

**TEST CHANGE**

**Hepatitis Panel, Acute with Reflex to HBsAg Confirmation and Reflex to HCV by Quantitative NAAT**

3002989, HEPACUTEQR

**Specimen Requirements:**

**Patient Preparation:**

**Collect:** Serum separator tube (SST), ~~lavender (EDTA)~~ or ~~pPink~~ (K2EDTA).

**Specimen Preparation:** Separate serum from cells ASAP or within 2 hours of collection. Transfer 3.0 mL serum or plasma to an ARUP standard transport tube ~~Standard Transport Tube~~. (Min: 2.5 mL) ~~0 mL~~  
Also acceptable: K2EDTA plasma. This test requires a dedicated transport tube submitted only for HEPACUTEQR testing.

**Transport Temperature:** Frozen.

**Unacceptable Conditions:** Heparinized plasma. Specimens containing particulate material. Heat-inactivated, severely hemolyzed, or lipemic specimens.

**Remarks:**

**Stability:** After separation from cells: Ambient: 12 hours; Refrigerated: 65 days; Frozen: 2 months (avoid freeze/thaw cycles)

**Methodology:** Qualitative Chemiluminescent Immunoassay (CLIA)/Quantitative Polymerase Chain Reaction (PCR) ~~Transcription-Mediated Amplification (TMA)~~

**Performed:** Sun-Sat

**Reported:** 1-2 days

**Note:** Preferred ~~Order this panel to evaluate symptomatic patients for viral hepatitis. If when the patient has had clinical~~ acute hepatitis C virus ~~(of unknown origin for less than six months. If results for HBsAg are repeatedly reactive with an index value between 1.00 and 50.00, then HBsAg Confirmation will be added. If the anti-HCV) infection antibody result is suspected, the recommended test is~~ positive, then Hepatitis C Virus (HCV) by Quantitative NAAT (3000572). This panel includes hepatitis A virus (HAV) IgM, hepatitis B virus (HBV) core antibody IgM, HBV surface antigen, and HCV antibody with reflex to HCV by quantitative nucleic acid amplification (NAAT). ~~will be added.~~

~~Additional charges apply.~~

CPT Codes: 80074; if reflexed, add 87341, and 87522

New York DOH Approval Status: This test is New York DOH approved.

**Interpretive Data:**

Component	Interpretation
Hepatitis C Antibody by CIA Interp	0.79 IV or less: Negative 0.80 to 0.99 IV: Equivocal 1.00 to 10.99 IV: Low Positive 11.00 IV or greater: High Positive

**Reference Interval:**

Test Number	Components	Reference Interval
	Hepatitis B Surface Antigen	Negative
	Hepatitis C Antibody by CIA Interp	Negative
	Hepatitis B Core Antibody, IgM	Negative
	Hepatitis A Antibody, IgM	Negative