OSF HealthCare Laboratory News

Fall 2018 1-800-533-6730

ATTENTION: New Specimen Requirements for GC/Chlamydia testing

Effective October 1, 2018, OSF Saint Francis laboratory will discontinue testing of ThinPrep® PreservCyt Transport Medium for detection of *Chlamydia trachomatis* and *Neisseria gonorrheae*. Due to so few requests, the testing could only be offered once per week, resulting in poor turnaround time and testing being cost prohibitive. The testing could only be done on samples not previously tested for Pap screening, further limiting its use.

After October 1st, the option for testing on ThinPrep® PreservCyt will be removed from Epic Beaker. When a cervical body site is chosen, it must be accompanied with a Cobas PCR dual sample kit. A random urine sample placed in a Cobas urine sample Kit is also appropriate. Requests for CT NG on ThinPrep® PreservCyt will be rejected.

ThinPrep needs to be removed as an acceptable source (body site) for CT NG testing on Oct 1st.

CGPRB (LAB826) *Chlamydia trachomatis* and *Neisseria gonorrheae*, PCR

CPRB6 (LAB828) *Chlamydia trachomatis*, PCR

GPRB6 (LAB1086) *Neisseria gonorrheae*, PCR

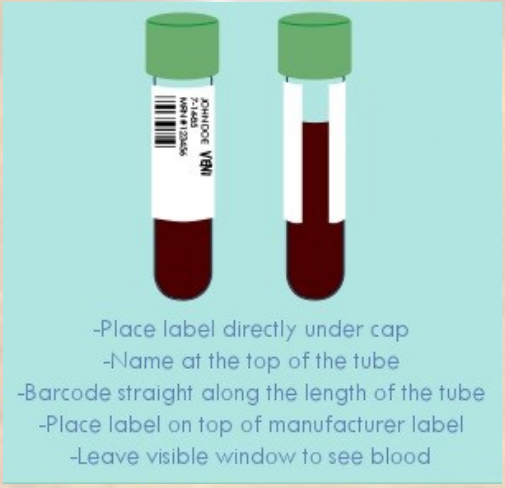
New tests and test changes

Effective 8/13/18, OSF turned on the following Mayo tests:
SFIN, Cerebrospinal Fluid (CSF) IgG Index, Mayo SFIN (LAB3115)
CDS1, CNS Demyelinating Disease Evaluation, Serum, Mayo CDS1 (LAB4977)
MOGFS, Myelin Oligodendrocyte Glycoprotein (MOG-IgG1) Fluorescence-Activated Cell Sorting (FACS) Assay, Serum, Mayo MOGFS (LAB4979)
MOGTS, Reflex, MOG FACS Titer, Serum, Mayo MOGTS (LAB4978)
On 8/13/18, OSF turned on HIVRFX, HIV 1/2 Confirmation, Reflex, HIVRFX (LAB4605) **This is a lab only orderable test** and turned off Mayo test HIVDI.
On 8/30/18, the following tests changes were turned on:
VWFGP, VWF GPIBM Activity, VWFGP (LAB4982) was turned on and the obsolete test RISTCO was turned off.
VEDOZ, Vedolizumab Quantification with Antibodies, Serum was turned on and Mayo test FVEDO was turned off.
CORD13, Cordstat 13 Toxicology, CORD13 (LAB5016)
MEC13, Meconium 13 Toxicology, MEC13 (LAB5015)
CKELR, Creatine Kinase Isoenzyme, Reflex, Serum, Mayo CKLER (LAB4893)
CKE, Reflex CK Isoenzyme Electrophoresis, Serum, Mayo CKE (LAB4894)

Proper specimen labeling

A little reminder this month about proper specimen labeling...Please ensure that the name (first and last) is spelled correctly and the patient's date of birth is correct by verifying with the patient if possible. Affix the specimen label to the tube with the name and barcode at the top of the tube such that the barcode is straight along the edge of the tube. Wrinkled, torn, or wrongly oriented labels are unacceptable. Place the label over the manufacturer's label and orient such that it leaves a visible window to see the blood.

Do not place more than one label on the tube (it is ok to place a barcode label over a hand-written label). If there is more than one test that shares the tube, simply include the additional test label in the specimen bag.



Questions about your bill?

Please contact our Patient Accounts and Access Center billing department at **(309) 683-6750**. The PAAC billing agents will be happy to assist you with your inquiry.

Clinical Rep:
Raechel Pfahl (309) 624-9100
Sabrina Mullins (309) 624-9144

Sales and Marketing Supervisor:
Gregg Simpson (309) 624-3927

Manager, Outreach Services:
Michael Cohlman (309) 624-9042

TEST SPOTLIGHT: *Celiac Disease*

What is it and how to achieve a Reliable & Definitive Diagnosis.

OSF HEALTHCARE SAINT FRANCIS MEDICAL CENTER SYSTEM LABORATORY & MAYO MEDICAL LABORATORIES

By: Raechel Pfahl, MLT (ASCP), BBA, MBA

What is Celiac Disease?

Celiac Disease is a condition in which (primarily) the patient's small intestinal tract is chronically inflamed, resulting in atrophy and sometimes permanent damage to the villae within the small intestine. This disease is caused by inflammation set into motion by the patient's immune response against gluten. Patient symptoms are typically non-specific, even though the diagnostic criteria of Celiac Disease are fairly well defined.

Presumptive Diagnostic Criteria

⇒ *Positive Serology*

⇒ *Intestinal biopsy demonstrating atrophy of villae*

Definitive Diagnostic Criteria

⇒ *Resolution of clinical symptoms after eliminating gluten from patient's diet*

⇒ *Generally accompanied by:*

- ***Conversion to negative serology***
- ***Reversal of villous atrophy in the patient's small intestinal tract***

Celiac Disease Testing at OSF HealthCare's System Laboratory…

Celiac testing at OSF is performed on the BioPlex® 2200 multiplex flow cytometry platform; which, because of its automated platform, greatly reduces the tests' turnaround times and specimen volumes; this platform reduces the amount of different specimen tubes required, as every test within the Celiac Disease Panel can be tested on a single, full gold top tube. The Celiac Panel includes a Tissue Transglutaminase IgA (TTGA), a Deaminated Gliadin Peptide IgA (DGP IgA), and a Total Immunoglobulin IgA (IgA). If the results for the Total IgA come back as decreased, the BioPlex® 2200 will automatically reflex a Tissue Transglutaminase IgG (TTGG) and a Deaminated Gliadin Peptide IgG (DGP IgG).

The OSF test code for the Celiac Panel with reflex is **CELAC**, and the orderable ID is **LAB1850**.

Celiac Disease by the Numbers

2.2 Million

- *Approximate number of people in the U.S. that are estimated to have Celiac Disease.*

83

- *Estimated percentage of Americans that have undiagnosed Celiac Disease or that are misdiagnosed with other conditions.*

6-10

- *Average number of years until a correct diagnosis is achieved.*

Keep in mind…

"Don't ask yourself what the world needs, ask yourself what makes you come alive. And then go out and do that. Because what the world needs is people who are alive." *-Howard Thurman*