

Esoterix Update

A Newsletter for Clients

Volume I, N° 4 | December 2010

Announcements

In observance of the upcoming holidays, all Esoterix facilities will be closed the following days:

- Christmas Day, Saturday December 25, 2010
- New Year's Day, Saturday January 1, 2011

For questions regarding specimen handling, contact Esoterix Client Services, 800-444-9111.

Updates to the Esoterix Test Menu

The following changes to the Esoterix *Test Menu* are scheduled to be implemented on January 10, 2011 unless otherwise noted. For up-to-date test information, please consult the Esoterix *Test Menu* at www.esoterix.com. For more information, call Esoterix at 800-444-9111.

Test Name	N°	Field/Change (Only fields that change are included here.)																				
Aldosterone	500014	<p>Methodology HPLC, tandem mass spectrometry</p> <p>Reference Interval</p> <table border="1"> <thead> <tr> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td>Premature (26–28 wks), Day 4</td> <td>5–635 ng/dL</td> </tr> <tr> <td>Premature (31–35 wks), Day 4</td> <td>19–141 ng/dL</td> </tr> <tr> <td>Full-term, Day 3</td> <td>7–184 ng/dL</td> </tr> <tr> <td>Full-term, Day 7</td> <td>5–175 ng/dL</td> </tr> <tr> <td>1–11 mos</td> <td>5–90 ng/dL</td> </tr> <tr> <td>12–23 mos</td> <td>7–54 ng/dL</td> </tr> <tr> <td>24 mos–9 yrs</td> <td>5–80 ng/dL</td> </tr> <tr> <td>10–14 yrs</td> <td>4–48 ng/dL</td> </tr> <tr> <td>Adults</td> <td><31 ng/dL</td> </tr> </tbody> </table>	Age	Reference Interval	Premature (26–28 wks), Day 4	5–635 ng/dL	Premature (31–35 wks), Day 4	19–141 ng/dL	Full-term, Day 3	7–184 ng/dL	Full-term, Day 7	5–175 ng/dL	1–11 mos	5–90 ng/dL	12–23 mos	7–54 ng/dL	24 mos–9 yrs	5–80 ng/dL	10–14 yrs	4–48 ng/dL	Adults	<31 ng/dL
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Comprehensive GlycoMark® & A1C Profile	501881	<p>Additional Information Now includes hemoglobin A_{1c} diabetic assessment</p> <p>Reference Interval: Hemoglobin</p> <table border="1"> <thead> <tr> <th>Hemoglobin (Hgb) A_{1c}</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td>Normal</td> <td><5.7%</td> </tr> <tr> <td>Increased risk for diabetes</td> <td>5.7–6.4%</td> </tr> <tr> <td>Ongoing hyperglycemia</td> <td>>6.4%</td> </tr> <tr> <td>Glycemic control for adults with diabetes (per ADA)</td> <td><7.0%</td> </tr> </tbody> </table>	Hemoglobin (Hgb) A _{1c}	Reference Interval	Normal	<5.7%	Increased risk for diabetes	5.7–6.4%	Ongoing hyperglycemia	>6.4%	Glycemic control for adults with diabetes (per ADA)	<7.0%										
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Testosterone, Total	500286	<p>Additional Information New reference interval for prepubertal males and females LLOQ=2.5 ng/dL Changes effective December 13, 2010</p> <p>Reference Interval</p> <table border="1"> <thead> <tr> <th>Males</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td></td> <td>Premature (26–28 wks), Day 4</td> <td>59–125 ng/dL</td> </tr> <tr> <td></td> <td>Premature (31–35 wks), Day 4</td> <td>37–198 ng/dL</td> </tr> <tr> <td></td> <td>Newborns</td> <td>75–400 ng/dL</td> </tr> <tr> <td></td> <td>1–7 mos</td> <td>Levels decrease rapidly the first week to 20–50 ng/dL, then increase to 60–400 ng/dL between 20 to 60 days. Levels then decline to prepubertal range levels of <2.5–10 ng/dL by seven months</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Females</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td></td> <td>Premature (26–28 wks), Day 4</td> <td>5–16 ng/dL</td> </tr> <tr> <td></td> <td>Premature (31–35 wks), Day 4</td> <td>5–22 ng/dL</td> </tr> <tr> <td></td> <td>Newborns</td> <td>20–64 ng/dL</td> </tr> <tr> <td></td> <td>1–7 mos</td> <td>Levels decrease during the first month to less than 10 ng/dL and remain there until