FALL/2025

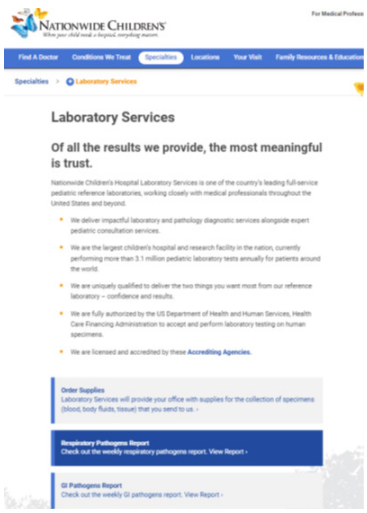
Laboratory Services

IN THIS ISSUE

NATIONWIDE CHILDREN'S®

When your child needs a hospital, everything matters.

Tracking Respiratory and GI Pathogens



Winter is fast approaching and respiratory illnesses will soon be on the rise. Laboratory Services would like to remind you of the great practice tool we offer you to track respiratory and GI pathogens in the community. When you visit **NationwideChildrens.org/Lab** make sure you check out the **Weekly Respiratory and GI Pathogens Reports** located near the bottom of the Laboratory Services home page.
To obtain weekly respiratory positivity reports on 11 pathogens such as RSV, Influenza, and Pertussis, and note respiratory illness trends in the Central Ohio area, simply click on the (1.) *Respiratory Pathogens Report* link on the Laboratory Services home page then click on the PDF that will download to your computer.

You can also obtain weekly GI positivity reports on 17 pathogens such as norovirus, rotavirus, and giardia/cryptosporidium, and note GI illness trends in the Central Ohio area. The report represents positive test results from the GI Film Array panel and individual stool infectious disease tests (i.e. Rotavirus antigen). It does not include results from the general stool culture. Simply click on the (2.) *GI Pathogens Report* link on the Laboratory Services home page then click on the PDF that will download to your computer.

Respiratory Infection Array by Multiplexed Nucleic Acid Testing

There may be times when it is important to perform a more comprehensive and sensitive test for respiratory pathogens in the outpatient setting. The Respiratory Infection Array is an amplified nucleic acid test that detects 17 viruses or viral subtypes and 4 bacterial targets.

The addition of a SARS CoV-2 target in response to the COVID-19 pandemic is an important component for syndromic respiratory testing

Viral Targets		Bacterial Targets
• Adenovirus	• Parainfluenza Virus 1- 4	• *Bordetella parapertussis*
• Coronavirus: 229E, HKU1, NL63, OC43	• Respiratory Syncytial Virus (RSV)	• *Bordetella pertussis*
• Human Metapneumovirus	• Rhinovirus/Enterovirus	• *Chlamydophila pneumoniae*
• Influenza A: H1, H1 2009, H3	• SARS-CoV-2	• *Mycoplasma pneumoniae*
• Influenza B		

Test Name	Respiratory Infection Array
Test Code	FARVPP
Sample Type	NP swab in viral transport media
Stability	Room temperature - 4 hours. Refrigerated - 3 days
Turnaround Time	24 hours upon receipt in the laboratory

The Respiratory Array has slightly reduced sensitivity to Mycoplasma pneumoniae when compared to singleplex PCR assays in addition to a reduced sensitivity for detection of Bordetella pertussis. In the seriously ill patient, consider confirming negative results by single PCR tests as applicable.

Test Name	*Bordetella pertussis/ parapertussis* by PCR	*Mycoplasma pneumoniae* by PCR, Qualitative
Test Code	BPPERT	MPNTT
Sample Type	NP Swab in viral transport media (use Viral Transport Media Collection kit)	Throat Swab in viral transport media (use Viral Transport Media Collection kit)
Stability	Room temperature - 24 hour Refrigerated - 4 days	Room temperature - 4 hour Refrigerated - 7 days
Additional Information	Array has reduced sensitivity compared to BPPERT testing. If pertussis is suspected, order BPPERT.	Requires separate sample submission as throat swab is the preferred specimen for this assay

The private practice physician must collect the specimen for Respiratory Infection Array at the time of the office visit, and the specimens cannot be collected by lab technologists at the Nationwide Children's Laboratory Service Centers.
For more information regarding test availability, specimen requirements, or to order collection kits, call (800) 934-6575 or visit NationwideChildrens.org/Lab.

