HML UPDATE
For Our Valued HML Clients

Fall 2017

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LABWORKS/ALIAS

HealthEast will begin to utilize a patient ALIAS labeling workflow to minimize the number of duplicate patient records being created. This workflow applies to LabWorks/Interfaced orders only.

There are patients that have different names in the HealthEast Epic system and LabWorks. For example, a patient may be Dorothy Johnson in the HealthEast Epic system and Dottie Johnson in the LabWorks/Interface. It is correct that they are the same patient based on other demographics, but their names are different.

We understand our clients want test results to cross into their records with the name they utilize in the LabWorks/Interface, not the name in HealthEast Epic system, if they are different. Consider a patient that has an INR every day for a week; every day a lab is ordered creates a new merge.

When a LabWorks label displays a patient alias, the word ALIAS will be on the label. This ALIAS name will be an indicator that the name is different from one system to the next.

This notification is for your information and will not impact resulting – only to streamline them.

Should you have questions or issues please contact HML Customer Service 651-232-3500.
HML will no longer accept faxed supply requests. Please visit the Online Supply Order Page at:
www.healtheast.org/hml
OR
https://www.healtheast.org/forms/form-hml-supply-request.html

Complete the requested information and click on “Submit Request”,
You will receive an email receipt confirming your order.
(If you do not receive an email confirmation of your order – your order did not go through, PLEASE RESEND)

Most supply orders turnaround times are within 5 -7 business days.

Please contact HML Customer Service 651-232-3500 option 5 with questions or concerns.
HML provides laboratory supplies - at NO Charge - for the collection and transport of specimens to be tested at HML. For compliance reasons, supplies ordered from HML cannot be used for internal testing or referred to other companies or vendors. Supplies ordered from HML must be sent to HML.

Effective May 1, 2017 – We will no longer be able to accommodate STAT, URGENT or ASAP supply requests. If you are in need of STAT, URGENT or ASAP supplies, please make alternate plans. Supplies may only be ordered online – faxed requests will not be accepted.

When completing your request you will be asked for - Facility Name, Facility Address, Your Name, Your Email Address, HML Client account number and a Phone Number.

When submitting your order - if you DO NOT receive an emailed confirmation of your supply order - the email address you provided is incorrect. This also means the HML supply team has not received your request and the order did not go through.

Please allow 5 to 7 business days, plus delivery time - to receive your supply order request.

Please plan ahead in your laboratory supply order requests for seasonal needs such as:
INFLUENZA
STREP THROAT
RSV
PERTUSSIS
What to know about the new bottles:

- Collection volumes have changed. Verify the optimal collection volume, listed in red text on the side of the bottle, before drawing the patient.
- Preparation of the collection site has not changed.
- Reduced size and weight, but same performance.
- Safer to use and transport bottles.
HML Testing Transitions - Wave 1

As noted in previous communications, The HealthEast Care System, including HealthEast Medical Laboratory is now part of Fairview Health Services. This is an exciting opportunity for HealthEast Medical Laboratory and Fairview Diagnostic Laboratory to come together and offer the best services for our clients. Our early integration efforts have been around external contractual agreements where our combined organization can reach better overall agreements. Over the last few weeks, HealthEast Medical Laboratory has been working on transitioning some of the testing we currently refer to Mayo Medical Laboratories to either Fairview, where they perform internally or to ARUP (Associated Regional Pathology Laboratory) based out of Salt Lake City, Utah. ARUP is a nationally renowned referral laboratory associated with the University of Utah.

The first wave of this transition is ready to move forward! The following charts show the highlights for what is changing in the next two weeks for Wave 1. Future announcements will follow with the subsequent waves expected to occur every 6 weeks.

Effective Tuesday, November 14th the following tests will be moving from Mayo to ARUP

