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 pink (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 (Min: 2.5 mL). 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: 24~~12~~ hours; Refrigerated: 6 days; Frozen: 30 days~~2 months~~ (avoid repeated freeze/thaw cycles)
Methodology:	Qualitative Chemiluminescent Immunoassay (CLIA) / Quantitative Polymerase Chain Reaction (PCR)
Note:	Order this panel when the patient has had clinical acute hepatitis 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 IgG antibody result is positive, then Hepatitis C Virus (HCV) by Quantitative NAAT will be added. Additional charges apply.
CPT Codes:	80074; if reflexed, add 87341; 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 IV or greater: Positive

Reference Interval:

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