

Labview Quarterly

FOR CLIENTS OF PARKVIEW HEALTH LABORATORIES

March 2011

Inside This Issue

- 1 Draw Site Closing
- 2 Peripheral Blood Smear
- 3 Medicare Preventative Services
- 4 Signature Requirements Pending
- 5 Pregnancy Screening
- 6 From our Website

The definition of fasting for PHL is as follows:

1. Nothing to eat after the evening meal. (Time between the last meal and the collection of the blood sample should be 9 - 14 hours unless otherwise specified in the test instructions)
2. Small amounts of water can be consumed to take normal medications, unless the doctor instructs the patient not to take medicines.
3. No coffee, tea, or diet drinks are permitted.
4. Smoking is permitted only if the patient displays withdrawal symptoms.

Central Laboratory
Parkview Hospital
Parkview Huntington Hospital
Parkview Whitley Hospital
Parkview North Hospital
Parkview Noble Hospital
And Parkview Lagrange Hospital



Draw Site to Close

The Parkview Health Central Laboratory located at 328 Ley Road will be relocating to the Parkview North Campus as part of the Parkview Regional Medical Center.

In preparation for that move, the drawing site at this location will be closing effective March 15, 2011. We have notified all patients that have utilized this draw site within the past 6 months and provided them with information regarding alternate draw sites.

Parkview Central Lab will continue to be the drop off site for Home Health agencies and for patients needing Semen Analysis testing. All collections for Paternity and DNA Testing should be referred to EMSI Pelz Paramedical at 619 Airport North Office

Requests for CBC with 'peripheral blood smear'

Parkview Health Laboratories has comprehensive reflex smear review criteria based on 2009 ISLH consensus guidelines* and flagging from highly sophisticated Sysmex® hematology analyzers, which analyze approximately 32,000 cells per sample and produce over 40 flags for potential abnormalities. Based on the results produced, the medical technologists are prompted to manually review smears for abnormalities, or the results are released safely to maintain efficiency.

Beginning March 1, 2011 requests for a CBC with 'peripheral blood smear' will be interpreted as a *CBC with automated differential*. Smears will continue to be reviewed *manually* when criteria or instrument flagging indicates.

Physicians may continue to request a 'Pathologist Smear Review' or 'manual differential', if further morphological review is clinically deemed necessary. In these cases, the indication for the review should please be clearly stated on the order.

Any questions or concerns please contact:
Dr. Seung S Kim, MD, Pathology dept. (X33655)
PVH: Lisa Derck, Lead Tech, Hematology (X33676)

From the Federal Government: Medicare Preventative Services

Diabetes Screening Tests

Glucose
Glucose, Post glucose dose
Glucose tolerance

ONLY covered with this diagnosis

V77.1 Screening for diabetes mellitus

Cardiovascular Disease Screenings

(Covered every 5 years)

Lipid Panel
Cholesterol
Lipoprotein
Triglycerides

Covered ONLY with one of these diagnoses

V81.0 Screening for ischemic heart disease
V81.1 Screening for hypertension
V81.2 Screening for unspecified cardiovascular conditions

This testing will NOT be covered by Medicare if the order/request is simply written with "screening" as the diagnosis/reason for testing. The specific diagnosis code (listed above) must be indicated on the order.

CMS to withdraw pending Signature Requirement Regulation

On November 29, 2010, CMS announced that beginning Jan 1, 2011 all laboratory requisitions would require signatures from a physician or NPP (non-physician practitioner) for tests to be paid on the Clinical Laboratory Fee Schedule. In late December, CMS delayed the requirement until April 1, 2011 so that laboratories could have the 1st quarter of 2011 to review and educate physicians, nursing homes, home health agencies and other ordering entities. As of February 11, 2011 ASCP announced that CMS was going to rescind this pending requirement. The official announcement has not yet come from CMS, but is expected in the near future.

Urine Pregnancy Testing

Urine pregnancy testing is a screening tool and should only be used for the qualitative detection of HCG for early determination of pregnancy.

In urine, intact and fragmented HCG molecules are present. Fragmented HCG molecules are elevated in mid pregnancy and in certain malignancies. Urine pregnancy test kits may pick up a fragmented HCG molecule, causing a false negative urine pregnancy result even though a patient is pregnant.

Results should be used in the context of the patient clinical information (medical history, symptoms, results of other tests, clinical impression) and/or confirmed using a serum quantitative hCG assay prior to performance of any critical medical procedure.

From our website: lab.parkview.com

Changes to the stability for pH Fluid testing

Test Code: FPH

Client Notes: Please contact PHL Client Response at 373-9500 to **request a Stat** courier pick up, testing within in one hour of collection is preferred.

Specimen Requirements: 3.0 mL Fluid in a **Green Top Tube** - Li Heparin in a Plastic Vial

Collection Instructions: Order must include the site and/or source of collection. Must keep Vial tightly closed to prevent exposure to Air.

Minimum Volume: 1.0 mL

Temperature & Stability: 24 hours Refrigerated - Keep specimen refrigerated until and during transport.