<table>
<thead>
<tr>
<th>Current Test Code</th>
<th>New Test Code</th>
<th>Test Name</th>
<th>CPT Code(s)</th>
<th>Pricing</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAB3049</td>
<td>LAB3049</td>
<td>Strongyloides Antibody, IgG by ELISA, Serum</td>
<td>86682</td>
<td>$28.00</td>
</tr>
<tr>
<td>LAB580</td>
<td>LAB580</td>
<td>Vitamin A (Retinol), Serum or Plasma</td>
<td>84590</td>
<td>$17.00</td>
</tr>
<tr>
<td>LAB581</td>
<td>LAB581</td>
<td>Zinc, Serum or Plasma</td>
<td>84630</td>
<td>$15.00</td>
</tr>
<tr>
<td>LAB3085</td>
<td>LAB3085</td>
<td>Chromium, Serum</td>
<td>82495</td>
<td>$20.00</td>
</tr>
<tr>
<td>LAB817</td>
<td>LAB817</td>
<td>Copper, Serum or Plasma</td>
<td>82525</td>
<td>$16.00</td>
</tr>
<tr>
<td>LAB3118</td>
<td>Manganese, RBC</td>
<td>83785</td>
<td>$102.00</td>
<td></td>
</tr>
<tr>
<td>LAB3125</td>
<td>Manganese, Whole Blood</td>
<td>83785</td>
<td>$26.03</td>
<td></td>
</tr>
<tr>
<td>LAB3086</td>
<td>LAB3086</td>
<td>Cobalt, Serum or Plasma</td>
<td>83018</td>
<td>$30.05</td>
</tr>
<tr>
<td>LAB3058</td>
<td>LAB3058</td>
<td>Thiopurine Methyltransferase, RBC</td>
<td>82657</td>
<td>$50.00</td>
</tr>
<tr>
<td>LAB794</td>
<td>LAB794</td>
<td>Ehrlichia chaffeensis Antibodies, IgG &amp; IgM by IFA</td>
<td>86666 x 2</td>
<td>$38.38</td>
</tr>
<tr>
<td>LAB3127</td>
<td>Anaplasma phagocytophylum (HGA) Antibodies, IgG and IgM</td>
<td>86666 x 2</td>
<td>$40.00</td>
<td></td>
</tr>
<tr>
<td>LAB2180</td>
<td>LAB2180</td>
<td>Borrelia Species by PCR (Lyme Disease)</td>
<td>87476</td>
<td>$60.00</td>
</tr>
<tr>
<td>LAB910</td>
<td>LAB910</td>
<td>Borrelia Species by PCR (Lyme Disease)</td>
<td>87476</td>
<td>$60.00</td>
</tr>
<tr>
<td>LAB458</td>
<td>LAB458</td>
<td>Anti-Neutrophil Cytoplasmic Antibody, IgG + Reflex titer, if positive</td>
<td>86255 + 86256</td>
<td>$22.00 + $40.38</td>
</tr>
<tr>
<td>LAB835</td>
<td>LAB835</td>
<td>Methylmalonic Acid, Serum or Plasma</td>
<td>83921</td>
<td>$23.00</td>
</tr>
<tr>
<td>LAB120</td>
<td>LAB120</td>
<td>Vitamin B6 (Pyridoxal 5-Phosphate)</td>
<td>84207</td>
<td>$16.00</td>
</tr>
<tr>
<td>LAB827</td>
<td>LAB827</td>
<td>Tryptase</td>
<td>83520</td>
<td>$27.00</td>
</tr>
<tr>
<td>LAB2177</td>
<td>LAB2177</td>
<td>Aquaporin-4 Receptor Antibody, IgG by IFA with reflex + Reflex titer, if positive</td>
<td>86255 + 86256</td>
<td>$185.00 + $168.75</td>
</tr>
<tr>
<td>LAB2070</td>
<td>LAB2070</td>
<td>Culture, Viral Respiratory + Identification</td>
<td>87252 + 87253</td>
<td>$53.75 (added charges if ID performed)</td>
</tr>
</tbody>
</table>

Please note the former Ehrlichia Antibody Panel is now broken out into two separate panels; Ehrlichia chaffeensis Antibodies, IgG & IgM by IFA and Anaplasma phagocytophylum (HGA) Antibodies, IgG and IgM.
Effective Monday, November 20th the following tests will be moving from Mayo to Fairview Diagnostics Laboratory

<table>
<thead>
<tr>
<th>Current Test Code</th>
<th>New Test Code</th>
<th>Test Name</th>
<th>CPT Code(s)</th>
<th>Pricing</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAB951</td>
<td>LAB951</td>
<td>Hepatitis B DNA Quantitative; Real-Time PCR</td>
<td>87517</td>
<td>$39.21</td>
</tr>
<tr>
<td>LAB952</td>
<td>LAB952</td>
<td>Bordetella pertussis and parapertussis PCR</td>
<td>87801</td>
<td>$52.41</td>
</tr>
<tr>
<td>LAB1374</td>
<td>LAB1374</td>
<td>BK Virus DNA Quantitative Real Time PCR</td>
<td>87799</td>
<td>$38.77</td>
</tr>
<tr>
<td>LAB735</td>
<td>LAB735</td>
<td>Kappa/Lambda Quantitative Free Light Chains and Ratio, Serum</td>
<td>83883 x 3</td>
<td>$53.86</td>
</tr>
<tr>
<td>LAB1179</td>
<td>LAB1179</td>
<td>Beta-2-Glycoprotein Antibodies, IgG and IgM</td>
<td>86146 x 2</td>
<td>$22.57</td>
</tr>
<tr>
<td>LAB524</td>
<td>LAB524</td>
<td>DHEA Sulfate</td>
<td>82627</td>
<td>$17.46</td>
</tr>
<tr>
<td>LAB713</td>
<td>LAB713</td>
<td>Cryoglobulin, Quantitative</td>
<td>82595</td>
<td>$42.65</td>
</tr>
<tr>
<td>LAB863</td>
<td>LAB863</td>
<td>Epstein-Barr Virus Antibodies IgG</td>
<td>86663, 86664, 86665</td>
<td>$41.41</td>
</tr>
</tbody>
</table>

