PTH and Calcium w/Graph (26669)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 83970, 82310

Billing No: 26669

Interface Code: AAAPTH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PTH	PARATHYROID HORMONE, INTACT	RES	N		2731-8
CAPTH	CALCIUM	RES	N		17861-6
GRAPH	PTH/CALCIUM GRAPH	RES	N		

Additional Client/Patient Information

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: AAINFO

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
AAINFO	ADD'L CLIENT/PATIENT INFO	AOE	N			TEXT		
AAINFO	ADD'L CLIENT/PATIENT INFO	RES	N					

Standing Order

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: AASO

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SO	STANDING ORDER	AOE	N			TEXT		
SOT	SO-TEST ORDERED	AOE	Y			TEXT		
SOL	SO-LOCATION OF DRAW	AOE	Y			TEXT		
SO	STANDING ORDER	RES	N					

Blood Gases - ABG (pH pCO2 + pO2) (21200)

Effective Date 12/1/2012

CPT(s): 82803

Expiration Date:

Billing No: 21200

Interface Code: ABG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PH	pH	RES	N	Units	2744-1
PCO2A	pCO2 ARTERIAL	RES	N	mmHg	2019-8
PO2	PO2	RES	N	mmHg	11556-8
O2SAT	O2 SATURATION	RES	N	%	2708-6
CO2A	CO2 ARTERIAL	RES	N	mM/L	2026-3
BICARB	BICARBONATE	RES	N	mM/L	1960-4
CO2DEL	CO2 DELTA	RES	N	3 mM/L	1925-7
O2STAT	O2 STATUS	RES	N		
APPL	O2 APPLIANCE	RES	N		
SOURCE	SAMPLE SITE	RES	N		31208-2
BPRES	BAR. PRES.	RES	N	mmHg	20053-5

ABO Blood Group Type (10150)

Effective Date 12/1/2012

CPT(s): 86900

Expiration Date:

Billing No: 10150

Interface Code: ABO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PABO	PATIENT`S ABO GROUP	RES	N		883-9

ABO and Rh Type (10000)

Effective Date 12/1/2012

CPT(s): 86900, 86901

Expiration Date:

Billing No: 10000

Interface Code: ABRH May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%ABR	PATIENT ABO/Rh (D)	RES	N		882-1
ARREM	PT ABO/Rh/SPEC REMARKS	RES	N		19066-0
RHREM	Rh IMMUNE GLOB REM	RES	N		19066-0
%DU	PATIENT WEAK D (DU)	PRFLX	N		972-0

Acetaminophen (Tylenol) (20010)

Effective Date 10/14/2014

CPT(s): 80329

Expiration Date:

Billing No: 20010

Interface Code: ACET

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTACET	DATE OF LAST DOSE	AOE	N			DATE		
TMACET	TIME OF LAST DOSE	AOE	N			TEXT		
DSACET	DOSAGE	AOE	N			TEXT		
ACETAM	ACETAMINOPHEN	RES	N	mg/L	3298-7			
DTACET	DATE OF LAST DOSE	RES	N		29742-4			
TMACET	TIME OF LAST DOSE	RES	N		29637-6			
DSACET	DOSAGE	RES	N		18817-7			

Culture, Acid Fast Mycobacteria Blood (52050)

Effective Date 12/1/2012

CPT(s): 87116

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 52050

Interface Code: AFBL

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	BLD	BLOOD
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		543-9			
RPT	REPORT STATUS	RES	N					

Culture, Acid Fast Mycobacteria (52000)

Effective Date 12/1/2012

CPT(s): 87116, 87206

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52000

Interface Code: AFC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TONGUE`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG TISSUE`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SKIN

BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TONGUE`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETER`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST

SREQ	SPECIAL REQUESTS	AOE	N		TEXT
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2	
SREQ	SPECIAL REQUESTS	RES	N	8251-1	
AF	ACID FAST STAIN	RES	N	11545-1	
CULT	CULTURE	RES	N	543-9	
RPT	REPORT STATUS	RES	N		

AFFIRM VPIII DNA Probe (50500)

Effective Date 12/1/2012

CPT(s): 87480, 87510, 87660

Expiration Date:

Billing No: 50500

Interface Code: AFFIRM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRI	TRICHOMONAS VAGINALIS	RES	N		54144-1
GARD	GARDNERELLA Vaginalis	RES	N		54143-3
CAND	CANDIDA SPECIES	RES	N		54142-5

AFFIRM VPIII w/ Rflx Culture (50505)

Effective Date 12/1/2012

CPT(s): 87480, 87510, 87660

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 50505

Interface Code: AFFRFX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRI	TRICHOMONAS VAGINALIS	RES	N		54144-1
GARD	GARDNERELLA Vaginalis	RES	N		54143-3
CAND	CANDIDA SPECIES	RES	N		54142-5
GCRFLX	GENITAL CULTURE REFLEX	RES	N		

Fetal Lung Maturity Evaluation (FLM) (20560)

Effective Date 12/1/2012

CPT(s): 83664

Expiration Date:

Billing No: 20560

Interface Code: AFL

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
GESTWK	GESTATIONAL WEEKS	AOE	N			TEXT		
AMNAPP	AMNIOTIC FL. APPEARANCE	RES	N		1887-9			
GESTWK	GESTATIONAL WEEKS	RES	N		49051-6			
LBC	LAMELLAR BODY COUNT	RES	N	thou/cmm	19114-8			

Alpha-Fetoprotein (AFP) Tumor Marker, Serum (20430)

Effective Date 12/1/2012

CPT(s): 82105

Expiration Date:

Billing No: 20430

Interface Code: AFPTM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AFPTM	ALPHA-FETOPROTEIN (AFP) Tumor Marker, Pl or S	RES	N	ng/mL	53962-7

Acid Fast Stain Only (55360)

Effective Date 12/1/2012

CPT(s): 87206

Expiration Date:

Billing No: 55360

Interface Code: AFSM

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N	SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEMOW`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VUL`WND`WNDR`WRIST	ABDOMEN`ABCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHING`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEMODIALYSIS WATER`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG TISSUE`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOUL

						DER`SHUNT FLUID`SINUS`SKIN BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBD URAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSI L`TOOTH`TRACHEOSTOMY`TRANSTRAC HEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRA L`URETER`URINE`UTERINE`VAGINAL`VA GINAL-CERVICAL`VENTRICULAR CSF`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
AF	ACID FAST STAIN	RES	N	11545-1		
RPT	REPORT STATUS	RES	N			

Albumin (20150)

Effective Date 12/1/2012

CPT(s): 82040

Expiration Date:

Billing No: 20150

Interface Code: ALB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALB	ALBUMIN	RES	N	gm/dL	61152-5

Alcohol Blood (Ethanol) (20300)

Effective Date 1/1/2015

CPT(s): 80320

Expiration Date:

Billing No: 20300

Interface Code: ALC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALC	ALCOHOL BLOOD (Ethanol)	RES	N	mg/dL	5643-2

Alkaline Phosphatase (20400)

Effective Date 12/1/2012

CPT(s): 84075

Expiration Date:

Billing No: 20400

Interface Code: ALKP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALKP	ALKALINE PHOSPHATASE	RES	N	U/L	6768-6

ALT (SGPT) (20450)

Effective Date 12/1/2012

CPT(s): 84460

Expiration Date:

Billing No: 20450

Interface Code: ALT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALT	ALT (SGPT)	RES	N	U/L	1742-6

Ammonia (NH3) (20500)

Effective Date 12/1/2012

CPT(s): 82140

Expiration Date:

Billing No: 20500

Interface Code: AMMON

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMMON	AMMONIA (NH3)	RES	N	umol/L	16362-6

Amphetamine/Methamphetamine Screen, Urine (20570)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 20570

Interface Code: AMPHET

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMPHET	AMPHETAMINE/METHAMPHETAMINE SCREEN	RES	N		43983-6

Amylase (20600)

Effective Date 12/1/2012

CPT(s): 82150

Expiration Date:

Billing No: 20600

Interface Code: AMY

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMY	AMYLASE	RES	N	U/L	1798-8

Culture, Anaerobic with Gram Stain (Hospital use only) (52100)

Effective Date 12/1/2012

CPT(s): 87075, 87205

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52100

Interface Code: ANAER

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	BM`EYE`PUMP`SIN`SKN`SUPA`TI`WNDR	BONE MARROW`EYE`PUMP SPECIMEN`SINUS`SKIN`SUPRAPUBIC ASPIRATE`TISSUE`WOUND DRAINAGE
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		611-4			
RPT	REPORT STATUS	RES	N					

ANCA Vasculitis Panel w/Reflex (28690)

Effective Date 3/26/2013

CPT(s): 83876, 86021, 83516

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 28690

Interface Code: ANCAPN Package includes Q70171, NMPO and NPR3; May Reflex Q18755, Q18756, Q18757

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Antibody Screening (10100)

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 10100

Interface Code: ASC May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%AS	PT ANTIBODY SCREEN	RES	N		890-4
AGREM	PT ANTIGEN REMARKS	PRFLX	N		19066-0
ASREM	ANTIBODY SCREEN REMARKS	PRFLX	N		19066-0
PPCA	PREV ANTIBODY COM	PRFLX	N		19066-0

Streptozyme (ASO Screen) (28490)

Effective Date 12/1/2012

CPT(s): 86403

Expiration Date:

Billing No: 28490

Interface Code: ASOSCR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ASOSCR	STREPTOZYME (ASO Screen)	RES	N		9788-1

AST (SGOT) (20800)

Effective Date 12/1/2012

CPT(s): 84450

Expiration Date:

Billing No: 20800

Interface Code: AST

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AST	AST (SGOT)	RES	N	U/L	30239-8

Anti-Thrombin III Functional (AT3) (40000)

Effective Date 12/1/2012

CPT(s): 85300

Expiration Date:

Billing No: 40000

Interface Code: AT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AT3	ANTI-THROMBIN III FUNCTIONAL (AT3)	RES	N	% of Normal	27811-9

Alpha 1 Antitrypsin (20420)

Effective Date 12/1/2012

CPT(s): 82103

Expiration Date:

Billing No: 20420

Interface Code: ATRYP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ATRYP	ALPHA 1 ANTITRYPSIN	RES	N	mg/dL	1825-9

Vitamin B-12 (B12) (29550)

Effective Date 12/1/2012

CPT(s): 82607

Expiration Date:

Billing No: 29550

Interface Code: B12

Result/AOE Code	Description	Type	Suppress	Units	LOINC
B12	VITAMIN B-12 (B12)	RES	N	pg/mL	2132-9

Bronchoalveolar Lavage Cell Count w/Differential (56080)

Effective Date 12/1/2012

CPT(s): 89051

Expiration Date:

Billing No: 56080

Interface Code: BAL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BSITE	SITE	RES	N		39111-0
BAPP	APPEARANCE	RES	N		32803-9
BCOL	COLOR	RES	N		32802-1
BRBC	RBC	RES	N	/cmm	6741-3
BNC	NUCLEATED CELLS	RES	N	/cmm	14810-6
BNEUT	NEUTROPHILS	RES	N	%	769-0
BLYM	LYMPHS	RES	N	%	14819-7
BMACRO	MACROPHAGES	RES	N	%	14823-9
BEPI	COLUM. EPITHELIAL	RES	N	%	32823-7
BCOM	BAL REFERENCE RANGE	RES	N		

Barbiturates Screen (20850)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 20850

Interface Code: BARB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BARB	BARBITURATES SCREEN	RES	N		19275-7

Benzodiazepine Screen (20950)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 20950

Interface Code: BENZO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BENZO	BENZODIAZEPINE SCREEN	RES	N		19283-1

Bilirubin Total and Direct (21150)

Effective Date 12/1/2012

CPT(s): 82247, 82248

Expiration Date:

Billing No: 21150

Interface Code: BILI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BILIT	BILIRUBIN, TOT.	RES	N	mg/dL	1975-2
BILID	BILIRUBIN, DIR.	RES	N	mg/dL	1968-7
BILII	BILIRUBIN, INDIR	RES	N	mg/dL	1971-1

Bilirubin Direct (21000)

Effective Date 12/1/2012

CPT(s): 82248

Expiration Date:

Billing No: 21000

Interface Code: BILID

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BILID	BILIRUBIN DIRECT	RES	N	mg/dL	1968-7

Bilirubin Neonatal Total and Direct (21050)

