Laboratory Services Newsletter

April is Sexually Transmitted Infection (STI) Awareness Month

Did you know that the incidence of both chlamydia and gonorrhea have been on the rise for the past six years in the U.S.? This is something the CDC has called "a severe human and economic burden."^{1, 2} Because chlamydia and

gonorrhea are commonly asymptomatic, screening is an essential tool to detect these STIs so that patients receive much-needed treatment. The U.S. Department of Health and Human Services has outlined an ambitious goal to increase chlamydia screening in females aged 16-24 years by 13% by 2025.³

One way to meet that goal would be for providers to consider adopting an **opt-out testing strategy**, which would make STI testing a routine part of patient care for adolescent and young adult females during clinical encounters. (i.e., the patient is notified that testing will be performed unless the patient declines, regardless of reported sexual activity). The goal of an opt-out strategy would be to focus on practice rather than the patient and would involve using normalizing language:



Examples of normalizing language:

"We test everyone your age for chlamydia."

"We routinely screen all out patients to make sure we're not missing a problem."

"We ask all of our patients your age if they've been tested for chlamydia recently. That test should be done every year. Let's do that today."

Cost effectiveness analyses indicate that opt-out chlamydia screening among adolescent and young adult females might substantially increase screening, be cost saving, and identify infections among patients who do not disclose sexual behavior.

To assist with communicating a potential opt-out strategy to parents and patients you can view some sample parent letters on our website: <u>https://www.nationwidechildrens.org/specialties/laboratory-services/for-providers/laboratory-services-news-publications</u>

References:

1 Reported Cases of Sexually Transmitted diseases on the Rise, Some at an Alarming Rate [press release]. http://www.cdc.gov/nchhstp/ newsroom/2015/std-surveillance-report-press-relaease.html.Atlanta, Ga: CDC; November 17, 2015.

2 Kent H. Epidemiology of vaginitis. Am J Obstet Gynecol. 1991;165(4):1168-76. Doi:10.1016/S0002-9378(12)90722-X.

3 *Quimby, Katherine DeAngelis MPH; Kawatu, Jennifer Ewing RN, MPH; Saul, Katie Martocci MPH; Schamus, Lisa Anne MPH Implementation of a Learning Collaborative Model Increases Chlamydia Screening at 37 Family Planning Clinics: Lessons Learned From 3 Cohorts. Sexually Transmitted Diseases. 2021; 48 (1): 5-11.