The online HML Reference Manual will reflect the changes on the individual go-live dates.

Please contact Craig Rousar, HealthEast Laboratory Manager at 651-232-3002 for any questions.

Possible Weather Risk – Mobile Phlebotomists

HealthEast Medical Laboratory (HML) serves our clients by utilizing outreach phlebotomists to obtain blood specimens from patients.

This service operates 7 days a week, 18 hours a day. During that coverage time, it is possible that hazardous driving conditions may arise and decisions need to be made to protect the safety of our staff. This is a notification that during Hazardous Driving Conditions, there may be a potential for limited services or cancellation of services. If services are cancelled due to hazardous weather, a member of the HML team will contact your facility.

Please support our ability to provide services by ensuring access to cleared and/or salted parking and walk-ways.

Please call HML customer service 651-232-3500 option # 5, with questions or concerns.
Draw Requests - During a Holiday Week

HealthEast Medical Laboratory (HML) takes pride in accommodating all our client’s lab draw requests. However, when a holiday is upon us, we often experience a high volume of draw requests with fewer fully-staffed days to accomplish those draws.

Unfortunately, this can create delays with our phlebotomy staff reaching your facility at your normally scheduled time. Your patience is greatly appreciated during these times.

We ask for your patience during a “Holiday Week” and have provided a list of the upcoming Holidays where you may experience a delay:

**Holidays**
- New Year’s Day
- New Year’s Day Observed
- Easter
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Christmas Day
- Christmas Day Observed

On the day of the “Actual” or “Observed” Holiday, HML will reschedule all NON-CRITICAL draw requests.

As a reminder to your staff of any upcoming Holidays, the HML calendar books are marked with a “Holiday-STATs Only”.

Please call HML customer service 651-232-3500 option # 5, with questions or concerns.

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**NOTIFICATION FROM MINNESOTA DEPARTMENT OF HEALTH (MDH)**

**MLS Laboratory Update: Expired Newborn Screening Cards** - September 18, 2017

**Purpose of this Message:** To avoid collection of unsatisfactory specimens on expired Newborn Screening cards.

**Action Item:** Inventory all Newborn Screening cards on site and discard all cards with expiration dates of August 2017 or earlier. Remind staff to check the expiration date on every card before collecting specimens.

**Background:** FDA regulations require expiration dates on all Newborn Screening cards. MDH cannot accept specimens collected on expired cards.

A large lot of cards was distributed statewide several years ago and expired in August 2017. Some of those cards are still circulating, so please review all cards, especially those in satellite locations, sites with low-volume, and those kept as a “stash” by individual laboratorians.

Please discard all of the expired cards. They have not been charged for in advance and there is no need to return them to the Public Health Laboratory.

If you need additional cards please contact:
Heather Brand
651-201-5466
1-800-664-7772
Heather.brand@state.mn.us
Influenza Testing – ESwab
(Nasopharynx (N/P) Collection)

Influenza season is right around the corner and we recommend that you begin preparing for the upcoming season.

- HML offers ESwabs for Influenza testing.
  - The ONLY way to obtain the ESwab is by completing our online supply form using either link: www.healtheast.org/hml or www.healtheast.org/forms/form-hml-supply-request.html
  - Order the ESwab Minitip (blue cap) swab

  ![ESwab Minitip (blue cap)](image)

  - Collect from nasopharynx, place swab in tube, break at mark and cap tube.

**Nasopharynx (N/P) Collection Instructions**

A. Remove secretions or exudate from the anterior nares.
B. Insert mini-tip ESwab through cleaned nasal passages until it just meets resistance at the posterior nasopharynx, taking care not to touch anterior nares.
C. Gently rotate swab and hold for 10 - 15 seconds.
D. Carefully remove swab and place in transport media.
E. Label culture transport with patient’s full name and date of birth.