Effective Date 12/1/2012

CPT(s): 82247, 82248

Expiration Date:

Billing No: 21050

Interface Code: BILIN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BILIT	BILIRUBIN, TOT.	RES	N	mg/dL	1975-2
BILID	BILIRUBIN, DIR.	RES	N	mg/dL	1968-7
BILII	BILIRUBIN, INDIR	RES	N	mg/dL	1971-1

Bilirubin Total (21100)

Effective Date 12/1/2012

CPT(s): 82247

Expiration Date:

Billing No: 21100

Interface Code: BILIT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BILIT	BILIRUBIN TOTAL	RES	N	mg/dL	1975-2

Culture, Blood (52250)

Effective Date 9/25/2014

CPT(s): 87040

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52250

Interface Code: BLC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
PVGSB	POS VIAL GRAM STAIN	PRFLX	N		664-3
CULT	CULTURE	RES	N		600-7
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	BLD	BLOOD
TEXT		

Culture, Fungus Blood (53250)

Effective Date 12/1/2012

CPT(s): 87103

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53250

Interface Code: BLF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CULT	CULTURE	RES	N		580-1
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	BLD	BLOOD
TEXT		

Basic Metabolic Panel (BMP) (Inc. GFR) (20900)

Effective Date 12/1/2012

CPT(s): 80048

Expiration Date:

Billing No: 20900

Interface Code: BMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NA	SODIUM	RES	N	mEq/L	2951-2
K	POTASSIUM	RES	N	mEq/L	2823-3
CL	CHLORIDE	RES	N	mEq/L	2075-0
CO2V	T. CO2 (BICARB)	RES	N	mM/L	2028-9
GLUC	GLUCOSE	RES	N	mg/dL	2345-7
BUN	BUN	RES	N	mg/dL	3094-0
CR	CREATININE	RES	N	mg/dL	2160-0
BC	BUN/CR	RES	N	Ratio	3097-3
CA	CALCIUM	RES	N	mg/dL	17861-6
EGFR	GFR, EST. Non African-Amer.	RES	N	mL/min/1.73m2	48642-3
BGFR	GFR, EST. African-American	RES	N	mL/min/1.73m2	48643-1

Culture, Group B Streptococcus (53900)

Effective Date 12/1/2012

CPT(s): 87081

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53900

Interface Code: BSTREP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z01	PENICILLIN/CEPH ALLERGY? THEN TEST ERY/CLINDA	AOE	Y			TEXT		
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	VAG`CER`VARE`PERIN	VAGINAL`CERVICAL`VAGINAL-RECTAL`PERINEUM
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		547-0			
RPT	REPORT STATUS	RES	N					

BUN (Blood Urea Nitrogen) (21250)

Effective Date 12/1/2012

CPT(s): 84520

Expiration Date:

Billing No: 21250

Interface Code: BUN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BUN	BUN (BLOOD UREA NITROGEN)	RES	N	mg/dL	3094-0

Complement C 3 (C3) (22200)

Effective Date 4/29/2015

CPT(s): 86160

Expiration Date:

Billing No: 22200

Interface Code: C3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
C3	COMPLEMENT C'3 (C3)	RES	N	mg/dL	4485-9

Complement C 4 (C4) (22300)

Effective Date 4/29/2015

CPT(s): 86160

Expiration Date:

Billing No: 22300

Interface Code: C4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
C4	COMPLEMENT C'4 (C4)	RES	N	mg/dL	4498-2

Calcium (21450)

Effective Date 12/1/2012

CPT(s): 82310

Expiration Date:

Billing No: 21450

Interface Code: CA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CA	CALCIUM	RES	N	mg/dL	17861-6

CA125 (21400)

Effective Date 12/1/2012

CPT(s): 86304

Expiration Date:

Billing No: 21400

Interface Code: CA125

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CA125	CA 125	RES	N	U/mL	10334-1

CA 19-9 (Carbohydrate Ag) (21300)

Effective Date 12/1/2012

CPT(s): 86301

Expiration Date:

Billing No: 21300

Interface Code: CA19

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CA19	CA 19-9 (Carbohydrate Ag)	RES	N	U/mL	24108-3

CA 27.29 (21350)

Effective Date 12/1/2012

CPT(s): 86300

Expiration Date:

Billing No: 21350

Interface Code: CA2729

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CA2729	CA 27.29	RES	N	U/mL	17842-6

Culture, Campylobacter Stool (52350)

Effective Date 12/1/2012

CPT(s): 87046

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 52350

Interface Code: CAMPY

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CULT	CULTURE	RES	N		625-4
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	STOOL	STOOL
TEXT		

Albumin, CSF (20190)

Effective Date 12/1/2012

CPT(s): 82042

Expiration Date:

Billing No: 20190

Interface Code: CAQT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CAQT	ALBUMIN, CSF	RES	N	mg/dL	1746-7

C-Reactive Protein, Cardio (CRP) High Sensitivity (C-CRP) (22660)

Effective Date 12/1/2012

CPT(s): 86141

Expiration Date:

Billing No: 22660

Interface Code: CCRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CCRP	C-REACTIVE PROTEIN, CARDIO (C-CRP)	RES	N	mg/L	30522-7

CSF Cell Count (40350)

Effective Date 12/1/2012

CPT(s): 89050

Expiration Date:

Billing No: 40350

Interface Code: CCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTBN	TUBE NUMBER, CSF	RES	N		19157-7
CVOL	VOLUME, CSF	RES	N	mL	17607-3
CAPP	APPEARANCE, CSF	RES	N		10333-3
CCOL	COLOR, CSF	RES	N		10335-8
CRBC	RBC, CSF	RES	N	/cmm	792-2
CNC	NUCLEATED CELLS, CSF	RES	N	/cmm	26465-5
CCOM	COMMENT, CSF	PRFLX	N		8251-1

CSF Cell Ct w/ Cell ID (40400)

Effective Date 12/1/2012

CPT(s): 89051

Expiration Date:

Billing No: 40400

Interface Code: CCTID May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTBN	TUBE NUMBER, CSF	RES	N		19157-7
CVOL	VOLUME, CSF	RES	N	mL	17607-3
CAPP	APPEARANCE, CSF	RES	N		10333-3
CCOL	COLOR, CSF	RES	N		10335-8
CRBC	RBC, CSF	RES	N	/cmm	792-2
CNC	NUCLEATED CELLS, CSF	RES	N	/cmm	26465-5
CNEUT	NEUTROPHILS, CSF	RES	N	%	13516-0
CLYM	LYMPHS, CSF	RES	N	%	10328-3
CMM	MONO/MACRO, CSF	RES	N	%	10329-1
CBLAST	BLASTS, CSF	PRFLX	N	%	26447-3
CBASO	BASOPHILS, CSF	PRFLX	N	%	55771-0
CEOS	EOSINOPHILS, CSF	PRFLX	N	%	26451-5
CCNS	CNS LINING CELLS, CSF	PRFLX	N	%	50342-5
COTH	OTHER CELLS, CSF	PRFLX	N	%	50407-6
CCOM	COMMENT, CSF	PRFLX	N		8251-1
SUPNT	SUPERNATANT, CSF	PRFLX	N		NA

CEA (21750)

Effective Date 12/1/2012

CPT(s): 82378

Expiration Date:

Billing No: 21750

Interface Code: CEA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CEA	CEA	RES	N	ng/mL	2039-6

Ceruloplasmin (21800)

Effective Date 12/1/2012

CPT(s): 82390

Expiration Date:

Billing No: 21800

Interface Code: CERPL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CERPL	CERULOPLASMIN	RES	N	mg/dL	2064-4

Glucose Quant. CSF (23950)

Effective Date 12/1/2012

CPT(s): 82945

Expiration Date:

Billing No: 23950

Interface Code: CGLU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CGLU	GLUCOSE QUANT. CSF	RES	N	mg/dL	2342-4

Chromosome Analysis, High Resolution (96485)

Effective Date 12/1/2012

CPT(s): 88230 x 2, 88261, 88289 x 2, 88280 x 2, 88291

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 96485

Interface Code: CHHR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHHRT	HIGH RESOLUTION CHROM	RES	N		

Cholesterol (22050)

Effective Date 12/1/2012

CPT(s): 82465

Expiration Date:

Billing No: 22050

Interface Code: CHOL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHOL	CHOLESTEROL	RES	N	mg/dL	2093-3

Chromosome Analysis, Products of Conception (96470)

Effective Date 12/1/2012

CPT(s): 88235, 88267, 88305, 88280 x 2, 88291

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 96470

Interface Code: CHPC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHPCT	PRODUCTS OF CONCEPTION	RES	N		

Chromosome Analysis, Blood (96490)

Effective Date 12/1/2012

CPT(s):

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 96490

Interface Code: CHS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHST	BLOOD CHROMOSOME	RES	N		

Immunoglobulin IgG, CSF (25100)

Effective Date 12/1/2012

CPT(s): 82784

Expiration Date:

Billing No: 25100

Interface Code: CIGG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CIGG	IMMUNOGLOBULIN IgG, CSF	RES	N	mg/dL	2464-6

IgG Index, CSF (24970)

Effective Date 12/1/2012

CPT(s): 82784 x 2, 82040, 82042

Expiration Date:

Billing No: 24970

Interface Code: CIGGI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGG	IgG	RES	N	mg/dL	2465-3
CIGG	IgG, CSF	RES	N	mg/dL	2464-6
ALB	ALBUMIN	RES	N	gm/dL	61152-5
CAQT	ALBUMIN, CSF	RES	N	mg/dL	1746-7
IGGI	IgG INDEX, CSF	RES	N		14117-6
CIGGS	SYNTHESIS RATE IgG, CSF	RES	N	mg/day	14116-8

Creatine Kinase (CK) MB w/Index + Total CK (22126)

Effective Date 12/1/2012

CPT(s): 82550, 82553

Expiration Date:

Billing No: 22126

Interface Code: CKIE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CPK	CK	RES	N	U/L	2157-6
CKMBC	CK-MB	RES	N	ng/mL	13969-1
CKMBP	CK-MB INDEX	RES	N		72564-8

CKMB Fraction (22125)

Effective Date 12/1/2012

CPT(s): 82553

Expiration Date:

Billing No: 22125

Interface Code: CKMBC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CKMBC	CKMB FRACTION	RES	N	ng/mL	13969-1

Chloride (21850)

Effective Date 12/1/2012

CPT(s): 82435

Expiration Date:

Billing No: 21850

Interface Code: CL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CL	CHLORIDE	RES	N	mEq/L	2075-0

Lactate, CSF (Lactic Acid) (25300)

Effective Date 12/1/2012

CPT(s): 83605

Expiration Date:

Billing No: 25300

Interface Code: CLA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CLA	LACTATE, CSF (Lactic Acid)	RES	N	mEq/L	2520-5

Lactic Dehyrogenase (LD), CSF (25510)

Effective Date 12/1/2012

CPT(s): 83615

Expiration Date:

Billing No: 25510

Interface Code: CLDH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CLDH	LACTIC DEHYDROGINASE (LD), CSF	RES	N	U/L	60024-7

Carbon Monoxide Quant. Blood (21701)

Effective Date 7/24/2014

CPT(s): 82375

Expiration Date:

Billing No: 21701

Interface Code: CMON

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMON	CARBON MONOXIDE QUANT BL	RES	N	%	20563-3

Comprehensive Metabolic Panel (CMP) (Inc. GFR) (22450)

Effective Date 12/1/2012

CPT(s): 80053

Expiration Date:

Billing No: 22450

Interface Code: CMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NA	SODIUM	RES	N	mEq/L	2951-2
K	POTASSIUM	RES	N	mEq/L	2823-3
CL	CHLORIDE	RES	N	mEq/L	2075-0
CO2V	T. CO2 (BICARB)	RES	N	mM/L	2028-9
GLUC	GLUCOSE	RES	N	mg/dL	2345-7
BUN	BUN	RES	N	mg/dL	3094-0
CR	CREATININE	RES	N	mg/dL	2160-0
BC	BUN/CR	RES	N	Ratio	3097-3
CA	CALCIUM	RES	N	mg/dL	17861-6
TP	TOTAL PROTEIN	RES	N	gm/dL	2885-2
ALB	ALBUMIN	RES	N	gm/dL	61152-5
GLOB	GLOBULIN	RES	N	gm/dL	10834-0
AG	A:G RATIO	RES	N	Ratio	1759-0
BILIT	BILIRUBIN, TOT.	RES	N	mg/dL	1975-2
ALKP	ALK PHOSPHATASE	RES	N	U/L	6768-6
AST	AST (SGOT)	RES	N	U/L	30239-8
ALT	ALT (SGPT)	RES	N	U/L	1742-6
EGFR	GFR, EST. Non African-Amer.	RES	N	mL/min/1.73m2	48642-3
BGFR	GFR, EST. African-American	RES	N	mL/min/1.73m2	48643-1

