IDPH has declared a Measles Outbreak

The Illinois Department of Public Health has declared a Measles outbreak in Champaign County. Currently, there are not any confirmed cases within the OSF HealthCare network — however, this could change in the coming days. Measles is a highly contagious disease that can spread rapidly via coughing and/or sneezing.

Common Symptoms of Measles include:

⇒ Fever—which can be very high (usually 101°F or greater by onset of rash)
⇒ Runny Nose
⇒ Cough
⇒ Red, watery eyes (similar to Pink Eye)
⇒ Sore Throat
⇒ Feeling run down and achy
⇒ Tiny white spots with bluish-white centers inside the mouth (Koplik spots—usually appear several days before onset of rash)
⇒ A rash** starting at the hairline which progresses (typically over 1-3 days) to the neck, upper trunk, lower trunk, all the way down to the feet

**Rash is most often the identified symptom of Measles, but also one of the last symptoms to appear.

If you have questions about Measles (MMR) immunity testing, please contact your OSF HealthCare Clinical Representative today!

NASH FibroTest now available at Mayo

As of March 12th, a new test for determination of Non-alcoholic Steato-hepatitis (NASH) is available to be performed at Mayo Clinic Laboratories and will no longer be sent out for comparable testing performed at LabCorp (Obsolete Mayo Code: FNSUR). Mayo’s test is the second generation of NASH testing, so it does differ a bit from the LabCorp test that was being performed previously. Mayo’s test, the NASH FibroTest (NSFIB) no longer requires a patient’s BMI to perform testing, the NSFIB reporting is fully quantitative, versus LabCorp test’s semi-quantitative results, and the NSFIB identifies an additional 4% of high-risk cases that would have previously been missed with the LabCorp test’s methodology. Please watch for a Test Spotlight article in one of the next upcoming issues of the OSF HealthCare Laboratory News for a more in-depth look at this new test!

New & Discontinued Tests at OSF

Effective on 1/24/2019:
1) OSF System Laboratory turned on new Mayo test code PPAP.

Effective on 2/28/2019:
1) OSF System Lab turned on new Mayo test code HERPB and discontinued LHSV.
2) OSF System Lab turned on new Mayo test code HERPV and discontinued LHSV.

OSF HealthCare’s EPIC Upgrade

OSF’s EMR upgrade occurred System-wide on Sunday, March 3rd and lasted for about 8 hours. We truly appreciate your patience with us as we went through this upgrade process. If you have any questions about the upgrade, please contact your Clinical Representative.

Fasting Status for Lipid Testing at OSF

OSF’s policy for the requirement of a fasting specimen for Lipid testing has been updated to reflect that, while still preferred, if a patient is not fasting, they will not be turned away. This policy update is in deference to multiple patient provider requests. The assessment of LDL Cholesterol is not impacted by fasting status. If you have any questions about this policy update, please contact Melinda Davis (Chemistry Laboratory Manager) at 309-624-9024.

Questions??

If you are an OSF Laboratory Outreach client and you have a billing-related question, please contact OSF’s Patient Accounts and Access Center billing department at (309) 683-6750.

The PAAC billing agents will be happy to assist you with your inquiry.

If you have other questions, please contact OSF’s Laboratory Customer Support department at (800) 533-6730 and they will direct you to the appropriate Laboratory Mission Partner.
**TEST SPOTLIGHT: Acute Tick-Borne Diseases**

**Testing for Lyme Disease, Anaplasmosis, Babesiosis, Ehrlichiosis, Relapsing Fever and Rocky Mountain Spotted Fever**

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

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

The Re-emergence of Tick-Borne Diseases and the Expanding Geographic Range of Ticks...

Tick-Borne Diseases (TBD’s) have, historically, only affected certain areas within the United States, as well as other areas worldwide; but in recent years, the geographic range for ticks has grown and is increasing more with each passing year. This increasing territorial growth rate for ticks increases the risk for exposure to TBD’s for all individuals residing in these geographic locations.

With the risk of exposure growing every year, and with the range of TBD’s, it is increasingly important that patient care providers recognize not only the signs/symptoms of TBD’s, but also when to test and what to test for based on how the patient is presenting. Throughout this article, the different types of TBD’s that are common throughout our Midwestern region will be highlighted.

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**Lyme Disease**

Lyme Disease is the most common of the TBD’s on the North American continent and is primarily caused by the bacterium *Borrelia burgdorferi*.

**Source of Infection:**
Species: Ixodes ticks

**Symptoms:**
Fever, headache, fatigue, and characteristic “bulls-eye” skin rash (e.g. erythema migrans—this rash presents in 70% or less in Lyme cases).

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**Rocky Mountain Spotted Fever (RMSF)**

RMSF is typically caused by the *Rickettsia rickettsia* bacterium in North America. It is important to note that RMSF can be quickly escalate to a fatal case without prompt treatment.

**Source of Infection:**
Species: 1) Dermacentor ticks  
2) Rhipicephalus ticks

**Symptoms:**
High fever, chills, severe headache, muscle aches, nausea, vomiting, and fatigue.

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**Ehrlichiosis**

In North America, ehrlichiosis (also referred to as “human monocytic ehrlichiosis”) is typically caused by *Ehrlichia chaffeensis*. However, there are other prevalent species of *Ehrlichia* (such as *E. ewingii*, *E. muris subsp. eauclairensis*) that have also been identified as causative agents of human disease in the United States. Most cases of ehrlichiosis are mild, but in some cases, the infection can be serious and life-threatening.

**Source of Infection:**
Species: 1) Amblyomma ticks for *E. chaffeensis & ewingii*  
2) Ixodes ticks for *E. muris eauclairensis*

**Symptoms:**
Flu-like symptoms including: fever, fatigue, malaise, myalgias/arthritis, and headaches.

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**Babesiosis**

In North America, babesiosis is typically caused by a protozoan parasite by the name of *Babesia microti*, but there are also documented cases of it being caused by *B. duncanii and B. divergens-like (MO-1 strain)* organisms. In most cases, babesiosis is typically mild; but, if older and/or asplenic patients are infected, babesiosis can be severe and/or life-threatening.

**Source of Infection:**
Species: Ixodes ticks

**Symptoms:**
Flu-like symptoms, including fever, fatigue, malaise, and headache.
* Patients may also have hepatomegaly and/or splenomegaly.
**In severe cases, patients may present with hemolysis, acute respiratory distress syndrome, and/or shock.

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**Anaplasmosis**

Human granulocytic anaplasmosis (HGA), is caused by the intracellular bacterium *Anaplasma phagocytophilum*. Anaplasmosis may be fatal, if left untreated, even in previously healthy people.

**Source of Infection:**
Species: Ixodes ticks

**Symptoms:**
Fever, headache, muscle pain, malaise, chills, nausea, abdominal pain, cough, and confusion.

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**If you have further questions about Mayo testing or about any of the information in this educational spotlight, please contact your OSF Laboratory Clinical Representative today!**

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Sabrina Mullins ..........................309-624-9144