- Requested orders of 10 or less will be fulfilled. Based on community demand, anything over 10 will require a pre-authorization from a HML Sales Representative. For these requests, please contact HML customer service, and they will direct you to a Sales Representative.

- **NO STAT or URGENT** ESwab order requests will be fulfilled – Please plan ahead.

- If you have specific questions regarding Influenza Minnesota Department of Health (MDH) and the Center for Disease Control (CDC) will refer to the following link:
  

HML Customer Service 651-232-3500 Option #5
As 2017 comes to a close, many of you are looking forward to discarding previous (OLD) laboratory records to make room for 2018 records. As much as we would all like to go ‘paperless’, the reality of today’s world is that we still are keeping some records on paper. However, every year we can discard many records and cut down on storage of paper within our facilities. Below is a list of records that can be thrown away or shredded in January 2018.

**OK to toss or shred the following records dated 2015 and older:**
- Patient test logs
- Quality Control logs and Levy Jennings charts
- Instrument calibration records
- Proficiency testing reports, worksheets and summaries
- Quality Assurance summaries
- Technical Consultant monthly reports
- Task Checklists
- Laboratory temperature logs (do not toss any temperature logs for refrigerators or freezers where vaccines/immunizations are stored – keep these for 3 years per MDH)
- Routine scheduled instrument maintenance records including background counts
- Corrective Action logs but keep instrument service records.
- Policies and Procedures discontinued in 2015 or before

**Records or documents to KEEP for the life of the instrument plus 2 years:**
- All instrument installation and validation records (linearity verification, patient correlations)
- Instrument service records.

As with each New Year, be sure your filing system is effective and easy to use. When your accrediting agency such as COLA or CLIA come to visit, it is easier to find needed documents from well labeled and organized boxes, bags, folders and/or bins. Good organization will also help you when it is time to clean out old records again next year.
What is antibiotic stewardship?

According to The Centers for Disease Control and Prevention (CDC) antibiotic stewardship refers to a set of commitments and actions designed to make sure patients receive the right dose, of the right antibiotic, for the right amount of time; and only when truly necessary. Improving antibiotic use will ensure these life-saving medications are effective and available when we need them.

What is the LTCFs role?

Nursing homes, skilled nursing facilities, and assisted living facilities, (collectively known as long-term care facilities, LTCFs) provide a variety of services, both medical and personal care, to people who are unable to manage independently in the community. Nurses, medical providers, and therapists who work in nursing homes and assisted living facilities face a difficult task of managing the complex conditions affecting a person while simultaneously monitoring him/her for signs and symptoms of infections. LTCFs are encouraged to work in a step-wise fashion, implementing one or two activities to start and gradually add new strategies from each element over time.

What is an antibiogram?

Antibiograms are tools that aid the health care provider in prescribing antibiotics in local populations, such as Hospitals, LTCFs or the Community. The antibiogram is based on information from microbiology laboratory tests to determine the sensitivity pattern of a given microorganism to a range of antibiotics. Antibiograms are often used by health care providers to assess local susceptibility rates, as an aid in selecting empiric antibiotic therapy, and in monitoring resistance trends over time within an institution. It provides information on how well a certain antibiotic will effectively treat a particular infection.

What is a hospital antibiogram?

The hospital antibiogram is a periodic summary of antimicrobial susceptibilities of local bacterial isolates submitted to the hospital's clinical microbiology laboratory. CLSI (Clinical & Laboratory Standards Institute) guidelines recommend compiling the antibiogram at least annually, including only the first isolate per patient in the period analyzed, and including only organisms for which ≥30 isolates were tested in the period analyzed.

The HealthEast Acute Care Hospital antibiogram includes a compilation of antimicrobial susceptibilities of select pathogens from the hospitalized patient population. The antibiogram is intended as a general guide to select presumptive therapy or change existing therapy. This is provided for HealthEast Medical Laboratory (HML) Long Term Care (LTC) clients that do not have the ability to create their own antibiogram.

A printable HealthEast Acute Care Hospital antibiogram is available on the HML website www.healtheast.org/hml
Panel Changes

Explanation: Effective October 16, 2017 Venous Blood Gases specimen requirements are changing.

