82024

**Thrombelastograph (TEG) Analysis**

Specimen: Citrated whole blood within 1 hr of collection  
Minimum Volume: 2.7 mL  
Test Code: TEG  
Stability: 1 ½ hr at room temp  
Availability: Monday – Friday, 24 hr/day

Saturday & Sunday – special request only  
Turnaround Time: < 1 hr Monday – Friday  
< 2 hr Saturday - Sunday  
Normal Range: see report  
Note: Lab Hemostasis Order Form required, obtain from laboratory receiving section.

**Estradiol**

Specimen: Serum or heparin plasma  
Minimum Volume: 0.5 ml serum  
Test Code: E2  
Stability: 8 hr Room Temp  
24 hr – separate serum from gel tube.  
72 hr at 2 – 8° C  
3 months frozen  
Available: Monday – Sunday, 24 hr/day  
Turnaround Time: 4 hr  
Method: Automated chemiluminescent immunoassay.  
CPT: 82670  
Normal Range: male - <20 to 47 pg/mL  
Female – post-menopausal <20 to 40 pg/mL  
- Mid follicular 27 – 122 pg/mL  
- Mid luteal 49 to 291 pg/mL  
- Peri-ovulatory 95 to 433 pg/mL  
Note: Serum stored in a gel tube > 24 hr can not be tested and test will be cancelled.