COLLECTION OF STI SPECIMENS

TFOT			
TEST NAME	COLLECTION CONTAINER	COLLECTION INSTRUCTIONS	STABILITY
	Aptima Unisex Swab Specimen Collection Kit	Use for endocervical or male urethral specimen collections. Contact Laboratory Services at (800) 934-6575 for the Aptima Unisex swab collection kit.	Room temperature - 60 days Refrigerated - 60 days
Chlamydia &	Aptima Multitest Swab Specimen Collection Kit	Use for vaginal specimen collections only. Contact Laboratory Services at (800) 934-6575 for the Aptima Multitest swab collection kit.	Room temperature - 60 days Refrigerated - 60 days
Neisseria gonorrhoeae by Aptima	Sterile Container (blue cap) (Urine)	Patient should not have urinated for at least 1 hour prior to specimen collection. Patient should collect first portion of a voided urine specimen (first part of stream- not midstream) into a screw-capped, sterile, plastic, preservative-free specimen collection container. Do not collect less than 10 mL or more than 20 mL of urine. Females should NOT clean the labial area prior to urination.	Room temperature - 24 hours Refrigerated - 24 hours
	Viral Transport Media Collection Kit	Use for conjunctival swab, anal/rectal swab and throat swab collections. Contact Laboratory Services at (800) 934-6575 for the viral transport media collection kit.	Refrigerated - 24 hours
Chlamydia Culture	Viral Transport Media Collection Kit	Use for genital and ocular specimens. Contact Laboratory Services at (800) 934-6575 for the viral transport media collection kit.	Refrigerated - 48 hours Frozen – 1 month
Neisseria gonorrhoeae (GC) Culture	Charcoal Culture Swab	Use for genital specimens and mucosal sites. Note: Recovery of Neisseria gonorrhoeae may be inhibited by use of a non-charcoal swab.	Room temperature - 24 hours
	Dual Culture Swab System	Use the red CoPan dual culture swab and transport media for genital specimens and mucosal sites.	Room temperature - 24 hours
Hepatitis B Surface Antigen	Red Top VacutainerTube (Blood)	Collect 3 mL of whole blood in a red top tube, (no anticoagulant), no gel.	Room temperature - 24 hours Refrigerated - 6 days
Hepatitis B Core Antibody	Red Top VacutainerTube (Blood)	Collect 3 mL of whole blood in a red top tube, (no anticoagulant), no gel.	Room temperature - 3 days Refrigerated - 7 days
Herpes Simplex Virus IgM Antibody	Red Top Vacutainer Tube (Blood)	Collect 3 mL of whole blood in a red top tube, (no anticoagulant), no gel. Centrifuge and separate serum from cells within 1 hour of collection and transfer serum into a transfer tube. Sample sent as whole blood will be rejected.	Room temperature serum – 2 days Refrigerated serum – 2 weeks Frozen serum – 12 months
Herpes Simplex Virus by PCR Superficial Site	Viral Transport Media Collection Kit	Use for throat , genital , rectal , skin/lesion scraping, and ocular specimen collections. Contact Laboratory Services at (800) 934-6575 for the viral transport media collection kit.	Refrigerated - 4 days
Herpes Simplex Virus by Culture	Viral Transport Media Collection Kit	Use skin/ lesion scraping, miscellaneous specimen Contact Laboratory Services at (800) 934-6575 for the viral transport media collection kit.	Refrigerated - 2 days
HIV 1 & 2 Antigen/ Antibody Screen	Purple Top VacutainerTube (Blood)	Collect 3 mL of whole blood in a purple top tube.	Room temperature - 24 hours Refrigerated - 7 days
Human Papilloma Virus (HPV)	ThinPrep Collection Kit	Contact Laboratory Services at (800) 934-6575 for the "SurePath" or "Thin Prep" collection kit.	Room temperature - 3 weeks
Syphilis (RPR)	Red Top VacutainerTube (Blood)	Collect 3 mL of whole blood in a red top tube, (no anticoagulant), no gel.	Room temperature - 24 hours Refrigerated - 48 hours
	Aptima Unisex Swab Specimen Collection Kit	Use for endocervical or male urethral specimen collections. Contact Laboratory Services at (800) 934-6575 for the Aptima Unisex swab collection kit.	Room temperature - 60 days Refrigerated - 60 days
Trichomonas Vaginalis	Aptima Multitest Swab Specimen Collection Kit	Use for vaginal specimen collections only. Contact Laboratory Services at (800) 934-6575 for the Aptima Multitest swab collection kit.	Room temperature - 60 days Refrigerated - 60 days
Amplified Probe	Sterile Container (blue cap) (Urine)	Patient should not have urinated for at least 1 hour prior to specimen collection. Patient should collect first portion of a voided urine specimen (first part of stream- not midstream) into a screw-capped, sterile, plastic, preservative-free specimen collection container. Do not collect less than 10 mL or more than 20 mL of urine. Females should NOT clean the labial area prior to urination.	Room temperature - 24 hours Refrigerated - 24 hours

For questions regarding STI collections, call Laboratory Client Services at (800) 934-6575

Dropping Off Lab Samples at NCH Lab Locations

Nationwide Children's Hospital (NCH) *Close to Home*SM lab sites, and statewide Laboratory Services Centers, as well as main campus outpatient lab locations, provide a critical service for our patient families and community health at large by providing convenient verification and processing of patient samples that are dropped off at these sites. Our families and home caregivers enjoy more flexibility in their busy schedules with the ability to bring patient samples back to the lab without a potentially unnecessary patient visit. This especially benefits our home care, non-ambulatory, and/or more acute patients.