CO2 Total (Carbon Dioxide) (21650)

Effective Date 12/1/2012

CPT(s): 82374

Expiration Date:

Billing No: 21650

Interface Code: CO2V

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CO2V	CO2 TOTAL (Carbon Dioxide)	RES	N	mM/L	2028-9

Cocaine Screen (22150)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 22150

Interface Code: COCAIN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COCAIN	COCAINE SCREEN	RES	N		43985-1

Confirmation of Client Differential by Technologist (40510)

Effective Date 5/7/2013

CPT(s): 85007

Expiration Date:

Billing No: 40510

Interface Code: CONDIF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CONDIF	CONFIRMATION OF CLIENT DIFFERENTIAL	RES	N		59466-3

Cortisol (22500)

Effective Date 4/11/2013

CPT(s): 82533

Expiration Date:

Billing No: 22500

Interface Code: CORT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CORT	CORTISOL	RES	N	ug/dL	2143-6

Cortisol AM (22550)

Effective Date 5/4/2015

CPT(s): 82533

Expiration Date:

Billing No: 22550

Interface Code: CORTAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CORTAM	CORTISOL AM	RES	N	ug/dL	9813-7

Cortisol PM (22600)

Effective Date 5/4/2015

CPT(s): 82533

Expiration Date:

Billing No: 22600

Interface Code: CORTPM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CORTPM	CORTISOL PM	RES	N	ug/dL	9812-9

C-Peptide (22655)

Effective Date 8/12/2015

CPT(s): 84681

Expiration Date:

Billing No: 22655

Interface Code: CPEP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CPEP	C-PEPTIDE	RES	N	ng/mL	1986-9

CK (Creatine Kinase) (CPK) (22100)

Effective Date 12/1/2012

CPT(s): 82550

Expiration Date:

Billing No: 22100

Interface Code: CPK

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CPK	CK (CREATINE KINASE)(CPK)	RES	N	U/L	2157-6

Chest Pain Panel w/ CK (CPK, CKMB, Myoglobin, Troponin I) (22111)

Effective Date 12/1/2012

CPT(s): 82550, 82553, 83874, 84484

Expiration Date:

Billing No: 22111

Interface Code: CPNCK Includes CPK, CKMB, Myoglobin, Troponin I

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CPK	CK	RES	N	U/L	2157-6
CKMBC	CK-MB	RES	N	ng/mL	13969-1
CKMBP	CK-MB INDEX	RES	N		72564-8
MYOS	MYOGLOBIN	RES	N	ng/mL	2639-3
TROP	TROPONIN I	RES	N	ng/mL	10839-9

Protein Total, CSF (27750)

Effective Date 12/1/2012

CPT(s): 84157

Expiration Date:

Billing No: 27750

Interface Code: CPROT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CPROT	PROTEIN TOTAL, CSF	RES	N	mg/dL	2880-3

Circulating Anticoagulant Screen (Mixing Studies) (40240)

Effective Date 12/1/2012

CPT(s): 85610, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 40240

Interface Code: CPTPTT May Reflex PTMIX, PTTMX, PTTMXI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PT	PROTHROMBIN TIME IN SECONDS	RES	N	seconds	5902-2
BPTT	PTT	RES	N	seconds	14979-9
CINTER	INTERPRETATION	RES	N		14869-2

Creatinine (22700)

Effective Date 12/1/2012

CPT(s): 82565

Expiration Date:

Billing No: 22700

Interface Code: CR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CR	CREATININE	RES	N	mg/dL	2160-0

Creatinine with GFR (Glomerular Filtration Rate) (22701)

Effective Date 12/1/2012

CPT(s): 82565

Expiration Date:

Billing No: 22701

Interface Code: CRGFR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CR	CREATININE	RES	N	mg/dL	2160-0
EGFR	GFR, EST. Non African-Amer.	RES	N	mL/min/1.73m2	48642-3
BGFR	GFR, EST. African-American	RES	N	mL/min/1.73m2	48643-1

CRP (C-Reactive Protein) (22650)

Effective Date 12/1/2012

CPT(s): 86140

Expiration Date:

Billing No: 22650

Interface Code: CRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CRP	CRP (C-REACTIVE PROTEIN)	RES	N	mg/dL	1988-5

Cryptococcus Antigen (52600)

Effective Date 12/1/2012

CPT(s): 86403

Expiration Date:

Billing No: 52600

Interface Code: CRYPTO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CRPT	CRYPTO, LATEX	RES	N		43228-6
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	CSF`SER	CEREBROSPINAL FLUID`SERUM
TEXT		

Meningitis/Encephalitis Panel PCR, CSF (54555)

Effective Date 4/1/2016

CPT(s): 87798x14

Expiration Date:

Billing No: 54555

Interface Code: CSFBF

PCR Panel Includes: Escherichia coli K1, Haemophilus influenza, Listeria monocytogenes, Neisseria meningitides, Streptococcus Group
B, Streptococcus pneumoniae, Cytomegalovirus (CMV), Enterovirus,
Herpes simplex virus 1 (HSV-1), Herpes simplex virus 2 (HSV-2), Human

herpesvirus 6 (HHV-6), Human parechovirus, Varicella zoster virus (VZV), Cryptococcus neoformans/gattii.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ECOLK1	ESCHERICHIA COLI K1	RES	N		61398-4
HAINFL	HAEMOPHILUS INFLUENZAE	RES	N		61366-1
LISMON	LISTERIA MONOCYTOGENES	RES	N		61369-5
NEIMEN	NEISSERIA MENINGITIDIS	RES	N		49671-1
STRGRB	STREPTOCOCCUS GROUP B	RES	N		48683-7
STRPNE	STREPTOCOCCUS PNEUMONIAE	RES	N		49672-9
CYTCMV	CYTOMEGALOVIRUS (CMV)	RES	N		30326-3
ENTERO	ENTEROVIRUS	RES	N		29558-4
HSIMV1	HERPES SIMPLEX VIRUS 1 (HSV-1)	RES	N		16952-4
HSIMV2	HERPES SIMPLEX VIRUS 2 (HSV-2)	RES	N		16960-7
HHVIR6	HUMAN HERPESVIRUS 6 (HHV-6)	RES	N		33942-4
HUMPAR	HUMAN PARECHOVIRUS	RES	N		51669-0
VZOSV	VARICELLA ZOSTER VIRUS (VZV)	RES	N		21598-8
CRYNEO	CRYPTOCOCCUS NEOFORMANS/GATTII	RES	N		49098-7
BIOFCC	ASSAY COMMENT	RES	N		N/A

Culture, CSF (52700)

Effective Date 12/1/2012

CPT(s): 87070, 87205

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52700

Interface Code: CSFC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
GS	GRAM STAIN	RES	N		664-3
CULT	CULTURE	RES	N		606-4
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	CSF	CEREBROSPINAL FLUID
TEXT		

Magnesium, CSF (25800)

Effective Date 12/1/2012

CPT(s): 83735

Expiration Date:

Billing No: 25800

Interface Code: CSFMG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CSFMG	MAGNESIUM, CSF	RES	N	mg/dL	29364-7

IgG/Albumin Ratio, CSF (24950)

Effective Date 12/1/2012

CPT(s): 82784, 82042

Expiration Date:

Billing No: 24950

Interface Code: CSFRAT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CIGG	IgG, CSF	RES	N	mg/dL	2464-6
CAQT	ALBUMIN, CSF	RES	N	mg/dL	1746-7
GARAT	IgG/ALBUMIN RATIO	RES	N		2470-3

Culture, Catheter Tip (52400)

Effective Date 12/1/2012

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52400

Interface Code: CTC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	CTIP`PTF`PTLF`SWGZ	CATHETER TIP`PERITONEAL FLUID`PERITONEAL LAVAGE`SWAN GANTZ CATHETER
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		19128-8			
RPT	REPORT STATUS	RES	N					

Culture, Screening (55250)

Effective Date 12/1/2012

CPT(s): 87081

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55250

Interface Code: CULTU

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N	SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BLD`BLU`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TAPE`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BLOOD`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG TISSUE`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOUL

						DER`SHUNT FLUID`SINUS`SKIN BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID`CELLULOSE TAPE (PINWORMS)`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETER`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
CULT	CULTURE	RES	N	32367-5		
RPT	REPORT STATUS	RES	N			

Cyclospora and Isospora Examination (55910)

Effective Date 12/1/2012

CPT(s): 87207, 87015

Expiration Date:

Billing No: 55910

Interface Code: CYIS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CYIS	CYCLOSPORA and ISOSPORA EXAM	RES	N		10659-1

Direct Antiglobulin Test (DAT) (Direct Coombs) (10160)

Effective Date 10/15/2012

CPT(s): 86880

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 10160

Interface Code: DAT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%DIG	DAT, ANTI-IgG	RES	N		1007-4
DC3	DAT, ANTI-C3b, -C3d	RES	N		55774-4
PCD	PATH. DAT COMMENTS	RES	N		14869-2

Direct Exam (52800)

Effective Date 12/1/2012

CPT(s): 87210

Expiration Date:

Billing No: 52800

Interface Code: DEX

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	PUMP`STOOL`TAPE`TI`URI	PUMP SPECIMEN`STOOL`CELLULOSE TAPE (PINWORMS)`TISSUE`URINE
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
EXAM	DIRECT EXAM	RES	N					
RPT	REPORT STATUS	RES	N					

Digoxin (23000)

Effective Date 12/1/2012

CPT(s): 80162

Expiration Date:

Billing No: 23000

Interface Code: DIG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTDIG	DATE OF LAST DOSE	AOE	N			DATE		
TMDIG	TIME OF LAST DOSE	AOE	N			TEXT		
DSDIG	DOSAGE	AOE	N			TEXT		
DIGOX	DIGOXIN	RES	N	mcg/L	10535-3			
DTDIG	DATE OF LAST DOSE	RES	N		29742-4			
TMDIG	TIME OF LAST DOSE	RES	N		29637-6			
DSDIG	DOSAGE	RES	N		18817-7			

Drug Screen Urine (DAU) (22900)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 22900

Interface Code: DSE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SPREC	SPECIMEN RECEIVED:	RES	N		31208-2
MARSC	MARIJUANA SCREEN	RES	N		14312-3
COCAIN	COCAINE METABOL. SCR	RES	N		43985-1
AMPHET	AMPHET/METHAMPHET SCR	RES	N		43983-6
BARB	BARBITURATE SCR	RES	N		19275-7
OPIATE	OPIATE SCREEN	RES	N		19299-7
PCP	PCP SCREEN	RES	N		14310-7
BENZO	BENZODIAZEPINE SCR	RES	N		19283-1
ALDSC	COMMENT:	RES	N		
CUTOFF	CUTOFF CONC:	RES	N		

Drug Screen w/ Alcohol Urine (DAU) (23100)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 23100

Interface Code: DSPLUS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SPREC	SPECIMEN RECEIVED:	RES	N		31208-2
MARSC	MARIJUANA SCREEN	RES	N		14312-3
COCAIN	COCAINE METABOL. SCR	RES	N		43985-1
AMPHET	AMPHET/METHAMPHET SCR	RES	N		43983-6
BARB	BARBITURATE SCR	RES	N		19275-7
OPIATE	OPIATE SCREEN	RES	N		19299-7
PCP	PCP SCREEN	RES	N		14310-7
BENZO	BENZODIAZEPINE SCR	RES	N		19283-1
UALC	ALCOHOL, URINE	RES	N		42242-8
ALDSC	COMMENT:	RES	N		
CUTOFF	CUTOFF CONC:	RES	N		

Culture, Ear (52900)

Effective Date 12/1/2012

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52900

Interface Code: EARC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	EAR	EAR
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		608-0			
RPT	REPORT STATUS	RES	N					