Panel Name: Blood Gases, Venous  
Panel Code: VBG  
CPT Code: 82805  
Collect: Syringe (Heparin)  
Submit: 1 mL whole blood in a syringe (dry lithium heparin) at Room Temperature.  
Note: Specimen should be drawn free of air, mix well and replace needle with cap. Transport immediately to laboratory. **DO NOT REMOVE CAP BEFORE TESTING. TESTING MUST BE COMPLETED WITHIN 1 HOUR OF COLLECTION.**  
Test Performed at: HealthEast Medical Laboratories  
List Price: No Change

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Explanation: Effective November 20, 2017 collection supplies will be changing for Bordetella pertussis and parapertussis due to the transition of testing to Fairview Diagnostics Laboratory.

Panel Name: Bordetella pertussis and parapertussis, PCR  
Panel Code: PPC (LAB952)  
CPT Code: 87801  
Collect: Flocked Swab in UTM (Red Cap)  
Submit: Flocked swab in UTM (Universal Transport Medium) via posterior nasopharyngeal collection or 2 mL bronchoalveolar lavage (BAL), respiratory aspirate or sputum in sterile screw-top container REFRIGERATED.  
Unacceptable: Calcium-alginate swabs (shown to inhibit PCR). Dry or moistened cotton swabs, specimens not in proper container or from non-respiratory sources.  
Note: Specimens are stable up to 5 days refrigerated. Positives will be reported to MDH.  
Test Performed at: Fairview Diagnostics Laboratory

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Explanation: Mayo Medical Laboratories will be updating the reference range for CA 19-9 effective date of 9/20/17.  
Current Reference Value: <55U/mL  
New Reference Value: <35 U/mL

Panel Name: CA 19-9 (Carbohydrate Antigen 19-9)  
Panel Code: CGI  
CPT Code: 86301  
Collect: Red Top  
Submit: 0.6 mL serum REFRIGERATED. Centrifuge and aliquot within 2 hours of collection. May require ABN form.  
Unacceptable: Markedly hemolyzed specimen  
Note: 12 hours before draw, do not take multivitamins or dietary supplements containing biotin or vitamin B7.  
Test Performed at: Mayo Medical Laboratories  
List Price: No change
Explanation: Effective 9/21/17 Mayo Medical Laboratories is changing testing platform for Hepatitis C Virus (HCV) RNA Detection and Quantification by RT-PCR. Specimen requirements are being updated as follows:

**Panel Name:** Hepatitis C Virus (HCV) RNA Detection and Quantification by RT-PCR  
**Panel Code:** HCQ (HCVQN)  
**CPT Code:** 87522  
**Collect:** SST tube  
**Submit:** 2 mL serum FROZEN. Spin down and separate serum from cells within 24 hours of collection.  
**Unacceptable:** Not drawn in SST tube.  
**Note:** Use for detection of acute HCV infection (ie, < 2 month from exposure), detection and confirmation of chronic HCV infection, monitoring disease progression in chronic HCV and/or response to anti-HCV therapy.  
**Test Performed at:** Mayo Medical Laboratories  
**List Price:** No change

Explanation: Mayo Medical Laboratories will be updating the reference range for Nicotine and Metabolites, Urine effective date of 10/3/17.  
**Current Nicotine Reference Value:** <2.0 ng/mL  
**New Nicotine Reference Value:** <5.0 ng/mL

**Panel Name:** Nicotine and Metabolites, Urine  
**Panel Code:** NIC  
**CPT Code:** 80323  
**Collect:** Random Urine in Screw-Top Container  
**Submit:** 5 mL aliquot of a random urine REFRIGERATED (no preservative).  
**Test Performed at:** Mayo Medical Laboratories  
**List Price:** No Change

Explanation: Effective November 14, 2017 collection supplies will be changing for Culture, Viral Respiratory due to the transition of testing to ARUP Reference Laboratories.

**Panel Name:** Viral Culture, Respiratory  
**Panel Code:** VCR (LAB2070)  
**CPT Code:** 87252, 87253  
**Collect:** Sterile Container  
**Submit:** 3 mL fluid [bronchoalveolar lavage (BAL), nasopharyngeal aspirate, washing, tracheal aspirate, or sputum] in a sterile screw-top container REFRIGERATED (minimum volume 0.5 mL) OR swab (throat or nasal), tissue (lung, etc.), or fluid in 3 mL in UTM (universal viral transport media) REFRIGERATED.

**Unacceptable:** Calcium alginate, eSwab, dry, or wood swabs. FROZEN specimen. Specimen at ROOM TEMPERATURE more than 2 hours. Non-respiratory specimen  
**Note:** Specimen source is REQUIRED. Fluid is also acceptable in viral transport media.  
**Test Performed at:** ARUP Laboratories