These samples are treated with the same care and attention as our inpatients, first with proper lab staff verification of patient ID, specimen stability, temperature, and container requirements, as well as subsequent patient registration. While drop-off samples streamline the overall process, these crucial patient care steps do take minimal time. Please remind staff as well as patient families of the following points of emphasis when dropping off specimens to any NCH lab:

- Please strive to be patient with us. Our experienced staff will do our best to verify the sample and register the patients as quickly as possible.
- Patients arriving in person prior to another's specimen drop-off remain an immediate priority. Help make everyone's experience as stress-free as possible by being prepared to extend courtesy to those patients who are already being attended by our staff.
- These sample verification/registration procedures serve a critical patient care function by insulating patients and home caregivers alike from unnecessary delays in care or specimen recollections due to easily-avoidable errors.

Thank you for joining us in our ongoing efforts to provide the right result to the right patient, every time!

Changes to Mansfield and Springfield Laboratory Services Hours of Operation

The **Mansfield** *Close To Home*SM Center, located at 536 S. Trimble Road, Mansfield, Ohio, laboratory hours of operation have changed:

New Monday through Friday hours – 8 a.m. to 4 p.m.

Springfield *Close To Home*SM Center, located at 1644 N. Limestone Street, Springfield, Ohio, Saturday laboratory hours of operation have changed:

New Monday through Friday hours – 8:30 a.m. to 7 p.m.

New Saturday hours – 8:30 a.m. to 1 p.m.

Nationwide Children's Helping Hands and Your Patients

The Helping Hand patient education materials are written and illustrated by Nationwide Children's Hospital medical, nursing, and allied health professionals. The instructions are not intended to stand alone; Helping Hands should be used to augment verbal instructions and teaching. When handing out Helping Hands to patients and families, it is advised that you print them directly from the NCH website by visiting https://www.nationwidechildrens.org/search-results?q=helping%20hands. Please do not print copies to keep on hand for patients. The information is periodically reviewed and revised to reflect our current practice. This will ensure that you are giving your patient the most current guidelines. Note, Nationwide Children's Hospital is not responsible for any consequences resulting from the use or misuse of the information in the Helping Hands.

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Outdoor Temperatures and Lockbox Specimen Storage

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 gel packs** should be placed in the lockbox to maintain the samples at the refrigerated temperature until the courier picks them up. The **cold 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.



Please Place Barcode Labels so that they are Visible Through Specimen Bags

• When sending specimens with the courier, please place the requisition in the outside pouch of the biohazard

bag so that the **barcode labels at the bottom of the requisition are facing out**. By doing this, the barcode is visible to the courier so that they can scan the code

 Diagnosis/ ICD-10 _____ Physician (Print name) _____ Physician's Signature (Required) ______

 Image: Diagnosis/ ICD-10 _____ Physician (Print name) _____ Physician's Signature (Required) ______

 Image: Diagnosis/ ICD-10 _____ Physician (Print name) _____ Physician's Signature (Required) ______

 Image: Diagnosis/ ICD-10 _____ Physician (Print name) _____ Physician's Signature (Required) ______

 Image: Diagnosis/ ICD-10 _____ Physician (Print name) _____ Physician's Signature (Required) ______ Physician'

without effort. Scanning the barcode for each specimen helps us keep track of your patient's lab samples.

• According to NCH Laboratory Services Specimen Guidelines, and to ensure the integrity of lab specimens transported by the courier to the lab, it is important that one of the **storage temperature boxes on the biohazard specimen bag is marked appropriately**.



For questions, please call Laboratory Services at 800-934-6575.

National Medical Laboratory Professionals Week - April 24 - 30

National Medical Laboratory Professionals Week, April 24-30, 2022, is an annual celebration of medical laboratory professionals and pathologists who play a vital role in health care and patient advocacy! It provides the profession with a unique opportunity to increase public understanding of and appreciation for clinical laboratory personnel. MLPW, which takes place the last full week in April each year, is coordinated by a collaborative committee with representatives from 17 national clinical laboratory organizations. Medical Laboratory Professionals Week originated in 1975 as National Medical Laboratory Week, or NMLW, under the auspices of the American Society for Medical Technology, now called the American Society for Clinical Laboratory Science (ASCLS).