NCH is Transitioning their Lab IS System to Epic Beaker

Nationwide Children's Hospital Lab system will be transitioning from Clinisys Sunquest/CoPath to Epic Beaker on **November 6, 2026**. Beaker is Epic's laboratory information system and will allow us to use

standardized laboratory workflows, tools, and services across the system.

Implementation teams are focused on sharing information, improving patient safety and operational efficiency, and aligning and standardizing our lab technology across the system. Key goals for Beaker include improved quality and safety, increased team member and customer experience, as well as financial stewardship goals such as cost savings, growth of lab services, and improved access to testing.

The Beaker project is currently in the Execution/ Build phase. We are setting up new interfaces, testing connectivity, and building out our test compendium. Below is an overview of how this change and build will impact your practice:

- Atlas clients: We are standing up new interfaces and will be testing the full compendium of the test catalogue over the next year. Utilization of the portal will not change with the Beaker implementation or during the project. We will be reaching out to our uni and bi-directionally interfaced clients to confirm full functionality in January of 2026. Full mapped record testing begins in February 2026. Testing will be completed by August 15, 2026.
- Faxed Results: All current clients who receive faxed results will continue to do so. We will be testing the Fax routing and consolidating the schedule of when you receive faxes. The Project team will be reaching out in the next quarter to verify your fax numbers. In May of 2026, we will test all fax numbers to make sure you receive a test message from Beaker. There will be additional communication as we get closer to the testing dates.
- Format changes: Your results reports will include all the information you currently have and rely on but in a more streamlined format. Once the final report is formatted this will be shared with our clients so they will be aware of the "New Look".

Nationwide Children's Hospital is very excited to bring this more advanced system into the Epic environment to provide our many clients with the highest standard of patient care.

Feel free to reach out to your laboratory account reps with specific questions. We will continue to update our outreach partners as the journey continues.

Laboratory Services Important Test Announcements

ONCOLOGY CHROMOSOMAL MICROARRAY ANALYSIS

Test Code: TONCMA **Live Date: 9/2/2025**

Effective 9/2/2025, the "Targeted Oncology Microarray Analysis" (test code: **TONCMA**) test name will be updated to "**Oncology Chromosomal Microarray Analysis**" as both solid tumors and hematologic malignancies will now be accepted for this testing. The Oncology Chromosomal Microarray Analysis detects clinically significant chromosomal copy number aberrations and loss of heterozygosity (LOH) in tumor and bone marrow/neoplastic blood specimens to aid in prognosis, diagnosis and/or treatment assessment.

For hematologic malignancies, submission of a sample containing at least 20% blasts is required. For solid tumor malignancies, submission of a sample containing at least 40% tumor is required. The remainder of this test (i.e. test code, CPT codes, etc.) remains the same and can be found in the Test Directory.

UPDATES TO AMIKACIN, PRE-DOSE AND AMIKACIN, POST-DOSE

Test Code(s): PAMK and AMIK
Live Date: 8/12/2025

Effective August 12, 2025, the Amikacin, Pre-dose (**PAMK**) and Amikacin Post-dose (**AMIK**) normal range and alert values will be updated as shown in the below chart. This update is due to a change in test kit manufacturer and internal comparison studies.