E. Coli Shiga Toxin w/ Reflex Culture (52850)

Effective Date 12/1/2012

CPT(s): 87427

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52850

Interface Code: ECEIA

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	STOOL	STOOL
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
ECOEIA	E COLI SHIG TOXINS	RES	N		21261-1			
CULT	CULTURE	PRFLX	N		21262-1			
RPT	REPORT STATUS	RES	N					

Culture, Environmental (53000)

Effective Date 12/1/2012

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53000

Interface Code: ENVC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			TEXT		
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		14325-5			
RPT	REPORT STATUS	RES	N					

ESBL Confirmation (53050)

Effective Date 12/1/2012

CPT(s): 87184

Expiration Date:

Billing No: 53050

Interface Code: ESBLC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BILE`BIOP`BLAD`BLD`BLU`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORD`CORN`CORS`CSF`CSTF`CTIP`DIAF`DRNG`DUOF`EAR`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEMOW`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPWASH`NSG`OVARY`PANF`PARF`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SKN`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBC`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`TI`TOE`TOEN`TON`TONGUE`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VUL`WND`WNDR`WRIST	AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BILE`BIOPSY`BLADDER`BLOOD`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORD BLOOD`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DIALYSIS FLUID`DRAINAGE`DUODENAL FLUID`EAR`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEMODIALYSIS WATER`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG TISSUE`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL WASHINGS`NASOGASTRIC`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SKIN BIOPSY`SKIN`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBCLAVIAN`SUBDURAL FLUID`SUBMENTAL

						AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`TISSUE`TOE`TOENAIL`TONSIL`TONGUE`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETER`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
ESBLR	ESBL RESULTS	RES	N	6984-9		
RPT	REPORT STATUS	RES	N			

Sedimentation Rate (ESR) (Sed Rate) (40650)

Effective Date 12/1/2012

CPT(s): 85652

Expiration Date:

Billing No: 40650

Interface Code: ESR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ESR	SEDIMENTATION RATE (ESR)(Sed Rate)	RES	N	mm/hr	4537-7

Estradiol, Non-Pediatric (23300)

Effective Date 12/1/2012

CPT(s): 82670

Expiration Date:

Billing No: 23300

Interface Code: ESTD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ESTD	ESTRADIOL, NON-PEDIATRIC	RES	N	pg/mL	2243-4

Culture, Conjunctival (52550)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 87070
Additional CPTs will be billed when appropriate.

Billing No: 52550

Interface Code: EYEC Culture does NOT include Gram Stain

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
GS	GRAM STAIN	PRFLX	N		664-3
CULT	CULTURE	RES	N		609-8
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	CONJ	CONJUNCTIVAL
TEXT		

Factor X Functional (40770)

Effective Date 10/29/2014
Expiration Date:

CPT(s): 85260

Billing No: 40770

Interface Code: FAC10

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAC10	FACTOR X FUNCTIONAL	RES	N	% of Normal	3218-5

Factor VIII Functional (40850)

Effective Date 10/29/2014
Expiration Date:

CPT(s): 85240

Billing No: 40850

Interface Code: FAC8

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAC8	FACTOR VIII FUNCTIONAL	RES	N	% of Normal	3209-4

Factor IX Functional (40750)

Effective Date 10/29/2014
Expiration Date:

CPT(s): 85250

Billing No: 40750

Interface Code: FAC9

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAC9	FACTOR IX FUNCTIONAL	RES	N	% of Normal	3187-2

Albumin, Fluid(20200)

Effective Date 12/1/2012

CPT(s): 82042

Expiration Date:

Billing No: 20200

Interface Code: FALB May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z31	FLUID TYPE	AOE	Y			TEXT		
FALB	ALBUMIN, FLUID	RES	N	gm/dL	1747-5			

Amylase, Fluid (20650)

Effective Date 12/1/2012

CPT(s): 82150

Expiration Date:

Billing No: 20650

Interface Code: FAMY May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z32	FLUID TYPE	AOE	Y			TEXT		
FAMY	AMYLASE, FLUID	RES	N	U/L	1795-4			

Culture, Fluid Bactec Tube (53150)

Effective Date 12/1/2012

CPT(s): 87070, 87075, 87205

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 53150

Interface Code: FBAC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	DIAF	DIALYSIS FLUID
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		611-4			
RPT	REPORT STATUS	RES	N					

Bilirubin, Fluid (21090)

Effective Date 12/1/2012

CPT(s): 82247

Expiration Date:

Billing No: 21090

Interface Code: FBILI May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z33	FLUID TYPE	AOE	Y			TEXT		
FBILI	BILIRUBIN, FLUID	RES	N	mg/dL	1974-5			

Urea Nitrogen, Fluid (29150)

Effective Date 12/1/2012

CPT(s): 84520

Expiration Date:

Billing No: 29150

Interface Code: FBUN May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z21	FLUID TYPE	AOE	Y			TEXT		
FBUN	UREA NITROGEN, FLUID	RES	N	mg/dL	3093-2			

Cholesterol, Fluid (22055)

Effective Date 12/1/2012

CPT(s): 84311

Expiration Date:

Billing No: 22055

Interface Code: FCHOL May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z04	FLUID TYPE	AOE	Y			TEXT		
FCHOL	CHOLESTEROL, FLUID	RES	N	mg/dL	12183-0			

Chloride, Fluid (21900)

Effective Date 12/1/2012

CPT(s): 82438

Expiration Date:

Billing No: 21900

Interface Code: FCL May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z34	FLUID TYPE	AOE	Y			TEXT		
FCL	CHLORIDE FLUID	RES	N	mEq/L	2072-7			

Creatinine, Fluid (22790)

Effective Date 12/1/2012

CPT(s): 82565

Expiration Date:

Billing No: 22790

Interface Code: FCR May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z06	FLUID TYPE	AOE	Y			TEXT		
FCR	CREATININE, FLUID	RES	N	mg/dL	12190-5			

Fluid Cell Count (40990)

Effective Date 4/24/2015

CPT(s): 89050

Expiration Date:

Billing No: 40990

Interface Code: FCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
FLTYPE	TYPE, FL	AOE	N			TEXT		
FSIT	SITE, FL	AOE	N			TEXT		
FVOL	VOLUME, FL	AOE	N			TEXT		
FLTYPE	TYPE, FL	RES	N					
FSIT	SITE, FL	RES	N		19803-6			
FVOL	VOLUME in mL, FL	RES	N	mL	12254-9			
FAPP	APPEARANCE, FL	RES	N		9335-1			
FCOL	COLOR, FL	RES	N		6824-7			
FRBC	RBC, FL	RES	N	/cmm	23860-0			
FNC	NUCLEATED CELLS, FL	RES	N	/cmm	71690-2			
BFNRD	REFERENCE RANGE	RES	N		19147-8			

Fluid Cytology, Effusion

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 88112F

Interface Code: FCYT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
PMSFL	TISSUE/FLUID TYPE DESCRIPTION	AOE	N			TEXT		
PMSSP	SURGICAL PROCEDURE	AOE	N			TEXT		
PMSCD	Clinical Diagnosis and History	AOE	N			TEXT		
FCYT	FLUID CYTOLOGY, EFFUSION	RES	N		33716-2			

Ferritin (23350)

Effective Date 12/1/2012

CPT(s): 82728

Expiration Date:

Billing No: 23350

Interface Code: FER

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FER	FERRITIN	RES	N	ng/mL	2276-4

Fetal Fibronectin (FFN) (23400)

Effective Date 12/1/2012

CPT(s): 82731

Expiration Date:

Billing No: 23400

Interface Code: FFN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FFN	FETAL FIBRONECTIN (FFN)	RES	N		20404-0

Glucose, Fluid (24000)

Effective Date 12/1/2012

CPT(s): 82945

Expiration Date:

Billing No: 24000

Interface Code: FGLU May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z07	FLUID TYPE	AOE	Y			TEXT		
FGLU	GLUCOSE, FLUID	RES	N	mg/dL	2344-0			

Fibrinogen Level, Quant., Clotting (40950)

Effective Date 10/29/2014

CPT(s): 85384

Expiration Date:

Billing No: 40950

Interface Code: FIB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FIB	FIBRINOGEN LEVEL, QUANT	RES	N	mg/dL	3255-7

Potassium, Fluid (27250)

Effective Date 12/1/2012

CPT(s): 84999

Expiration Date:

Billing No: 27250

Interface Code: FK May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z35	FLUID TYPE	AOE	Y			TEXT		
FK	POTASSIUM, FLUID	RES	N	mEq/L	2821-7			

Lactate, Fluid (25310)

Effective Date 12/1/2012

CPT(s): 83605

Expiration Date:

Billing No: 25310

Interface Code: FLAC May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z30	FLUID TYPE	AOE	Y			TEXT		
FLAC	LACTATE, FLUID	RES	N	mEq/L	14165-5			

Culture, Fluid (53100)

Effective Date 12/24/2014

CPT(s): 87070, 87075, 87205

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53100

Interface Code: FLDC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	ABDF`ASCT`BILE`BCF`CSF`CSTF`DUOF`HYDF`IVF`LSAC`PANF`PARF`PERI`PTF`PTLF`PLEF`RCF`SHUN`SUBD`SUPA`SYN`THF`VCSF	ABDOMINAL FLUID`ASCITIC FLUID`BILE`BRAIN CYST FLUID`CEREBROSPINAL FLUID`CYST FLUID`DUODENAL FLUID`HYDROCELE FLUID`IV FLUID`LUMBAR SAC FLUID`PANCREATIC FLUID`PARACENTESIS FLUID`PERICARDIAL FLUID`PERITONEAL FLUID`PERITONEAL LAVAGE`PLEURAL FLUID`RENAL CYST FLUID`SHUNT FLUID`SUBDURAL FLUID`SUPRAPUBIC ASPIRATE`SYNOVIAL FLUID`THORACENTESIS FLUID`VENTRICULAR CSF
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
PVGS	POS VIAL GRAM STAIN	PRFLX	N		664-3			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		611-4			
RPT	REPORT STATUS	RES	N					

Lactic Dehyrogenase (LD), Fluid (25520)

Effective Date 12/1/2012

CPT(s): 83615

Expiration Date:

Billing No: 25520

Interface Code: FLDH May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z08	FLUID TYPE	AOE	Y			TEXT		
FLDH	LACTIC DEHYDROGENASE (LD), FLUID	RES	N	U/L	14803-1			

Hematocrit, Fluid (41051)

Effective Date 12/1/2012

CPT(s): 85014

Expiration Date:

Billing No: 41051

Interface Code: FLHCT May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
HFSITE	HCT, FLUID SITE	AOE	N			TEXT		
HFSITE	HCT, FLUID SITE	RES	N		39111-0			
FHCT	HEMATOCRIT, FLUID	RES	N	%	11153-4			

Lipase, Fluid (25651)

Effective Date 12/1/2012

CPT(s): 83690

Expiration Date:

Billing No: 25651

Interface Code: FLIP May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z28	FLUID TYPE	AOE	Y			TEXT		
FLIP	LIPASE, FLUID	RES	N	U/L	15212-4			

Sodium, Fluid (28400)

Effective Date 12/1/2012

CPT(s): 84999

Expiration Date:

Billing No: 28400

Interface Code: FNA May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z09	FLUID TYPE	AOE	Y			TEXT		
FNA	SODIUM, FLUID	RES	N	mEq/L	2950-4			

Folic Acid (Folate) Serum (23450)

Effective Date 12/1/2012

CPT(s): 82746

Expiration Date:

Billing No: 23450

Interface Code: FOL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FOL	FOLIC ACID (Folate) S	RES	N	ng/mL	2284-8

pH Fluid (26860)

Effective Date 12/1/2012

CPT(s): 83986

Expiration Date:

Billing No: 26860

Interface Code: FPH May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z11	FLUID TYPE	AOE	Y			TEXT		
FPH	pH FLUID	RES	N	Units	2748-2			

Protein, Total, Fluid (27800)

Effective Date 12/1/2012

CPT(s): 84157

Expiration Date:

Billing No: 27800

Interface Code: FPROT May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z12	FLUID TYPE	AOE	Y			TEXT		
FPROT	PROTEIN, TOTAL, FLUID	RES	N	gm/dL	2881-1			

FSH - Follicle Stimulating Hormone (23500)

Effective Date 5/29/2015

CPT(s): 83001

Expiration Date:

Billing No: 23500

Interface Code: FSH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FSH	FSH (Follicle Stimulating Hormone)	RES	N	mIU/mL	15067-2