Culturette Swab Inventory at a Critical Level

Due to global supply chain issues Nationwide Children's Hospital is currently at a critical level of culturette swabs. We will continue to monitor and provide updates as the situation progresses. Please review your current stock, and if you are able, return any extras to Nationwide Children's Hospital through your typical courier route.

Culturette Swab Options	Collection	Common Testing Examples
Dual Culturette Swabs BBL/CoPan/Hardy	 Collect using provided swabs. Insert swabs back into plastic sheath. Contains Liquid Stuart Media. 	 Acid Fast Bacterial Culture Bacterial Culture Fungal Testing Group A Strep rRNA GenProbe (Throat) Group B Streptococcus Culture Screen Stool Culture (if collecting swabs) Streptococcus Throat Culture - Group A Streptococcus Wound Culture
StarSwab	 Collect using provided swabs. Insert swabs back into plastic sheath. Contains Liquid Stuart Media. 	 Acid Fast Bacterial Culture Bacterial Culture Fungal Testing Group B Streptococcus Culture Screen Stool Culture (if collecting via swabs) Streptococcus Throat Culture - Group A Streptococcus Wound Culture
BactiSwab (Single Swab)	 Collect using provided swab. Insert swab back into plastic sheath. Crush ampule of Modified Stuart's Medium to moisten swab after collection. 	 Acid Fast Bacterial Culture Bacterial Culture Fungal Testing Group B Streptococcus Culture Screen* Stool Culture* (if collecting via swabs) Streptococcus Throat Culture - Group A Streptococcus Wound Culture *Please collect 2 swabs

Please see chart below for acceptable collection swabs.

Recommendation: If you perform Rapid Strep testing in your office, please use the swab provided in the Rapid Strep Kit. Collect and send one of the options above as needed for confirmatory testing on negative results.

For questions about collection swabs and EDTA Vacutainer shortages, please contact Laboratory Client Services at (614) 722-5477.

COVID Positive or Suspected COVID Positive Autopsy Services

Effective Immediately:

- We are asking our clients to perform a fetal COVID swab and provide results on fetuses requiring autopsy (fetopsy) *prior* to them arriving at Nationwide Children's Hospital Laboratory if there is **suspicion** for or a **known positive COVID** result in the mother, within the 20 days prior to delivery.
- 2. We will not be able to accept any COVID positive Fetopsy cases.

3. As a gentle reminder:

We ask that *all of the paperwork*: including notes, death certificate, consent and disposition of remain forms be completed in full and sent with the body. We are unable to perform Autopsies sent without the proper paperwork per Ohio law.

For any questions regarding the above policies, please feel free to contact Nationwide Children's Pathology Services at (614)-722-5450, or Nationwide Children's Laboratory Client Services at (614)-722-5477.

Critical Supply Shortages – EDTA (purple top) Vacutainer Tubes

EDTA (purple top) Vacutainer tubes are currently on back order. All of our vendors have limited stock of tubes. Conservation efforts need to be implemented before current inventory reaches a critical shortage. Recommendation:

- Utilize 1 mL microtainer EDTA tubes when possible NCH has more of these in inventory
- Conserve the use of 3 mL and 4 mL EDTA Vacutainer tubes
- Microtainer tubes can be used for venous blood collections
 - 0 Collect blood in a syringe and transfer to the microtainer immediately and mix well
 - Use the fill lines on the microtainer to guide volume collected
- Refer to the Test Directory and use alternative tube types whenever possible.



1 mL Microtainer



3 mL Vacutainer



4 mL Vacutainer

Do You Sometimes Struggle with Capillary Blood Collections in Your Practice?