Normal and alert range updates:

Test	Old Reference Range	New Reference Range	Old Alert Value	New Alert Value	Units
Amikacin, Pre-Dose	<8.0	<15.0	>8.0	>14.9	µg/mL
Amikacin, Post-dose	15.0 - 30.0	26.5 - 45.0	>40.0	>60.0	

NEW TEST METHOD FOR FECAL CALPROTECTIN (CALPRO)

Test Code: CALPRO
Live Date: 8/11/2025
Effective 8/11/2025, the Clinical Microbiology and Immunoserology Laboratory will transition fecal calprotectin testing from a semi-automated quantitative Enzyme-Linked Immunosorbent Assay (ELISA) method to an automated chemiluminescent immunoassay (CLIA)

UPDATES TO MEASLES VIRUS BY PCR WITH REFLEX AND MEASLES (RUBEOLA) ANTIBODY, IGM TESTING

Measles is a Class A reportable disease (OAC Chapter 3701-3) and requires immediate notification of any suspected case to public health authorities. Prior to collection of any measles test specimens, ordering providers must notify the local public health department where the patient resides.

It is the responsibility of the provider to establish all required public health correspondence and compliance.

Per ODH and CDC guidelines, both serology and respiratory (nasopharyngeal) samples should be collected. The **Measles Virus by PCR with Reflex (MEA)** is performed at NCH. Positive samples are referred for genotyping. Samples testing negative for the virus, submitted with serum for serology, are sent to a reference lab for antibody testing.

Effective 7/29/2025, reference lab testing for **Measles (Rubeola) Antibody, IgM (XMEAM)** will be transitioned from ODH to ARUP.

As a reminder, individuals requiring measles specimen collection should not present to Urgent Care or ED locations for testing purposes only, in order to avoid exposures. Specimen collection must be scheduled and is available at select locations only – clinicians should call the closest Urgent Care/Lab location noted below to schedule:

- Canal Winchester – (614) 355-9050
- Dublin – (614) 355-7000
- East Broad – (614) 355-8100
- Hilliard – (614) 355-5900
- Marysville – (937) 578-7600
- Westerville – (614) 355-8300

MEASLES (RUBEOLA) ANTIBODY, IGM

Test Code: XMEAM **Live Date: 7/29/2025**
Specimen Required:

- **Collect:** Whole Blood, Red or Gold Tube
- **Specimen Volume:** 3 mL
- **Specimen Preparation:** N/A
- **Storage/Transport/Temperature:** Centrifuge within 2 hours then separate. After separation from cells: Ambient – 48 hours; Refrigerated – 2 weeks; Frozen – 1 year.
- **Unacceptable Conditions:** Contamination, heat-treated specimen, hemolyzed specimen, icteric specimen, or gross lipemia. Avoid repeated freeze/thaw cycles.
- **Comments:** Parallel testing is preferred and convalescent specimens must be received within 30 days from receipt of the acute specimens. Mark specimens plainly as "acute" or "convalescent."

There will be no changes to **Measles Virus by PCR with Reflex (MEA)** testing requirements.

UPDATES TO THYROID PROFILE TESTING OPTIONS

Test Code: THYP

To stay abreast of current best practices and evidenced-based guidelines, NCH introduced a new Thyroid Panel (TSHFT4) in March 2025 that would result in a Free T4 being added only when the TSH result is outside of the normal range (high or low).

Additionally, our laboratory will no longer offer our current Thyroid Profile (THYP) which includes both TSH and Free T4.

Alternatively, clinicians will be able to order the following:

- TSH with Reflex to FT4 (TSHFT4)
- TSH (TSH3G) and Free T4(FT4) can be ordered individually

To determine when it is appropriate to perform thyroid dysfunction in children, clinicians can refer to our Thyroid Function and Screening Practice Tool on our website at **https://nationwidechildrens.org/for-medical-professionals/tools-for-your-practice/clinical-tools/thyroid-function-and-screening.**

Spotlight on Pathology:

Anita Gupta, M.D. is a senior pediatric surgical pathologist who completed her residency in Anatomical and Clinical Pathology at Northwestern and Children's Memorial Hospital in Chicago, and her peds path fellowship at The Denver Children's Hospital. Subsequently, she joined the pathology team at Cincinnati Children's Hospital Medical Center and moved up the ranks from Assistant Professor to Full Professor in 14+ years of service, education, leadership, and research. Going back to her birthplace and family in January 2022, then CMH and now Ann & Robert H. Lurie Children's Hospital of Chicago, she joined as staff pediatric pathologist and Full Professor Northwestern Feinberg School of Medicine. Her areas of expertise included vascular anomalies, liver tumors and their biology, liver vascular anomalies, ciliopathy/EM, developmental gastrointestinal developmental anomalies/disorders including ARM/Cloaca/Dysmotility, and cardiac transplant and cardiomyopathy biopsies/EM.