Specific Gravity, Fluid (28485)

Effective Date 12/1/2012

CPT(s): 84315

Expiration Date:

Billing No: 28485

Interface Code: FSPG May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z22	FLUID TYPE	AOE	Y			TEXT		
FSPG	SPECIFIC GRAVITY, FLUID	RES	N		35414-2			

T3 Free (Triiodothyronine) (28500)

Effective Date 12/1/2012

CPT(s): 84481

Expiration Date:

Billing No: 28500

Interface Code: FT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FT3	T3 FREE (Triiodothyronine)	RES	N	pg/dL	3051-0

T4 (Thyroxine) Free (28650)

Effective Date 12/1/2012

CPT(s): 84439

Expiration Date:

Billing No: 28650

Interface Code: FT4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FT4	T4 FREE (Thyroxine)	RES	N	ng/dL	3024-7

Triglycerides, Fluid (29055)

Effective Date 12/1/2012

CPT(s): 84478

Expiration Date:

Billing No: 29055

Interface Code: FTRIG May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z13	FLUID TYPE	AOE	Y			TEXT		
FTRIG	TRIGLYCERIDES, FLUID	RES	N	mg/dL	12228-3			

Fetal Screen (Fetal Maternal Bleed) (10180)

Effective Date 12/1/2012

CPT(s): 85461

Expiration Date:

Billing No: 10180

Interface Code: FTSC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FSC	FETAL SCREEN - RhIG	RES	N		1034-8

Uric Acid, Fluid (29300)

Effective Date 12/1/2012

CPT(s): 84560

Expiration Date:

Billing No: 29300

Interface Code: FUAC May Reflex ABFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z14	FLUID TYPE	AOE	Y			TEXT		
FUAC	URIC ACID, FLUID	RES	N	mg/dL	53612-8			

Fungus Identification (53400)

Effective Date 12/1/2012

CPT(s): 87107

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53400

Interface Code: FUID

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TONGUE`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BONE MARROW`BOIL`BONE `BRAIN `BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUCTIVAL`CONTACT LENS`CORNEA`CORNEA SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE `FINGER`FINGERNAIL`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR `LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL SWAB`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL `UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOUL

						DER`SHUNT FLUID`SINUS`SKIN BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SHAW GANTZ CATHETER`SYNOVIAL FLUID CULTURE`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TONGUE`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETH`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
CULT	CULTURE	RES	N	10352-3		
RPT	REPORT STATUS	RES	N			

Culture, Fungus with Direct Exam/KOH (53200)

Effective Date 12/1/2012

CPT(s): 87102, 87207

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53200

Interface Code: FUNG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N	SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BLD`BLU`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OCULAR`OTHER`OVARY`PANF`PARF`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBC`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOSPY`BLADDER`BLOOD`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS` BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVIAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID `LUMBAR`LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NARES`NASAL`NASOPHARYNGEAL SWAB`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SPUTUM`SPUTUM, ORAL

						ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBCLAVIAN`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID CULTURE`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETH`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
EXAM	DIRECT EXAM	RES	N			
CULT	CULTURE	RES	N	580-1		
RPT	REPORT STATUS	RES	N			

Culture, Fungus with Direct Exam: Skin Hair Nails (53300)

Effective Date 12/1/2012

CPT(s): 87220, 87101

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53300

Interface Code: FUSHN

Result/AOE Code	**Description**	**Type**	**Suppress**	**Units**	**LOINC**	**A O E Type**	**List Codes**	**List Code Descriptions**
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	SKN`HAIR`NAIL`FINGN`TOEN	SKIN`HAIR`NAIL`FINGERNAIL`TOENAIL
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
KOH	KOH PREP	RES	N		667-6			
CULT	CULTURE	RES	N		580-1			
RPT	REPORT STATUS	RES	N					

Immunoglobulins IgA IgG IgM (GAM) (25110)

Effective Date 12/1/2012

CPT(s): 82784 x 3

Expiration Date:

Billing No: 25110

Interface Code: GAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGA	IgA	RES	N	mg/dL	2458-8
IGG	IgG	RES	N	mg/dL	2465-3
IGM	IgM	RES	N	mg/dL	2472-9

Immunoglobulins IgA IgG IgM Kappa Lambda (Serum Light Chains) (25120)

Effective Date 12/1/2012

CPT(s): 82784 x 3, 83883 x 2

Expiration Date:

Billing No: 25120

Interface Code: GAMKL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGA	IgA	RES	N	mg/dL	2458-8
IGG	IgG	RES	N	mg/dL	2465-3
IGM	IgM	RES	N	mg/dL	2472-9
KAP	KAPPA, SERUM	RES	N	mg/dL	11050-2
LAM	LAMBDA, SERUM	RES	N	mg/dL	11051-0

Neisseria gonorrhoeae Screen (55200)

Effective Date 12/1/2012

CPT(s): 87081

Expiration Date:

Billing No: 55200

Interface Code: GCSC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	CER`ENCV`GEN`UR`THRT`PENIS`VAG`VC`VUL	CERVICAL`ENDOCERVICAL`GENITAL`URETHRAL`THROAT`PENIS`VAGINAL`VAGINAL-CERVICAL`VULVA
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		691-6			
RPT	REPORT STATUS	RES	N					

Culture, Neisseria gonorrhoeae (GC) Anal (53450)

Effective Date 12/1/2012

CPT(s): 87081

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53450

Interface Code: GCSCA

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	ANAL	ANAL
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		691-6			
RPT	REPORT STATUS	RES	N					

Gestational Diabetic Screen (GDS) (Using Alternate Glucose Source) (23705)

Effective Date 12/1/2012

CPT(s): 82947

Expiration Date:

Billing No: 23705

Interface Code: GDSNG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z24	INDICATE ALTERNATE GLUCOSE SOURCE:	AOE	Y			TEXT		
GLUSUB	GLUCOSE LOAD:	RES	N		4269-7			
GT1	GLUCOSE TOL- 1 HR	RES	N	mg/dL	20438-8			
GTCOM	COMMENTS:	RES	N		50667-5			

Culture, Genital (53500)

Effective Date 12/24/2014

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53500

Interface Code: GENC Culture does not routinely include Gram Stain

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	CER`ENCV`GEN`PENIS`UR`VAG`VC`VUL	CERVICAL`ENDOCERVICAL`GENITAL`PENIS`URETHRAL`VAGINAL`VAGINAL-CERVICAL`VULVA
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	PRFLX	N		664-3			
CULT	CULTURE	RES	N		10352-3			
RPT	REPORT STATUS	RES	N					

Gentamicin (23591)

Effective Date 6/10/2015

CPT(s): 80170

Expiration Date:

Billing No: 23591

Interface Code: GENK

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTGENK	GENK DATE OF LAST DOSE	AOE	N			DATE		
TMGENK	GENK TIME OF LAST DOSE	AOE	N			TEXT		
DSGENK	GENK DOSAGE	AOE	N			TEXT		
GENTAK	GENTAMICIN	RES	N	mg/L	31093-8			
DTGENK	GENK DATE OF LAST DOSE	RES	N		29742-4			
TMGENK	GENK TIME OF LAST DOSE	RES	N		29637-6			
DSGENK	GENK DOSAGE	RES	N		18817-7			

Gentamicin Peak (23592)

Effective Date 6/10/2015

CPT(s): 80170

Expiration Date:

Billing No: 23592

Interface Code: GENP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTGENP	GENP DATE OF LAST DOSE	AOE	N			DATE		
TMGENP	GENP TIME OF LAST DOSE	AOE	N			TEXT		
DSGENP	GENP DOSAGE	AOE	N			TEXT		
GENTAP	GENTAMICIN, PEAK	RES	N	mg/L	3663-2			
DTGENP	GENP DATE OF LAST DOSE	RES	N		29742-4			
TMGENP	GENP TIME OF LAST DOSE	RES	N		29637-6			
DSGENP	GENP DOSAGE	RES	N		18817-7			

Gentamicin Trough (23593)

Effective Date 6/10/2015

CPT(s): 80170

Expiration Date:

Billing No: 23593

Interface Code: GENT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTGENT	GENT DATE OF LAST DOSE	AOE	N			DATE		
TMGENT	GENT TIME OF LAST DOSE	AOE	N			TEXT		
DSGENT	GENT DOSAGE	AOE	N			TEXT		
GENTAT	GENTAMICIN, TROUGH	RES	N	mg/L	3665-7			
DTGENT	GENT DATE OF LAST DOSE	RES	N		29742-4			
TMGENT	GENT TIME OF LAST DOSE	RES	N		29637-6			
DSGENT	GENT DOSAGE	RES	N		18817-7			

GGT-Gamma Glutamyltransferase (23750)

Effective Date 12/1/2012

CPT(s): 82977

Expiration Date:

Billing No: 23750

Interface Code: GGT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GGT	GGT (Gamma Glutamyltransferase)	RES	N	U/L	2324-2

Giardia Ag EIA Stool (53550)

Effective Date 12/1/2012

CPT(s): 87329

Expiration Date:

Billing No: 53550

Interface Code: GIAEIA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GEIA	GIARDIA BY EIA	RES	N		48059-0

Giemsa Stain (53600)

Effective Date 12/1/2012

CPT(s): 87207

Expiration Date:

Billing No: 53600

Interface Code: GIEMSA

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	BM`BWASH`BW `BALV`BRONCB	BONE MARROW`BRUSH WASHINGS`BRONCHIAL WASHINGS`BRONCHOALVEOLAR LAVAGE`BRONCHIAL BRUSHINGS
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GIEM	GIEMSA STAIN	RES	N		662-7			
RPT	REPORT STATUS	RES	N					

Glucose 2 Hour (Post Prandial) (23800)

Effective Date 12/1/2012

CPT(s): 82947

Expiration Date:

Billing No: 23800

Interface Code: GLPP2

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GLPP2	GLUCOSE 2 HOUR (Post Prandial)	RES	N	mg/dL	1521-4

Glucose (23900)

CPT(s): 82947

Effective Date 12/1/2012
Expiration Date:

Billing No: 23900

Interface Code: GLUC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GLUC	GLUCOSE	RES	N	mg/dL	2345-7

GMS Stain (53650)

Effective Date 12/1/2012

CPT(s): 87207

Expiration Date:

Billing No: 53650

Interface Code: GMSS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N	SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`URURET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BONE MARROW`BOIL`BONE`BRAIN `BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE `FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL SWAB`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL CYST FLUID`UTERINE

						CUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SKIN BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID CULTURE`TRACHEAL ASPIRATE`THROACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETH`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
GMS	GMS STAIN	RES	N	662-7		
RPT	REPORT STATUS	RES	N			

Gram Stain (53700)

Effective Date 12/1/2012

CPT(s): 87205

Expiration Date:

Billing No: 53700

Interface Code: GRAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORN`CORS`CSF`CSTF`CTIP`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`NSG`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PMBAL`PROS`PTF`PTLF`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SKN`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BONE MARROW`BOIL`BONE `BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE `FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILESTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR `LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL SWAB`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`NASOGASTRIC`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC

						FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SKIN BIOPSY`SKIN `SPUTUM`SPUTUM, ORAL ASPRIATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBDURAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID CULTURE`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSIL`TOOTH`TRACEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETH `URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VESICLE`VENOUS LINE`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
GS	GRAM STAIN	RES	N	664-3		
RPT	REPORT STATUS	RES	N			

Culture, Group A Streptococcus (53800)

Effective Date 12/1/2012

CPT(s): 87081

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 53800

Interface Code: GRPAS

Result/AOE		**Type**	**Suppress**	**Units**	**LOINC**	**A O E**		
Code	**Description**					**Type**	**List Codes**	**List Code Descriptions**
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	THRT	THROAT
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		38353-9			
RPT	REPORT STATUS	RES	N					

Glucose Tolerance 2 hr (F 2 hr) (24050)

Effective Date 12/1/2012

CPT(s): 82950, 82947

Expiration Date:

Billing No: 24050

Interface Code: GT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z17	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
GT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
GGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
GTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
GT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
GTCOM	COMMENTS:	RES	N		50667-5			

Glucose Tolerance 3 hr (F 1 2 3 hr) (24210)

Effective Date 12/1/2012

CPT(s): 82951, 82952

Expiration Date:

