



**Shaded tests on the front page are those for which Medicare may deny payment.  
In this case, the patient may need to sign a Medicare Disclosure Form (ABN)**

ORGAN/DISEASE PANELS PANEL COMPONENTS (Medicare approved)	Basic Metabolic Panel	Comprehensive Metabolic Panel	Hepatic Function Panel	Acute Hepatitis Panel	Lipid Panel	Obstetric Panel	Renal Function Panel
Sodium	X	X					X
Potassium	X	X					X
Chloride	X	X					X
Carbon Dioxide, Total	X	X					X
Calcium	X	X					X
Creatinine	X	X					X
Glucose	X	X					X
Urea Nitrogen (BUN)	X	X					X
Glomerular Filtration Rate (Calculation)	X	X					X
Albumin		X	X				X
Alkaline Phosphatase		X	X				
Total Bilirubin		X	X				
Direct Bilirubin			X				
AST (SGOT)		X	X				
ALT (SGPT)		X	X				
Total Protein		X	X				
Phosphorus							X
Hepatitis A Antibody, IgM				X			
Hepatitis B Surface Antigen ‡				X		X	
Hepatitis B Core Antibody, IgM				X			
Hepatitis C Antibody				X			
Cholesterol, Total					X		
HDL					X		
Triglycerides					X		
LDL (Calculation)					X		
CBC with differential						X	
Rubella IgG, Qualitative						X	
RPR ‡						X	
ABO and Rh Type						X	
Antibody Screen ‡						X	

‡ Reflex Test or Interpretation– when initial test results are positive or outside defined criteria, additional medically appropriate confirmatory or related test(s) are automatically performed and charged unless declined.

**THE FOLLOWING REFLEX TEST(S ) WILL BE PERFORMED AT AN ADDITIONAL CHARGE**

<b>ANA Screen:</b> If positive, a titer and pattern will be performed by Indirect Fluorescent Antibody (IFA) method. • If the SM-RNP Ab screen is positive, a Smith Ab (in-house) and RNP Ab (sendout) will be performed.
<b>Antibody Screen (RBC):</b> If positive, antibody identification will be performed. If an antibody is identified, a titer will be performed on prenatal specimens only.
<b>Microbiology Cultures:</b> If positive, organism identification tests, typing and susceptibility tests will be performed.
<b>CBC with differential:</b> Pathologist's review will be performed if an abnormal parameter on CBC screen is detected.
<b>Clostridium difficile Toxin &amp; Antigen:</b> PCR test will be performed if EIA screen result is indeterminate.
<b>Enteric Bacterial Pathogen PCR Panel:</b> If Shigella is detected, antimicrobial susceptibility will be performed. If Shiga toxin gene or Salmonella is detected, single organism screen will be performed.
<b>Fentanyl, urine:</b> Positive Fentanyl Screen will reflex to Fentanyl, Urine by LCMS. For maternal and neonatal drug screens only
<b>Hepatitis A Antibody, Total:</b> If positive, a Hepatitis A Antibody, IgM will be performed
<b>Hepatitis B Surface Antigen:</b> If positive, confirmatory test will be performed.
<b>Hepatitis C antibody:</b> If result is reactive or equivocal, Hepatitis C RNA, quantitative, PCR will be performed.
<b>HIV Ag/Ab Combo:</b> If positive, confirmatory tests will be performed.
<b>Lipid Panel w/Reflex to Direct LDL:</b> If triglycerides are greater than 400 mg/dl, an LDL direct cholesterol will be performed.
<b>Lyme Antibody:</b> If positive, confirmation testing will be performed
<b>Platelet count:</b> If the platelet count is <75k/mcl, Immature platelet fraction (IPF) will be performed.
<b>Protein Electrophoresis (urine or serum):</b> If abnormal bands are detected an immunofixation will be performed
<b>RBC Rh Type:</b> If the Rh type is negative on mother/baby, a Rh Du subtype will be performed
<b>RPR ordered without Syphilis treponemal screen:</b> Reactive RPR result will reflex to titer and Treponemal Ab EIA Screen
<b>RPR reflexed from positive Syphilis treponemal screen:</b> Non-reactive RPR results will reflex to Treponemal Antibody by Particle Agglutination (ARUP test # 50777). Reactive result will reflex to titer only.
<b>Syphilis Screen:</b> If positive or equivocal, confirmatory tests will be performed.
<b>Urinalysis Screen with reflexes:</b> • Microscopic urinalysis will be performed if dipstick nitrite, leukocyte esterase, blood, protein, or glucose and ketone are positive. • If urinalysis, culture if indicated is ordered, a culture will be performed if the dipstick is positive for nitrite, > or = to small for leukocyte esterase, or if > or = 10-20 WBC are seen on microscopic exam.