Dr. Gupta's research interests and focus are primarily engaged in clinical-translational research and tumor development biology related to vascular anomalies and GI/liver disorders/tumors. She is co-investigator on a handful of grants/subawards and productive collaborator across multiple disciplinaries and multiinstitutions. In addition, she is a member of the Children's Oncology Group, USCAP, SPP, CAP, ISSVA, API, AIPNA, and more. Dr. Gupta has authored 75+ peer-reviewed manuscripts and book chapters including multiple chapters of the WHO 5th edition Classification of Pediatric Tumors. Recognized for her expertise in these areas, she has guest lectured (45+) at many national and international conferences around the world.
In addition to being passionate about work, she loves gardening, traveling, learning about history, elephants, cooking/eating, Ayurveda/natural medicine, spending time with family, and all sorts of teas. Her motto: Help children today for a better world tomorrow, and "nothing is impossible, because the word itself when spelled out = I M Possible."

Helpful Reminders

It is imperative that samples placed in a lockbox outdoors prior to transport to the laboratory be maintained at the appropriate temperature especially those days and evenings when outside temperatures dip below freezing, or soar during the day.

Outside temperature is above 46°F: If refrigerated samples are stored in your lockbox, then one or two **refrigerated cold packs** should be placed in the lockbox to maintain the samples at the refrigerated temperature until the courier picks them up. The **gel pack should not be frozen**, since you do not want refrigerated whole blood samples to freeze. **Note: Please be aware of your lockbox if it is sitting in the sun, or on concrete/asphalt walkways. The internal temperature of the lockbox may be warmer than the outside temperature.**

Outside temperature is below 40°F:
If refrigerated samples are stored in your lockbox, a room temperature gel pack should be placed in the lockbox to prevent the samples from freezing while left outside. The **gel pack should not be frozen**, since you do not want refrigerated whole blood samples to freeze.

Many laboratory tests performed require adequate refrigeration of specimens. By following this lockbox practice, you will help insure the integrity of the samples and ultimately obtain reliable laboratory results.

Don't Be Caught Unprepared

Respiratory season is fast approaching, and a room full of ill patients can be overwhelming. Please check your swabs and media supplies for:

- **Expiration Dates:** Make it a good habit to check all expiration dates on a regular basis.
- **Rotate Supplies:** It is good practice and cost-effective to rotate your supplies as you receive them. Always use oldest supplies first.
- **Cloudiness:** Do not use media if there is a change in color and/or cloudiness. Always check before using.
- **Inventory:** Check to make sure you have enough swabs and media in stock until your next supply order arrives. You can order supplies online at **www.NationwideChildrens.org/Laboratory.**

NATIONWIDE CHILDREN'S®
When your child needs a hospital, everything matters.

Nationwide Children's Hospital
700 Children's Drive
Columbus, OH 43205

How can Nationwide Children's Laboratory Services help your practice?

If you would like to become a client or learn more information about Nationwide Children's Laboratory Services, contact us at (800) 934-6575 or visit our website at **NationwideChildrens.org/Lab.** Would you like to receive the Nationwide Children's Laboratory Services Newsletter electronically? Please e-mail us at **LaboratoryServices@NationwideChildrens.org** and let us know!

Lab Account Representatives are available via email to assist with any questions or concerns.

Stacy Burrier	**Stacy.Burrier@nationwidechildrens.org**
Larry Thompson	**Larry.Thompson@nationwidechildrens.org**
Jessica Walters	**Jessica.Walters2@nationwidechildrens.org**

NATIONWIDE CHILDREN'S®
When your child needs a hospital, everything matters.

220796-212266