Whether you are a new or an established client with Nationwide Children's Laboratory Services, proper collection of blood specimens is essential for accurate sample analysis and reporting of patient results. Did you know that Nationwide Children's Laboratory Services provides in-office training for capillary blood collections? Call Laboratory Services at (800) 934-6575 to schedule a training with one of our Account Representatives who are exceptionally proficient in collecting capillary blood samples, or visit our website at NationwideChildrens.org\Lab and click on For Providers, Hospitals, and Health Departments, and then scroll down and click on Collection Procedures; scroll down to Blood and Urine Collections and then click on Blood Collections. This comprehensive tutorial will give you tips and in-depth knowledge on how to successfully collect capillary blood samples on patients of all ages.

Common Blood Tests that can be Collected by Capillary Fingerstick

Mint Green Microtainers

(Lithium Heparin with Gel Separator)

- Albumin
- Alkaline Phophatase
- ALT
- Amylase
- AST
- Bilirubin
- Bilirubin, Newborn
- BUN
- Calcium
- Chloride
- Cholesterol
- CK
- CO2
- Thyroid Stimulating Hormone (TSH)
- Thyroxine, Free (FT4)
- Thyroxine, Total (T4)
- Basic Metabolic Panel (8 tests)
- Comprehensive Metabolic Panel (14 tests)
- Electrolyte Panel (4 tests)
- Hepatic Function Panel (6 tests)
- Lipid Profile (3 tests with 2 calculations)
- Renal Function Panel (10 tests)
- Thyroid Profile (2 tests)

Purple Microtainers (EDTA)

- ABO and Rh Typing
- CBC, Differential
- Direct Coombs
- Hematocrit
- Hemoglobin
- Hemoglobin A1C (Glycosated Hemoglobin)
- Hemoglobin Electrophoresis
- Mono Screen
- Platelets
- Reticulocytes
- Sickle Cell / G6PD Screen
- Type and Coombs, Neonate

Dark Green Microtainers (Lithium Heparin without Gel Separator)

- Lead (can also be collected on blood filter card)
- Carbamazepine (Tegretol)
- Phenobarbitol (Meberal)
- Phenytoin (Dilantin)
- Valproic Acid (Depakene)

Many routine blood tests can be collected from a capillary puncture (fingerstick/heel) at our Laboratory Service Centers. However, there may be certain situations where a venipuncture is warranted, including greater volume of sample needed to complete all testing, or testing that specifically requires a venipuncture.

For more information about capillary blood collections, call (800) 934-6575 or visit NationwideChildrens.org/Lab.

Spinal Muscular Atrophy (SMA) Dosage Analysis

Last month the NCH Institute for Genomic Medicine (IGM) Clinical Laboratory began offering a new test called **Spinal Muscular Atrophy (SMA) Dosage Analysis**. This test was previously sent to the OSU Molecular Pathology Laboratory, and will now be performed by the NCH IGM Clinical Laboratory.

This test detects the copy number of exon 7 of the *SMN1* gene, and will report both homozygous and heterozygous deletions to identify carriers of Spinal Muscular Atrophy (SMA) as well as affected individuals. This test will also report *SMN2* copy number. Diagnostic samples are performed as a STAT test, with expected result turnaround time of 7 days or less. If sending a diagnostic sample to arrive Friday or Saturday, please call the molecular genetics laboratory at (614) 722-3280 to inform.

Autosomal recessive spinal muscular atrophy (SMA) is associated with having zero functional copies of *SMN1*. *SMN1* exon 7 is absent in ~96% of patients with SMA, whereas most unaffected individuals have two or more functional *SMN1* copies. Additionally, ~3–4% of patients with SMA are compound heterozygotes, with an *SMN1* exon 7 deletion on one chromosome and a sequence variant in *SMN1* on the other chromosome resulting in zero functional copies. Please note, this analysis does not detect other variants in *SMN1* including sequence variants, rearrangements, or other deletions and duplications not involving exon 7.

SMN2 copy number has relevance in the setting of individuals with zero functional copies of *SMN1* and can act as a disease modifier. Most patients with SMA type I have two or less copies of *SMN2*, three *SMN2* copies are common in patients with SMA type II, and patients with SMA type III presentations often have 3 or 4 copies of *SMN2*. *SMN2* copy number analysis must be interpreted with caution as other modifiers of disease severity have been reported.

