



Laboratory Communiqué

Volume 5 , Number 3
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The *Laboratory Communiqué* is a quarterly publication released by Billings Clinic Laboratory Services as an informational tool for medical staff and laboratorians.

In This Issue

Test Updates:

HIV 1-2 Antigen/Antibody Combo Assay

BC Test: 8318
MayoAccess: BCL194

HIV 1-2 CPT: 86703

Ova and Parasite (O&P) Screen

BC Test : 6767
MayoAccess: BCL850

Cryptosporidium Antigen
Test: CPT 87272

Giardia Antigen Test:
CPT 87269

Important Test Updates

HIV Antigen/Antibody Combo

Our laboratory has replaced the HIV 1/2 Antibody ELISA with the Architect HIV Antigen/Antibody Combo Assay. HIV testing is now performed on the Architect Instruments utilizing the Abbott track system and robotics. This change allows us to provide HIV testing 24/7 as compared to the previously batched ELISA runs performed once daily M-F. This change also eliminated the need for the Rapid HIV 1/2 test which was available for use outside the normal ELISA testing schedule.

The HIV Ag/Ab Combo is a chemiluminescent microparticle immunoassay (CMIA) for the simultaneous qualitative detection of HIV p24 antigen and antibodies to HIV type 1 and/or HIV type 2 in human serum and plasma.

Early after infection with HIV-1, but prior to seroconversion, HIV-1 core protein, p24 antigen, may be detected in HIV-1 infected individuals. The Architect HIV Ag/Ab Combo uses anti-HIV p24 antibodies as reagents to detect HIV-1 p24 antigen, thereby decreasing the window period and improving early detection of HIV infection.

The key immunogenic protein for serodetection of HIV infection is the viral transmembrane protein (TMP). Antibodies against the TMP are consistently among the first to appear during seroconversion of HIV-infected individuals and remain relatively strong throughout the asymptomatic and symptomatic stages of HIV infection. The Architect HIV Ag/Ab Combo detects antibodies to HIV-1 groups M and O, and HIV-2 through the use of five recombinant proteins and two synthetic peptides derived from native TMP sequences of HIV-1 groups M and O, and HIV-2.

Test Specimen Requirement Change:

PF4 specimen requirement change

Discontinued Test:

Fecal Fat Stain

Ova and Parasite (O&P) Screen

To increase the chances of finding a significant organism, all routine requests for intestinal parasites will only include an antigen test for giardia and cryptosporidium. The test report will only indicate positive or negative for giardia and cryptosporidium. This routine and current O&P order has been renamed “Ova and Parasite Screen”.

Frequently it is necessary to routinely perform complete microscopic ova and parasite exams and it is only indicated if the patient has recent foreign travel or unexplained eosinophilia. Note the following recommendation for parasitic examination:

- Watery diarrhea
- Have contact with farm animals
- Are involved in outbreak
 - Municipal water supply
 - Resort community
 - Day care center
- 5 years old or less
- Camper or backpacker
- Have AIDS

Complete parasitic examination

- Resident or visitor to a developing country
- Resident or visitor to an area of North America where Helminth (worm) infections have been reported with some frequency
- Unexplained eosinophilia

If the cause of diarrhea or abdominal complaint is not identified, the complete O&P is still obtainable by calling Billings Clinic Laboratory at 406-657-4074 and a complete O&P can be added on. The specimen jars will be held for one week for this possibility.

Test Specimen Requirement Update

Platelet Factor 4

The specimen requirement/container has been changed from a serum/glass red top to a citrated plasma/blue top.

Discontinued Test

Fecal Fat Stain

The test for Fecal Fat on a random stool sample (BC 6624) has been discontinued as an in-house test. This change was necessitated by the difficulty in obtaining the liquid Sudan Black III and IV stain required for the test. This test is available from Mayo Laboratories (Mayo 8310).

Test Range Updates

APTT Reference Range

Effective May 18, 2011 the Reference Range for APTT was changed from:

Old: 24.8 – 30.9 seconds

New: 21.6 – 32.4 seconds

This change was due to a new lot of reagents.

Updated Heparin Therapeutic Range

The Heparin Therapeutic Range for APTT has changed as a result of the new lot number of APTT reagents. The change is from:

Old: 52 – 92 seconds

New: 51 – 107 seconds

Staclot LA Reference Range

The Reference Range for the Staclot LA Cutoff has been changed. This test is part of the Lupus Anticoagulant Panel. This change was due to a new lot of reagent.

Old Cutoff: ≤ 14.0

New Cutoff: ≤ 11.0

Test Range Updates:

New Reference Range for APTT

New Heparin Therapeutic Range

New Reference Range for Staclot LA

Meeting News

ASCP Video Contest Update

4th Annual Billings Clinic Laboratory Services Fall Education Conference: Friday, October 14th

Meetings

National Medical Laboratory Professionals Week (NMLPW) was April 24-30, 2011

Our laboratory's video titled "*Mission Possible*" won an "Honorable Mention" in the American Society for Clinical Pathology (ASCP) sponsored 2011 Lab Week Contest. Many thanks to the laboratory staff featured in the video and to Joey Traywick for all his time spent in the filming and editing of our video. GOOD JOB!

Billings Clinic Laboratory Services Annual Fall Education Conference

The 4th Annual Billings Clinic Laboratory Services Fall Education Conference will be held Friday, October 14th from 10:00AM to 4:00PM at the Mary Alice Fortin Health Conference Center located at Billings Clinic.

Speakers:

Dr. Robert Geller

Thrombotic Disorders

Others TBD

For more information about Billings Clinic Laboratory please call (406) 657-4060 or 1-866-232-2522. www.billingsclinic.com.



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