

LIST OF REFLEXED TESTS

Microbiology Tests with a reflexed component:

Charged to patient without requirement for physician approval

ANA Screen	If the ANA Screen is positive or equivocal, autoantibodies for SSA, SSB, Sm, RNP, Scl-70, Jo-1, Centromere B, dsDNA, and Histone will be added and reported as a quantitative result in U/mL. Positive: >120 U/mL Equivocal: 100-120 U/mL Negative: <100 U/mL
Acid Fast Bacteria:	Identification and susceptibility testing of Mycobacterium tuberculosis and M. avium are sent to the Maryland State Health Department Laboratory. All other Mycobacterium species identification and susceptibility testing will be performed only by request of Infectious Disease Specialist and/or Director of Microbiology.
ASO	A titer is automatically added on all reactive Anti-Steptolysin O Qualitative Screens.
Body Fluid Cultures, Purulent or Bloody:	Anaerobic Culture (ANCU) is automatically added.
CSF, Lower Respiratory, Wound and Tissue Cultures:	A Gram stain is automatically performed on all sterile body fluids, lower respiratory, wound, and tissue specimens.
Cultures with Significant Aerobic Organisms Isolated	Identification and susceptibility testing.
Direct Rapid Strep (DRS) that tests negative:	Either a Strep Screen Culture (SSCR) or a Throat Culture (TCUL) is added.
Fungi or Yeast Isolated:	Identification.
Group B Streptococcus GBS-PCR test positive:	Culture identification and susceptibility testing is added.
Hepatitis B core, IgG & IgM (i.e. "Total") Antibodies:	If the total assay is reactive, the Hepatitis B IgM (only) antibody assay is performed.
Herpes positive specimens:	Typing of herpes positive specimens
HIV Antibody (HIV1 and 2) Reactive	Western Blot confirmation is added.
HIV Stat Antibody (HIVS) Non Reactive:	HIV 1 and 2 by EIA is done.
HPV from Thin Prep PAP in Cytology:	An HPV will be performed on Thin Prep PAP smears which have positive results if ordered as a reflex test. It will be ordered and performed in the Microbiology Lab.
Influenza A/B Viral Antigen (INFA) Negative:	A Viral Respiratory Culture is added.
Lyme Antibody:	If the screening test comes up positive or equivocal, Western blot assays are referred for the IgG and IgM antibodies.
RPR positive:	Sent out to Maryland State laboratory for confirmatory testing.
Respiratory Syncytial Virus Antigen (RSV) Negative:	A Viral Respiratory Culture is added.
Stool Culture (FCUL) with Salmonella or Shigella isolated	Organism typing is automatically added to all Stool Cultures when either one of these organisms is isolated. Does not generate additional charges

Hematology / Urinalysis Tests with a reflexed component:

White Blood Count below 1.0:	Buffy coat smear Charged to the patient
Body Fluid Differentials with cells reviewed by the pathologist as suspicious for malignancy, where no cytology is ordered,	Body Fluid Cytology. Charged to the patient
CBC or Hematology Panel Abnormalities	A Manual Differential or a Smear Scan is added if required based upon instrument flags. Call Hematology for details. Not charged to patient. A manual hematocrit (no charge) is added for low hematocrit or when the H&H does not follow the X3 rule and the patient has not previously been done.
Urinalysis	Urines with results outside of normal limits will reflex to a microscopic exam. Call Hematology for details. Urine Culture will be added if the criteria for culture are met and the test ordered is Routine Urinalysis with Culture Reflex (RUAC). Reducing Substances (Clinitest) is added if the patient is less than 6 years of age.
Urinalysis - Bilirubin Abnormal	A confirmation (Ictotest) is added if bilirubin is greater than SMALL

Transfusion Services tests with a reflexed component. Charged to the patient:

Antibody Screen Positive	Antibody identification workup (ABID) is added. Autocontrol (AC) is added.
Autologous Control Positive	Direct antiglobulin test (DAT) is added.
Direct Antiglobulin Test (DAT) Positive	Anti-IgG, Anti-C3d, and Total Bilirubin (Cord blood only) are added.
Anti-IgG Positive	Antibody Elution (ABEL) is added
Type & Screen with Positive Antibody Screen	We set up two units of packed cells on all positive antibody screens. Full antiglobulin crossmatch (PCXM) added.
Identified Antibody	We antigen type the patient and donor units for patients with antibodies, after identifying the antibody.
Unusual Antibodies or Compatibility Problems	Specimen sent to ARC reference lab for consultation. Charges vary with the complexity of the problem.
Additional Units Requested	We retype the patient when we add on units (no charge).
Cord Blood Specimens	Storage only. Tests ordered if mother is Rh negative. No reflex.

Chemistry Reflex Tests:

Charged to the patient:

Thyroid Cascade	Free T4 is performed if TSH is abnormal (only if ordered as cascade).
-----------------	---

Reference Laboratory Tests with a reflexed component

Hemoglobin Fractionation	Depending on the results of the HPLC assay, electrophoresis and/or a Hemoglobin S confirmation test may be performed.
Coagulation Consultation (Lupus-like Anticoagulant, Hypercoagulability, von Willebrand's, etc.)	Additional confirmatory testing is added as results of the baseline tests are known. Lupus-like Anticoagulant orders with routine PTT mixing studies as a separate order specimens will be canceled as a duplicate order.
Various antibody tests (ANCA, Endomysial, Bartonella, etc.)	Antibody titer is added if the screen is positive. Generally, these are not charged.

Anatomic Pathology:

Charged to the patient:

Special stains and immunohistochemistry ordered by the pathologist after examination of the microscopic slides to confirm diagnosis.

Confirmation for all consultation requests for Anatomic Pathology work that would be billed to the patient is requested from the ordering physician before sent out.

External consultations at the request of the Pathologist are not billed to the patient.

Cytology:

"Thin prep" pap smears with a diagnosis of ASCUS are reflexed to HPV testing only if marked as such on the request form.