Billing No: 24210

Interface Code: GT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z18	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
GT1T	TIME OF 1 HR DRAW	AOE	Y			TEXT		
GT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
GT3T	TIME OF 3 HR DRAW	AOE	Y			TEXT		
GGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
GTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
GT1	GLUCOSE TOL- 1 HR	RES	N	mg/dL	20438-8			
GT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
GTG3	GLUCOSE TOL-3 HR	RES	N	mg/dL	20437-0			

Glucose Tolerance 4 hr (F 1 2 3 4 hr) (24220)

Effective Date 12/1/2012

CPT(s): 82951, 82952 x 2

Expiration Date:

Billing No: 24220

Interface Code: GT4

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z19	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
GT1T	TIME OF 1 HR DRAW	AOE	Y			TEXT		
GT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
GT3T	TIME OF 3 HR DRAW	AOE	Y			TEXT		
GT4T	TIME OF 4 HR DRAW	AOE	Y			TEXT		
GGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
GTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
GT1	GLUCOSE TOL- 1 HR	RES	N	mg/dL	20438-8			
GT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
GTG3	GLUCOSE TOL-3 HR	RES	N	mg/dL	20437-0			
GTG4	GLUCOSE TOL-4 HR	RES	N	mg/dL	26541-3			

Glucose Tolerance 5 hr (F 1 2 3 4 5 hr) (24225)

Effective Date 12/1/2012

CPT(s): 82951, 82952 x 3

Expiration Date:

Billing No: 24225

Interface Code: GT5

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z25	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
GT1T	TIME OF 1 HR DRAW	AOE	Y			TEXT		
GT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
GT3T	TIME OF 3 HR DRAW	AOE	Y			TEXT		
GT4T	TIME OF 4 HR DRAW	AOE	Y			TEXT		
GT5T	TIME OF 5 HR DRAW	AOE	Y			TEXT		
GGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
GTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
GT1	GLUCOSE TOL- 1 HR	RES	N	mg/dL	20438-8			
GT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
GTG3	GLUCOSE TOL-3 HR	RES	N	mg/dL	20437-0			
GTG4	GLUCOSE TOL-4 HR	RES	N	mg/dL	26541-3			
GTG5	GLUCOSE TOL-5 HR	RES	N	mg/dL	26543-9			

Glucose Tolerance OB (F 1 2 3 hr) (24200)

Effective Date 12/1/2012

CPT(s): 82951, 82952

Expiration Date:

Billing No: 24200

Interface Code: GTPREG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z16	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
GT1T	TIME OF 1 HR DRAW	AOE	Y			TEXT		
GT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
GT3T	TIME OF 3 HR DRAW	AOE	Y			TEXT		
GGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
GTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
GT1	GLUCOSE TOL- 1 HR	RES	N	mg/dL	20438-8			
GT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
GTG3	GLUCOSE TOL-3 HR	RES	N	mg/dL	20437-0			
GTCOM	COMMENTS:	RES	N		50667-5			

Hepatitis Panel Acute w/ Reflex (24810)

Effective Date 12/1/2012

CPT(s): 80074

Expiration Date:

Billing No: 24810

Interface Code: HACUTE

Package includes the following tests: HBSR Hepatitis B Surface Ag Qual. (HBS) w/ Reflex Confirmation, HBCM Hepatitis B IgM Core AB (Core M), HCV Hepatitis C Antibody, and HAV Hepatitis A Antibody, IgM Only (Anti-HAV IgM), Serum

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Haptoglobin (24300)

Effective Date 12/1/2012

CPT(s): 83010

Expiration Date:

Billing No: 24300

Interface Code: HAPT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HAPT	HAPTOGLOBIN	RES	N	mg/dL	46127-7

Hepatitis A IgM Antibody (Anti-HAV IgM), Serum (24850)

Effective Date 12/1/2012

CPT(s): 86709

Expiration Date:

Billing No: 24850

Interface Code: HAV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HAV	HEPATITIS A IgM ANTIBODY (Anti-HAV IgM), S	RES	N		22314-9

Hepatitis A Total Antibody (Anti-HAV Total), Serum (24830)

Effective Date 2/25/2015

CPT(s): 86708

Expiration Date:

Billing No: 24830

Interface Code: HAVT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Hepatitis A Total Antibody w/ Reflex (Anti-HAV Total), Serum (24840)

Effective Date 2/25/2015

CPT(s): 86708

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 24840

Interface Code: HAVTRX May Reflex HAV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
Q	HEPATITIS A TOTAL ANTIBODY (Anti-HAV Total)	RES	N		13951-9

Hepatitis B IgM Core AB (Core M) (24650)

Effective Date 12/1/2012

CPT(s): 86705

Expiration Date:

Billing No: 24650

Interface Code: HBCM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HBCM	HEPATITIS B IgM CORE AB (Core M)	RES	N		31204-1

Hepatitis B Surface Ab, Immune Status (24710)

Effective Date 12/30/2015

CPT(s): 86706

Expiration Date:

Billing No: 24710

Interface Code: HBSABI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HBSQ	HEPATITIS B SURF AB, QUANT	RES	N		5193-8
HBSI	HEPATITIS B SURF AB, QUAL	RES	N		10900-9

Hepatitis B Surface Ag Qual. (HBS) w/ reflex Confirmation (24750)

Effective Date 12/1/2012

CPT(s): 87340

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 24750

Interface Code: HBSR May Reflex HBSCF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HBSINT	HEPATITIS B SURF ANTIGEN	RES	N		5196-1

HCG Total Quant. (24350)

Effective Date 12/1/2012

CPT(s): 84702

Expiration Date:

Billing No: 24350

Interface Code: HCGT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCGT	HCG TOTAL QUANT.	RES	N	mIU/mL	19080-1

Hematocrit (HCT) (41050)

Effective Date 12/1/2012

CPT(s): 85014

Expiration Date:

Billing No: 41050

Interface Code: HCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCT	HEMATOCRIT (HCT)	RES	N	%	4544-3

HDL - High Dens. Liproprotein (24450)

Effective Date 12/1/2012

CPT(s): 83718

Expiration Date:

Billing No: 24450

Interface Code: HDL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HDL	HDL (High Dens. Liproprotein)	RES	N	mg/dL	2085-9

PF4 (Hit) Antibody (54900)

Effective Date 12/1/2012

CPT(s): 86022

Expiration Date:

Billing No: 54900

Interface Code: HEPIND

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HEPTT	PLATELET FACTOR 4	RES	N		33594-3

Heparin Anti Xa LMWH Lovenox (40860)

Effective Date 4/2/2013

CPT(s): 85520

Expiration Date:

Billing No: 40860

Interface Code: HEPLOV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LOV	HEPARIN ANTI Xa LMWH LOVENOX	RES	N	IU/mL	3271-4

Heparin Anti Xa Unfractionated (40870)

Effective Date 12/1/2012

CPT(s): 85520

Expiration Date:

Billing No: 40870

Interface Code: HEPUFH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UFH	HEPARIN ANTI Xa UNFRACTIONATED	RES	N	IU/mL	3274-8

Hepatic Function Panel (24550)

Effective Date 12/1/2012

CPT(s): 80076

Expiration Date:

Billing No: 24550

Interface Code: HFP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TP	TOTAL PROTEIN	RES	N	gm/dL	2885-2
GLOB	GLOBULIN	RES	N	gm/dL	10834-0
ALB	ALBUMIN	RES	N	gm/dL	61152-5
AG	A:G RATIO	RES	N	Ratio	1759-0
BILIT	BILIRUBIN, TOT.	RES	N	mg/dL	1975-2
BILID	BILIRUBIN, DIR.	RES	N	mg/dL	1968-7
ALKP	ALK PHOSPHATASE	RES	N	U/L	6768-6
AST	AST (SGOT)	RES	N	U/L	30239-8
ALT	ALT (SGPT)	RES	N	U/L	1742-6

Hemoglobin (HGB) (41150)

Effective Date 12/1/2012

CPT(s): 85018

Expiration Date:

Billing No: 41150

Interface Code: HGB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HGB	HEMOGLOBIN (HGB)	RES	N	gm/dL	718-7

Hemoglobin and Hematocrit (41100)

Effective Date 12/1/2012

CPT(s): 85014, 85018

Expiration Date:

Billing No: 41100

Interface Code: HH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HGB	HEMOGLOBIN	RES	N	gm/dL	718-7
HCT	HEMATOCRIT	RES	N	%	4544-3

HIV-1 Antibody Screen (Rapid) (24900)

Effective Date 9/9/2014

CPT(s): 86701

Expiration Date:

Billing No: 24900

Interface Code: HIVR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIVR	HIV 1 ANTIBODY SCREEN (Rapid)	RES	N		68961-2

HLA Tissue Type w/o DR Antigen (UNMC) (96700)

Effective Date 12/1/2012

CPT(s): 86813

Expiration Date:

Billing No: 96700

Interface Code: HLANDR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HLANDT	HLA W/O DR ANTIGEN	RES	N		

HLA Tissue Type with DR Antigen (UNMC) (96690)

Effective Date 12/1/2012

CPT(s): 86817

Expiration Date:

Billing No: 96690

Interface Code: HLATT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HLATTT	HLA TISSUE TYPE W/DR	RES	N		

Human Papillomavirus (HPV) Detection, 16/18 Genotype (87624)

Effective Date 1/14/2015

CPT(s): 87625

Expiration Date:

Billing No: 87624

Interface Code: HPV1618

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PMSSOU	SOURCE	AOE	Y		
PMSTP	SPECIMEN TYPE	AOE	N		
HPV1618	Human Papillomavirus (HPV) Detection, 16/18 Genotype	RES	N		

A O E

Result/AOE Code	Type	List Codes	List Code Descriptions
PMSSOU	SELECTLIST	CER`VAG	CERVICOVAGINAL`VAGINAL
PMSTP	SELECTLIST	TP`HPVDS	THINPREP`DNA COLLECTION DEVICE

Human Papillomavirus (HPV) Detection, High Risk (87623)

Effective Date 1/14/2015

CPT(s): 87624

Expiration Date:

Billing No: 87623

Interface Code: HPVONLY

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PMSSOU	Source	AOE	Y		
PMSTP	SPECIMEN TYPE	AOE	N		
PMS1618	16/18 HPV Testing?	AOE	N		
PMSCD	Clinical Diagnosis and History	AOE	N		
HPVONL	Human Papillomavirus (HPV) Detection, High Risk	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	CER`VAG	CERVICOVAGINAL`VAGINAL
SELECTLIST	TP`HPVDS	THINPREP`DNA COLLECTION DEVICE
SELECTLIST	N`HRPOS	NO`HIGH RISK HPV POSITIVE
TEXT		

H. pylori Urea Breath Test (24470)

Effective Date 12/1/2012

CPT(s): 83013

Expiration Date:

Billing No: 24470

Interface Code: HPYBT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HPYBT	H. PYLORI UREA BREATH TEST	RES	N		

IgA (24910)

Effective Date 12/1/2012

CPT(s): 82784

Expiration Date:

Billing No: 24910

Interface Code: IGA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGA	IgA	RES	N	mg/dL	2458-8

IgE (24965)

Effective Date 12/8/2015

CPT(s): 82785

Expiration Date:

Billing No: 24965

Interface Code: IGE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGE	IgE	RES	N	IU/mL	19113-0

IgG (24920)

Effective Date 12/1/2012

CPT(s): 82784

Expiration Date:

Billing No: 24920

Interface Code: IGG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGG	IgG	RES	N	mg/dL	2465-3

IgM (24960)

Effective Date 12/1/2012

CPT(s): 82784

Expiration Date:

Billing No: 24960

Interface Code: IGM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGM	IgM	RES	N	mg/dL	2472-9

Iron and Iron Binding Capacity (Do not order IRON separately!) (25260)

Effective Date 12/1/2012

CPT(s): 83540, 83550

Expiration Date:

Billing No: 25260

Interface Code: IIBC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IRON	IRON	RES	N	ug/dL	2498-4
IBC	TOT. IRON BINDING CAPACITY	RES	N	ug/dL	2500-7
SATIRN	% TRANSFERRIN SATURATION	RES	N	%	2502-3

Insulin, Fasting (25150)

Effective Date 12/1/2012

CPT(s): 83525

Expiration Date:

Billing No: 25150

Interface Code: INS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
INS	INSULIN, FASTING	RES	N	mU/L	56482-3

Insulin, 1 Hr. (25151)

Effective Date 12/1/2012

CPT(s): 83525

Expiration Date:

Billing No: 25151

Interface Code: INS1

Result/AOE Code	Description	Type	Suppress	Units	LOINC
INS1	INSULIN, 1 HR.	RES	N	mU/L	47657-2

Insulin, 2 hour (25152)

Effective Date 12/1/2012

CPT(s): 83525

Expiration Date:

Billing No: 25152

Interface Code: INS2

Result/AOE Code	Description	Type	Suppress	Units	LOINC
INS2	INSULIN, 2 HR.	RES	N	mU/L	47659-8

Iron (25200)

CPT(s): 83540

Effective Date 12/1/2012
Expiration Date:

Billing No: 25200

Interface Code: IRON

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IRON	IRON	RES	N	ug/dL	2498-4

ID and/or MIC on Referred Isolate (54010)

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 54010

Interface Code: ISENS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BILE`BIOP`BLAD`BLD`BLU`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORD`CORN`CORS`CSF`CSTF`CTIP`DIAF`DRNG`DUOF`EAR`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAIR`HAND`HEAD`HEMOW`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NAIL`NARES`NASL`NASP`NECK`NEPH`NGS`NPWASH`NSG`OVARY`PANF`PARF`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PLTP`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SER`SHOL`SHUN`SIN`SKBP`SKN`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBC`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`TI`TOE`TOEN`TON`TONGUE`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`UT`VAG`VC`VCSF`VUL`WND`WNDR`WRIST	AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BILE`BIOPSY`BLADDER`BLOOD`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN`BRONCHIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORD BLOOD`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DIALYSIS FLUID`DRAINAGE`DUODENAL FLUID`EAR`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL BRUSHINGS`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAIR`HAND`HEAD`HEMODIALYSIS WATER`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG TISSUE`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NAIL`NARES`NASAL`NASOPHARYNGEAL`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL WASHINGS`NASOGASTRIC`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PLATELET PACKS`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINECUL/DE/SAC FLUID`SCROTUM`SEMEN`SERUM`SHOULDER`SHUNT FLUID`SINUS`SKIN BIOPSY`SKIN`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBCLAVIAN`SUBDURAL FLUID`SUBMENTAL

						AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`TISSUE`TOE`TOENAIL`TONSIL`TONGUE`TOOTH`TRACHEOSTOMY`TRANSTRACHEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRAL`URETER`URINE`UTERINE`VAGINAL`VAGINAL-CERVICAL`VENTRICULAR CSF`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
CULT	CULTURE	RES	N	45335-7		
RPT	REPORT STATUS	RES	N			

Potassium (27300)

Effective Date 12/1/2012

CPT(s): 84132

Expiration Date:

Billing No: 27300

Interface Code: K

Result/AOE Code	Description	Type	Suppress	Units	LOINC
K	POTASSIUM	RES	N	mEq/L	2823-3

Kappa, Serum (25270)

Effective Date 12/1/2012

CPT(s): 83883

Expiration Date:

Billing No: 25270

Interface Code: KAP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
KAP	KAPPA, SERUM	RES	N	mg/dL	11050-2

Immunoglobulins Kappa/Lambda (Serum Light Chains) (25130)

Effective Date 12/1/2012

CPT(s): 83883 x 2

Expiration Date:

Billing No: 25130

Interface Code: KAPLAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
KAP	KAPPA, SERUM	RES	N	mg/dL	11050-2
LAM	LAMBDA, SERUM	RES	N	mg/dL	11051-0

Kleihauer Betke (Fetal Maternal Bleed) (10430)

Effective Date 12/1/2012

CPT(s): 85460

Expiration Date:

Billing No: 10430

Interface Code: KBFM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FTML	mL FETAL RBCs	RES	N		48555-7
PATHMD	BB PATH REVIEW, KB	RES	N		14869-2

Kleihauer Betke for RhIG Dosage (10440)

Effective Date 12/1/2012

CPT(s): 85460

Expiration Date:

Billing No: 10440

Interface Code: KBRHIG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
KBVIAL	KB VIAL	RES	N		1313-6
KBVOL	KB VOLUME in mLs RBCs	RES	N		
PATHMD	BB PATH REVIEW, KB	RES	N		14869-2

Fungus Direct Exam (53350)

Effective Date 12/1/2012

CPT(s): 87220

Expiration Date:

Billing No: 53350

Interface Code: KOHP

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions

SDES	SPECIMEN DESCRIPTION	AOE	N		SELECTLIST	ABD`ABDF`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASCT`ASP`ATR`AXI`AXIL`BACK`BALV`BARTC`BBP`BCF`BF`BILE`BIOP`BLAD`BLD`BLU`BM`BOIL`BONE`BRN`BRONCB`BRST`BURN`BUTT`BW`BWASH`CAPDS`CER`CHEEK`CHEST`COCCYX`COLO`COLS`CONJ`CONL`CORD`CORN`CORS`CSF`CSTF`CTIP`DIAF`DRNG`DUOF`ELBOW`EMESIS`ENCV`END`ESB`ET`EYE`FACE`FING`FINGN`FLDOTH`FOOT`GAS`GASTR`GB`GEN`GRAF`GROIN`GROS`HAND`HEAD`HEMOW`HEP`HERNIA`HIP`HYDF`ILE`ILEO`INCIS`IUD`IVF`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LES`LIPP`LSAC`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NARES`NASL`NASP`NECK`NEPH`NGS`NPASP`NPWASH`NSG`OCULAR`OTHER`OVARY`PANF`PARF`PB`PELV`PENIS`PERI`PERIN`PILC`PLAC`PLEF`PMBAL`PROS`PTF`PTLF`PUMP`RCF`RECT`RENA`SAC`SCROT`SEM`SHOL`SHUN`SIN`SKBP`SP`SPASP`SPIN`SPLN`STOOL`STUMP`SUBD`SUBM`SUMP`SUPA`SWGZ`SYN`TASP`THF`THRT`THTW`TI`TOE`TOEN`TON`TOOT`TRAC`TTRA`TTUB`UMBL`UR`URET`URINE`URINEC`UT`VAG`VC`VCSF`VES`VUL`WND`WNDR`WRIST	ABDOMEN`ABDOMINAL FLUID`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASCITIC FLUID`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BRONCHOALVEOLAR LAVAGE`BARTHOLIN CYST`BRONCH BRUSH PROTECTIVE`BRAIN CYST FLUID`BODY FLUID`BILE`BIOPSY`BLADDER`BLOOD`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN CYST FLUID`BRONCIAL BRUSHINGS`BREAST`BURN`BUTTOCKS`BRONCHIAL WASHINGS`BRUSH WASHINGS`CAPD SITE`CERVICAL`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CONJUNCTIVAL`CONTACT LENS`CORD BLOOD`CORNEA`CORNEAL SCRAPINGS`CEREBROSPINAL FLUID`CYST FLUID`CATHETER TIP`DIALYSIS FLUID`DRAINAGE`DUODENAL FLUID`ELBOW`EMESIS`ENDOCERVICAL`ENDOMETRIUM`ESOPHAGEAL`ENDOTRACHEAL`EYE`FACE`FINGER`FINGERNAIL`FLUID/OTHER`FOOT`GASTRIC`GASTROSTOMY`GALLBLADDER`GENITAL`GRAFT SITE`GROIN`GROSHONG SITE`HAND`HEAD`HEMODIALYSIS WATER`HEPATIC`HERNIA`HIP`HYDROCELE FLUID`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`IV FLUID`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LESION`LIP`LUMBAR SAC FLUID`LUMBAR`LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NARES`NASAL`NASOPHARYNGEAL SWAB`NECK`NEPHROSTOMY`N/G SITE`NASOPHARYNGEAL ASPIRATE`NASOPHARYNGEAL WASHINGS`NASOGASTRIC`OCULAR SECRETION`OTHER`OVARY`PANCREATIC FLUID`PARACENTESIS FLUID`PERIPHERAL BLOOD`PELVIC/PELVIS`PENIS`PERICARDIAL FLUID`PERINEUM`PILONIDAL CYST`PLACENTA`PLEURAL FLUID`PROTECTED TIP ASP-MINI BAL`PROSTATE`PERITONEAL FLUID`PERITONEAL LAVAGE`PUMP SPECIMEN`RENAL CYST FLUID`RECTAL SWAB`RENAL`UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SHOULDER`SH

						UNT FLUID`SINUS`SKIN BIOPSY`SPUTUM`SPUTUM, ORAL ASPIRATION`SPUTUM, INDUCED`SPLEEN`STOOL`STUMP`SUBD ERAL FLUID`SUBMENTAL AREA`SUMP DRAINAGE`SUPRAPUBIC ASPIRATE`SWAN GANTZ CATHETER`SYNOVIAL FLUID CULTURE`TRACHEAL ASPIRATE`THORACENTESIS FLUID`THROAT SWAB`THROAT WASHINGS`TISSUE`TOE`TOENAIL`TONSI L`TOOTH`TRACHEOSTOMY`TRANSTRAC HEAL ASPIRATE`T/TUBE`UMBILICUS`URETHRA L`URETH`URINE`URINE CATHETERIZED`UTERINE`VAGINAL`VAGI NAL-CERVICAL`VENTRICULAR CSF`VESICLE`VULVA`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N		TEXT	
SDES	SPECIMEN DESCRIPTION	RES	N	31208-2		
SREQ	SPECIAL REQUESTS	RES	N	8251-1		
KOH	KOH PREP	RES	N	667-6		
RPT	REPORT STATUS	RES	N			

Lactate, Plasma (Lactic Acid) (25350)

Effective Date 12/1/2012

CPT(s): 83605

Expiration Date:

Billing No: 25350

Interface Code: LA

Result/AOE		**Type**	**Suppress**	**Units**	**LOINC**
Code	**Description**				
LA	LACTATE, PLASMA (Lactic Acid)	RES	N	mEq/L	32133-1

Lactose Tolerance (6 Specimens) (25450)

Effective Date 12/1/2012

CPT(s): 82951, 82952 x 3

Expiration Date:

Billing No: 25450

Interface Code: LACTOL

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z20	GRAMS OF LACTOSE GIVEN?	AOE	Y			TEXT		
GLGT	TIME LACTOSE GIVEN	AOE	Y			TEXT		
LTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
LTHT	TIME OF HALF HR DRAW	AOE	Y			TEXT		
LT1T	TIME OF 1 HR DRAW	AOE	Y			TEXT		
LT1HT	TIME OF 1.5 HR DRAW	AOE	Y			TEXT		
LT2T	TIME OF 2 HR DRAW	AOE	Y			TEXT		
LT2HT	TIME OF 2.5 HR DRAW	AOE	Y			TEXT		
GLG	GRAMS LACTOSE GIVEN	RES	N	mg/dL				
LTF	LACTOSE TOL-FASTING	RES	N	mg/dL	12638-3			
LTH	LACTOSE TOL-HALF HR	RES	N	mg/dL	26777-3			
LT1	LACTOSE TOL-1 HR	RES	N	mg/dL	26778-1			
LT1H	LACTOSE TOL-1.5 HR	RES	N	mg/dL	26779-9			
LT2	LACTOSE TOL-2 HR	RES	N	mg/dL	26780-7			
LT2H	LACTOSE TOL-2.5 HR	RES	N	mg/dL	13865-1			
LTCOM	COMMENTS:	RES	N		69553-6			

Lambda, Serum (25280)

Effective Date 12/1/2012

CPT(s): 83883

Expiration Date:

Billing No: 25280

Interface Code: LAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LAM	LAMBDA, SERUM	RES	N	mg/dL	11051-0

LD (Lactic Dehydrogenase) (LDH) (25500)

Effective Date 12/1/2012

CPT(s): 83615

Expiration Date:

Billing No: 25500

Interface Code: LDH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LDH	LD (Lactic Dehydrogenase)(LDH)	RES	N	U/L	14804-9

Lead, Blood Spot (Reg) (90128)

Effective Date 2/4/2013

CPT(s): 83655

Expiration Date:

Billing No: 90128

Interface Code: LEADBS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSTRT	STREET ADDRESS	AOE	Y			TEXT		
MCTY	CITY	AOE	Y			TEXT		
MSTE	STATE	AOE	Y			TEXT		
MZCODE	ZIP CODE	AOE	Y			TEXT		
MRCE	RACE	AOE	Y			TEXT		
LEADFP	LEAD, FILTER FILTER	RES	N	ug/dL				

