

Inactivations

The following will be discontinued from ARUP's test menu on January 21, 2025 Replacement test options are indicated when applicable.

Test Number	Test Name	Refer to Replacement Test
0090015	Amikacin, Random Level(Change effective as of 01/21/25: Refer to 3018754 in the January Hotline)	Amikacin Level, Random, Serum (3018754)
0090130	Gentamicin, Random Level(Inactive as of 01/21/25)	
0090270	Tobramycin, Random Level(Change effective as of 01/21/25: Refer to 3018760 in the January Hotline)	Tobramycin Level, Random, Serum (3018760)
0090285	Vancomycin, Random Level(Change effective as of 01/21/25: Refer to 3018771 in the January Hotline)	Vancomycin Level, Random, Serum (3018771)
0090295	Amikacin, Peak Level(Change effective as of 01/21/25: Refer to 3018769 in the January Hotline)	Amikacin Level, Peak, Serum (3018769)
0090300	Amikacin, Trough Level(Change effective as of 01/21/25: Refer to 3018756 in the January Hotline)	Amikacin Level, Trough, Serum (3018756)
0090305	Gentamicin, Peak Level(Inactive as of 01/21/25)	
0090310	Gentamicin, Trough Level(Inactive as of 01/21/25)	
0090315	Tobramycin, Peak Level(Inactive as of 01/21/25)	
0090320	Tobramycin, Trough Level(Change effective as of 01/21/25: Refer to 3018762 in the January Hotline)	Tobramycin Level, Trough, Serum (3018762)



Test Number	Test Name	Refer to Replacement Test
0090325	Vancomycin, Peak Level(Inactive as of 01/21/25)	
0090330	Vancomycin, Trough Level(Change effective as of 01/21/25: Refer to 3018758 in the January Hotline)	Vancomycin Level, Trough, Serum (3018758)
2002653	Acute Myelogenous Leukemia (AML) with Myelodysplastic Syndrome (MDS) or Therapy- Related AML, by FISH (Inactive as of 1/21/2025)	
2013990	Polymyositis Panel (Change effective as of 01/21/25: Refer to 3018868 in the January Hotline)	Polymyositis Panel (3018868)
3001781	Extended Myositis Panel (Change effective as of 01/21/25: Refer to 3018867 in the January Hotline)	Extended Myositis Panel (3018867)
3001782	Dermatomyositis Autoantibody Panel (Change effective as of 01/21/25: Refer to 3018870 in the January Hotline)	Dermatomyositis Autoantibody Panel (3018870)
3001783	Dermatomyositis and Polymyositis Panel (Change effective as of 01/21/25: Refer to 3018866 in the January Hotline)	Dermatomyositis and Polymyositis Panel (3018866)
3001784	Interstitial Lung Disease Autoantibody Panel (Change effective as of 01/21/25: Refer to 3018869 in the January Hotline)	Interstitial Lung Disease Autoantibody Panel (3018869)
3002912	Francisella tularensis Antibodies, IgG and IgM with Reflex to Agglutination (Change effective as of 01/21/25: Refer to 3018856 in the January Hotline)	Francisella tularensis Antibodies, IgG and IgM (3018856)
3004753	Allergen, Food, Nut Component Panel IgE (Change effective as of 01/21/25: Refer to 3018650 in the January Hotline)	Allergen, Food, Nut Components Panel,IgE (3018650)



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