Quantitative Amino Acid Testing Updates

In February, Quantitative Amino Acid testing for CSF (QAAC), Serum/Plasma (QAAS), Urine (QAAUP), and Maple Syrup Disease Monitor (MSUD) was updated to a new methodology of Liquid Chromatography – Tandem Mass Spectrometry (LC-MS/MS) from High Performance Liquid Chromatography (HPLC). A cross reference of old to new test codes are shown below. The new reference ranges are posted at <u>https://www.nationwidechildrens.org/specialties/laboratory-services/for-providers/laboratory-services-news-publications</u>.

Quantitative Amino Acid / Maple Syrup Disease Monitor Testing Updates							
Old Test Code	Old Test Name	New Test Code	New Test Name	Notable Change			
QAAS	Amino Acid Quant, Serum	MSAAP	Plasma Amino Acids by LC-MS/MS	Serum is no longer an acceptable sample type. Plasma sample is required (Green tube, no gel)			
QAAUP	Amino Acid Quant, Urine	MSAAUP	Urine Amino Acids by LC-MS/MS				
QAAC	Amino Acid Quant, CSF	MSAAC	CSF Amino Acids by LC-MS/MS				
MSUD	Maple Syrup Dis- ease Monitor	MSAAP	Plasma Amino Acids by LC-MS/MS	Serum is no longer an acceptable sample type. Plasma sample is required (Green tube, no gel)			

Change in Lipid Normal Reference Ranges

This past February, the normal reference range for Cholesterol (CHOL), LDL (LDLC), HDL (HDLC) and Triglycerides (TRIG) was updated. This change is based on a review of current literature for our patient population.

			Chole	sterol (CH	OL)		
	N	ew			Prev	/ious	
Age	Male	Female	Units	Age	Male	Female	Units
0.100	<10V	19Y <170	mg/dL	0D - 1M	50-120		mg/dL
0-18Y <19	\$191			2M - 11M	65-175		
>18	>/=19	<200		1Y - Inf	95-195		

New Previous							
Age	Male	Female	Units	Age	Male	Female	Units
0-18Y	<	110		0D - 4Y	70-110		
>18 <130		130	mg/dL	5Y - 9Y	75-115		1
				10Y - 14Y	78	-118	1
				15Y - 19Y	73	-117	mald
				20Y - 29Y	84	-136	mg/dl
				30Y - 39Y	95	-145	1
				40Y - 49Y	100)- <mark>16</mark> 0	1
				50Y - Inf	113	3-177	1

	N	ew			Previo	ous	
Age	Male	Female	Units	Age	Male/Female	Female	Units
0-18Y	>45	>45		0D - 4Y	40-6	0	
>18 >3	>39	>49	mg/DI	5Y - 9Y	45-6	5	7
	84	5		10Y - 14Y	44-6	2	1
				15Y - 19Y	40-5	8	mald
				20Y - 29Y	42-6	2	- mg/d
				30Y - 39Y	40-7	0]
				40Y - 49Y	46-7	8	
				50Y - Inf	41-7	3	1

			Trigly	cerides (T	RIG)		
New Previous							
Age	Male	Female	Units	Age	Male	Female	Units
0-9Y	<75 <90 <150			0D - 3M	<	171	
10-18Y			mg/dL	4M - 15Y	60	-134	mg/dL
>18				16Y - Inf	29	-200	

Blood Culture Identification Panel Update

The **Blood Culture Identification Panel** was updated January to include more organism and antimicrobial resistance gene targets. The processes of notification will not change and we will continue to only perform testing on those first time positive blood cultures. The reporting can be expected within 1-2 hours after the Gram stain reveals organisms in a blood culture bottle. This test allows only the preliminary identification of potential pathogens in positive blood cultures so all Blood Culture Identification Panel results will be confirmed by culture.

