TEST CHANGE

Respiratory Viruses DFA with Reflex to Respiratory Virus Mini Panel by PCR

2002565, RSPFAPCR

Specimen Requirements:		
Patient Preparation:		
Collect:	Nasal aspirate or nasopharyngeal swab.	
Specimen Preparation:	Fluid: Transfer 3 mL specimen to a sterile container. (Min: 1 mL) Also acceptable: Transfer to 3 mL viral transport media (ARUP Supply #12884) available online through eSupply using ARUP Connect(TM) or contact ARUP Client Services at (800) 522-2787. Swab: Place in 3 mL viral transport media (ARUP Supply #12884) available online through eSupply using ARUP Connect(TM) or contact ARUP Client Services at (800) 522-2787.	
Transport Temperature:	Refrigerated.	
Unacceptable Conditions:	Calcium alginate, eSwab, dry or wood swabs. Slides.	
Remarks:	Specimen source preferred.	
Stability:	Ambient: 2 hours; Refrigerated: 72 hours; Frozen: Unacceptable	
Methodology:	Immunofluorescent~~Direct Fluorescent Antibody~~ Stain / Qualitative Reverse Transcription Polymerase Chain Reaction	
Note:	If DFA is negative or inadequate for influenza, then Respiratory Virus Mini Panel by PCR (ARUP test code 0060764) will be added. Additional charges apply. Sensitivity of DFA methodology is dependent upon adequacy of the specimen. If the specimen contains fewer than 20 cells, then DFA result s will be reported as "inadequate."	
CPT Codes:	87276; 87275; 87279 x3; 87280; 87260; 87299; if reflexed, add 87631	
New York DOH Approval Status:	This test is New York DOH approved.	
Interpretive Data:		

Reference Interval:

Refer to report~~Negative~~

Test Number	Components	Reference Interval
	Adenovirus - DFA	Negative
	Human Metapneumovirus DFA	Negative
	Influenza A - DFA	Negative
	Influenza B - DFA	Negative
	Parainfluenza Type 1 - DFA	Negative

	Parainfluenza Type 2 - DFA	Negative
	Parainfluenza Type 3 - DFA	Negative
	Respiratory Syncytial Virus - DFA	Negative

HOTLINE NOTE: There is a component change associated with this test. One or more components have been added or removed. Refer to the Hotline Test Mix for interface build information.