puberty</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Prepubertal males and females</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td></td> <td><2.5–10 ng/dL</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Males</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td>Tanner stage 1</td> <td><9.8 yrs</td> <td><2.5–10 ng/dL</td> </tr> <tr> <td>Tanner stage 2</td> <td>9.8–14.5 yrs</td> <td>18–150 ng/dL</td> </tr> <tr> <td>Tanner stage 3</td> <td>10.7–15.4 yrs</td> <td>100–320 ng/dL</td> </tr> <tr> <td>Tanner stage 4</td> <td>11.8–16.2 yrs</td> <td>200–620 ng/dL</td> </tr> <tr> <td>Tanner stage 5</td> <td>12.8–17.3</td> <td>350–970 ng/dL</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Females</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td>Tanner stage 1</td> <td><9.2 yrs</td> <td><2.5–10 ng/dL</td> </tr> <tr> <td>Tanner stage 2</td> <td>9.2–13.7 yrs</td> <td>7–28 ng/dL</td> </tr> <tr> <td>Tanner stage 3</td> <td>10.0–14.4 yrs</td> <td>15–35 ng/dL</td> </tr> <tr> <td>Tanner stage 4</td> <td>10.7–15.6 yrs</td> <td>13–32 ng/dL</td> </tr> <tr> <td>Tanner stage 5</td> <td>11.8–18.6 yrs</td> <td>20–38 ng/dL</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Adult males</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td></td> <td>>18 yrs</td> <td>350–1030 ng/dL</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Adult females</th> <th>Age</th> <th>Reference Interval</th> </tr> </thead> <tbody> <tr> <td></td> <td>Premenopausal</td> <td>10–55 ng/dL</td> </tr> <tr> <td></td> <td>Postmenopausal</td> <td>7–40 ng/dL</td> </tr> </tbody> </table>	Males	Age	Reference Interval		Premature (26–28 wks), Day 4	59–125 ng/dL		Premature (31–35 wks), Day 4	37–198 ng/dL		Newborns	75–400 ng/dL		1–7 mos	Levels decrease rapidly the first week to 20–50 ng/dL, then increase to 60–400 ng/dL between 20 to 60 days. Levels then decline to prepubertal range levels of <2.5–10 ng/dL by seven months	Females	Age	Reference Interval		Premature (26–28 wks), Day 4	5–16 ng/dL		Premature (31–35 wks), Day 4	5–22 ng/dL		Newborns	20–64 ng/dL		1–7 mos	Levels decrease during the first month to less than 10 ng/dL and remain there until puberty	Prepubertal males and females	Reference Interval		<2.5–10 ng/dL	Males	Age	Reference Interval	Tanner stage 1	<9.8 yrs	<2.5–10 ng/dL	Tanner stage 2	9.8–14.5 yrs	18–150 ng/dL	Tanner stage 3	10.7–15.4 yrs	100–320 ng/dL	Tanner stage 4	11.8–16.2 yrs	200–620 ng/dL	Tanner stage 5	12.8–17.3	350–970 ng/dL	Females	Age	Reference Interval	Tanner stage 1	<9.2 yrs	<2.5–10 ng/dL	Tanner stage 2	9.2–13.7 yrs	7–28 ng/dL	Tanner stage 3	10.0–14.4 yrs	15–35 ng/dL	Tanner stage 4	10.7–15.6 yrs	13–32 ng/dL	Tanner stage 5	11.8–18.6 yrs	20–38 ng/dL	Adult males	Age	Reference Interval		>18 yrs	350–1030 ng/dL	Adult females	Age	Reference Interval		Premenopausal	10–55 ng/dL		Postmenopausal	7–40 ng/dL
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Thyroid Peroxidase Antibodies (Anti-TPO)	500042	Minimum Volume 0.3 mL Methodology Chemiluminescence Reference Interval All ages: <9.0 IU/mL
Vitamin D, 25-Hydroxy, Fractionated (Total Vitamin D, Vitamin D-2, Vitamin D-3)	500337	Reference Interval All ages: Target levels 32–100 ng/mL
Vitamin D, 25-Hydroxy, Serum	500338	Reference Interval All ages: Target levels 32–100 ng/mL

The CPT codes included in this publication are in accordance with *Current Procedural Terminology*, a publication of the American Medical Association. CPT codes are provided here for the convenience of our clients; however, correct coding often varies from one carrier to another, and Esoterix may bill specific carriers using codes other than those shown. Clients who bill for services should verify the codes with the applicable payor to confirm that their use is appropriate in each case.