The organisms and the antibiotic resistance markers that are identified by the new Blood Culture Panel are:

Gram-Negative Bacteria	Gram-Positive Bacteria	Antimicrobial Resistance Genes
Acinetobacter calcoaceticus- baumannii complex Bacteroides fragilis Enteric Gram Negative Rod (Enterobacterales) Enterobacter cloacae complex Escherichia coli Klebsiella(Enterobacter) aerogenes Klebsiella oxytoca Klebsiella pneumoniae group Proteus	Enterococcus faecalis Enterococcus faecium Listeria monocytogenes Staphylococcus Staphylococcus aureus Staphylococcus epidermidis Staphylococcus lugdunensis Streptococcus galactiae Streptococcus pneumoniae Streptococcus pyogenes	Carbapenemases IMP KPC OXA-48-like NDM VIM Colistin Resistance mcr-1 ESBL CTX-M Methicillin Resistance mccA/C
Salmonella Samatia managana	Yeast	mecA/C and MREJ (MRSA)
Serratia marcescens Haemophilus influenzae Neisseria meningitidis Pseudomonas aeruginosa Stenotrophomonas maltophilia	Candida albicans Candida auris Candida glabrata Candida krusei Candida parapsilosis Candida tropicalis Cryptococcus neoformans/gattii	Vancomycin Resistance vanA/B

New targets are in **BOLD**.

The blood culture panel will NOT be run on body fluids in blood culture media, pathology blood cultures, or any bottles that come from outside hospitals.



Somatic Disease/Normal Comparator Exome

In January the NCH Institute for Genomic Medicine (IGM) Clinical Laboratory began offering a new test called Somatic Disease/Normal Comparator Exome.

This test is intended for patients with known or suspected cancer, hematologic diseases, and somatic disorders (e.g. somatic overgrowth or vascular malformation). Genomic characterization of a tumor or disease-involved tissue can aid in diagnosis, prognosis, and medical management, such as making treatment decisions and evaluating eligibility for targeted therapies and clinical trials. This test can also identify germline disease predisposition.

This test requires submission of both a disease-involved sample (somatic sample) and non-disease-involved sample (germline comparator sample) from the patient. For malignant conditions, the disease-involved sample must contain a minimum of 20% tumor or blasts. Genetic counseling and submission of an Informed Consent Form is required for this test. This test is currently only available to NCH patients/providers; external samples/orders are NOT accepted at this time.

Somatic Disease/Normal Comparator Exome								
Test Code	SDGC							
	Specimen Type	Volume	Transport/ Stability					
	FFPE tissue	50 mg tissue	Room temp – 12 months					
	FFPE tissue scrolls	15 scrolls (10 micron thick)	Room temp – 12 months					
	Snap-frozen tissue	50 mg tissue	Frozen – 36 months					
Que estimate	OCT-embedded tissue	50 mg tissue	Frozen – 36 months Room temp – 3 days Refrigerated – 7 days					
Specimen Type	Fresh tissue	50 mg thick						
Volume Stability	Bone marrow	4 mL EDTA	Room temp – 3 days Refrigerated – 7 days					
	Whole Blood	4 mL EDTA	Room temp – 3 days Refrigerated – 7 days					
	Saliva	2 tubes - Oragene collection kit	Room temp – 6 months					
	Buccal swabs	4 swabs	Room temp – 7 days Refrigerated – 7 days					
Turnaround Time	28 days							
Comments	 Pre-test genetic counseling and submission of the informed consent form is REQUIRED. This test requires submission of both the disease-involved tissue and the non-disease-involved tissue. Test is orderable in the NCH EPIC system. In addition to disease-related somatic genetic findings, clinically important germline genetic changes may also be reported. 							

Ordering information:

For questions about any of the Test Updates, please contact Laboratory Client Services at (614) 722-5477.



Nationwide Children's Hospital 700 Children's Drive Columbus, Ohio 43205-2664

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

- Pediatric pathologist consults on lab results
- Wide acceptance of insurance plans
- Pediatric reference ranges
- Services to enhance the laboratory process in your practice
- Interface compatibility with provider EMR systems



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/Specialties/Laboratory-Services.

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!