Legionella Antigen Urine (54100)

Effective Date 12/1/2012

CPT(s): 87450

Expiration Date:

Billing No: 54100

Interface Code: LEGAG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LEGAG	LEGIONELLA AG URINE	RES	N		32781-7

Legionella Direct Fluoresence (54200)

Effective Date 12/1/2012

CPT(s): 87278

Expiration Date:

Billing No: 54200

Interface Code: LEGDF

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	BW`BALV`BWASH`BRONCB`SP	BRONCHIAL WASHINGS`BRONCHOALVEOLAR LAVAGE`BRUSH WASHINGS`BRONCHIAL BRUSHINGS`SPUTUM
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
LEGD	LEGIONELLA DFA	RES	N		588-4			
RPT	REPORT STATUS	RES	N					

LH - Luteinizing Hormone (25550)

Effective Date 12/1/2012

CPT(s): 83002

Expiration Date:

Billing No: 25550

Interface Code: LH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LH	LH (Luteinizing Hormone)	RES	N	mIU/mL	10501-5

Lipase (25650)

Effective Date 12/1/2012

CPT(s): 83690

Expiration Date:

Billing No: 25650

Interface Code: LIP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LIP	LIPASE	RES	N	U/L	3040-3

Lipid Panel (25700)

Effective Date 12/1/2012

CPT(s): 80061

Expiration Date:

Billing No: 25700

Interface Code: LIPSC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
FASTST	FASTING STATUS	AOE	N			TEXT		
FASTST	FASTING STATUS	RES	N		49541-6			
TRIG	TRIGLYCERIDE	RES	N	mg/dL	2571-8			
CHOL	CHOLESTEROL	RES	N	mg/dL	2093-3			
HDL	HDL	RES	N	mg/dL	2085-9			
NONHDL	NON HDL CHOLESTEROL	RES	N	mg/dL	43396-1			
CHOHDL	CHOL/HDL RATIO	RES	N	Ratio	9830-1			
LDL	LDL	RES	N	mg/dL	13457-7			
LDLHDL	LDL/HDL RATIO	RES	N	Ratio	11054-4			
VLDL	VLDL	RES	N	mg/dL	13458-5			

Lithium (25750)

Effective Date 12/1/2012

CPT(s): 80178

Expiration Date:

Billing No: 25750

Interface Code: LITH

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTLI	DATE OF LAST DOSE	AOE	N			DATE		
TMLI	TIME OF LAST DOSE	AOE	N			TEXT		
DSLI	DOSAGE	AOE	N			TEXT		
LI	LITHIUM	RES	N	mEq/L	14334-7			
DTLI	DATE OF LAST DOSE	RES	N		29742-4			
TMLI	TIME OF LAST DOSE	RES	N		29637-6			
DSLI	DOSAGE	RES	N		18817-7			

Electrolyte Panel (23150)

Effective Date 12/1/2012

CPT(s): 80051

Expiration Date:

Billing No: 23150

Interface Code: LYTEPN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NA	SODIUM	RES	N	mEq/L	2951-2
K	POTASSIUM	RES	N	mEq/L	2823-3
CL	CHLORIDE	RES	N	mEq/L	2075-0
CO2V	T. CO2 (BICARB)	RES	N	mM/L	2028-9

Clozapine (Mayo CLZ) (90777)

Effective Date 1/2/2014

CPT(s): 80159

Expiration Date:

Billing No: 90777

Interface Code: M00406

Result/AOE Code	Description	Type	Suppress	Units	LOINC
00406A	CLOZAPINE	RES	N	ng/mL	6896-5
00406B	NORCLOZAPINE	RES	N	ng/mL	10992-6
00406C	CLOZAPINE/NORCLOZAPINE TOTAL	RES	N	ng/mL	12375-2

Bile Acids, Total (Mayo BILEA) (92536)

Effective Date 12/1/2012

CPT(s): 82239

Expiration Date:

Billing No: 92536

Interface Code: M20039

Result/AOE Code	Description	Type	Suppress	Units	LOINC
20039A	BILE ACIDS, TOTAL	RES	N	umol/L	14628-2

Helicobacter pylori Antigen, Feces (Mayo HPSA) (91420)

Effective Date 12/1/2012

CPT(s): 87338

Expiration Date:

Billing No: 91420

Interface Code: M24088

Result/AOE Code	Description	Type	Suppress	Units	LOINC
24088A	HELICOBACTER PYLORI AG, STOOL	RES	N		17780-8

Histoplasma Antibody (Mayo SHSTO) (99407)

Effective Date 5/6/2014

CPT(s): 86698 x 3

Expiration Date:

Billing No: 99407

Interface Code: M26692 Orderable and Reflex for XHIBLS and M83853

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8240B	HISTOPLASMA MYCELIAL	RES	N		20573-2
8240C	HISTOPLASMA YEAST	RES	N		20574-0
8240D	HISTOPLASMA IMMUNODIFF	RES	N		5218-3

Alpha-1-Antitrypsin Phenotype, Serum (Mayo A1APP) (95270)

Effective Date 12/1/2012

CPT(s): 82103, 82104

Expiration Date:

Billing No: 95270

Interface Code: M26953

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8166A	ALPHA 1 ANTITRYPSIN PHENOTYPE	RES	N		32769-2
8166B	ALPHA 1 ANTITRYPSIN	RES	N		6771-0

Zinc Protoporphyrins (Mayo NEZPP) (99558)

Effective Date 12/1/2012

CPT(s): 84202

Expiration Date:

Billing No: 99558

Interface Code: M30009

Result/AOE Code	Description	Type	Suppress	Units	LOINC
30009A	ZINC PROTOPORPHYRIN	RES	N		29763-0

Region IX Allergy Profile w/o IgE (Mayo PR479) (99902)

Effective Date 2/8/2013

CPT(s): 86003 x 18

Expiration Date:

Billing No: 99902

Interface Code: M3033

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720F	COCKROACH, IgE	RES	N	kU/L	30170-5
3033A	HOUSE DUST MITES/D.P., IgE	RES	N	kU/L	6096-2
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4
83720G	CLADOSPORIUM, IgE	RES	N	kU/L	53760-5
3033B	ASPERGILLUS FUMIGATUS, IgE	RES	N	kU/L	6025-1
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2
83720I	BOX ELD/MAPLE, IgE	RES	N	kU/L	7155-5
83720J	OAK, IgE	RES	N	kU/L	6189-5
83720K	ELM, IgE	RES	N	kU/L	6109-3
83720L	COTTONWOOD, IgE	RES	N	kU/L	6090-5
83720P	FIREBUSH (KOCHIA), IgE	RES	N	kU/L	6118-4
83720M	SHORT RAGWEED, IgE	RES	N	kU/L	6085-5
83720N	RUSSIAN THISTLE, IgE	RES	N	kU/L	6234-9
83720O	ROUGH MARSH ELDER, IgE	RES	N	kU/L	6232-3
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8
83720C	DOG DANDER, IgE	RES	N	kU/L	6098-8
83720D	BERMUDA GRASS, IgE	RES	N	kU/L	6041-8
83720E	RED TOP, IgE	RES	N	kU/L	6228-1

Methylmalonic Acid Qn, Plasma (Mayo MMAP) (90529)

Effective Date 12/1/2012

CPT(s): 83921

Expiration Date:

Billing No: 90529

Interface Code: M31927

Result/AOE Code	Description	Type	Suppress	Units	LOINC
31927A	METHYLMALONIC ACID, QN	RES	N	nmol/mL	13964-2

Leukemia/Lymphoma, Phenotype (Mayo LCMS) (90235)

Effective Date 12/1/2012

CPT(s): 88184

Expiration Date:

Additional CPTs will be billed.

Billing No: 90235

Interface Code: M3287

Result/AOE Code	Description	Type	Suppress	Units	LOINC
3287A	ACCESSION NUMBER	RES	N		NA
3287B	REFERRING PATHOLOGIST/PHYSICIAN	RES	N		46608-6
3287C	REF. PATH ADDRESS	RES	N		74221-3
3287D	MATERIAL:	RES	N		NA
3287E	SPECIMEN:	RES	N		31208-2
3287F	BONE MARROW DIFFERENTIAL	RES	N		47286-0
3287G	PERIPHERAL BLOOD:	RES	N		NA
3287H	ASPIRATE:	RES	N		NA
3287I	BIOPSY	RES	N		52121-1
3287J	MICROSCOPIC DESCRIPTION:	RES	N		NA
3287K	SPECIAL STUDIES:	RES	N		NA
3287L	FINAL DIAGNOSIS:	RES	N		34574-4
3287M	COMMENT:	RES	N		48767-8
3287N	REVISION DESCRIPTION:	RES	N		NA
3287O	SIGNING PATHOLOGIST:	RES	N		19139-5
3287P	SPECIAL PROCEDURES:	RES	N		NA
3287Q	SP SIGNING PATHOLOGIST:	RES	N		19139-5
3287R	*PREVIOUS REPORT FOLLOWS*	RES	N		NA
3287S	ADDENDUM	RES	N		35265-8
3287T	ADDENDUM COMMENT:	RES	N		22638-1
3287U	ADDENDUM PATHOLOGIST:	RES	N		19139-5

CU Index Panel (FCUP) (92839)

Effective Date 12/1/2012

CPT(s): 84443, 86352, 86376, 86800

Expiration Date:

Billing No: 92839

Interface Code: M57106

Result/AOE Code	Description	Type	Suppress	Units	LOINC
57106A	ANTI-THYROID PEROXIDASE IgG	RES	N	IU/mL	18332-7
57106B	ANTI-THYROGLOBULIN IgG	RES	N	IU/mL	56635-6
57106C	TSH (THYROTROPIN)	RES	N	uIU/mL	3016-3
57106D	CU INDEX	RES	N		55141-6

Phosphatidylserine Abs, IgG, IgM, IgA (FPHOS) (95170)

Effective Date 12/1/2012

CPT(s): 86148 x 3

Expiration Date:

Billing No: 95170

Interface Code: M57205

Result/AOE Code	Description	Type	Suppress	Units	LOINC
57205A	PHOSPHATIDYLSERINE AB, IgG	RES	N		32032-5
57205B	PHOSPHATIDYLSERINE AB, IgM	RES	N		32033-3
57205C	PHOSPHATIDYLSERINE AB, IgA	RES	N		32031-7

Heavy Metal Screen, Random, Urine (Mayo HMSRU) (90524)

Effective Date 12/1/2012

CPT(s): 82175, 82300, 83655, 83825

Expiration Date:

Billing No: 90524

Interface Code: M60236

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89889A	ARSENIC, RANDOM, U	RES	N	mcg/L	5586-3
60246A	LEAD, RANDOM, U	RES	N	mcg/L	5676-2
60156A	CADMIUM, RANDOM, U	RES	N	mcg/L	5611-9
60248A	MERCURY, RANDOM, U	RES	N	mcg/L	5689-5

Lead, Random, Urine (Mayo PBRU) (90523)

Effective Date 12/1/2012

CPT(s): 83655

Expiration Date:

Billing No: 90523

Interface Code: M60246

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60246A	LEAD, RANDOM, U	RES	N	mcg/L	5676-2

Mercury, Random, Urine (Mayo HGRU) (90522)

Effective Date 12/1/2012

CPT(s): 83825

Expiration Date:

Billing No: 90522

Interface Code: M60248

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60248A	MERCURY, RANDOM, U	RES	N	mcg/L	5689-5

Vanillylmandelic Acid, Random, Urine (Mayo VMAR) (90525)

Effective Date 12/1/2012

CPT(s): 84585

Expiration Date:

Billing No: 90525

Interface Code: M60274

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60274A	VANILLYLMANDELIC ACID, RANDOM	RES	N	mg/g Cr	3124-5

Homovanillic Acid, Random, Urine (Mayo HVAR) (90526)

Effective Date 12/1/2012

CPT(s): 83150

Expiration Date:

Billing No: 90526

Interface Code: M60275

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60275A	HOMOVANILLIC ACID, RANDOM	RES	N	mg/g Cr	11146-8

Pyridoxal 5-Phosphate (PLP) (Mayo PLP) (91736)

Effective Date 12/1/2012

CPT(s): 84207

Expiration Date:

Billing No: 91736

Interface Code: M60295

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80223A	PYRIDOXAL 5-PHOSPHATE	RES	N	mcg/L	30552-4

Vitamin E (Mayo VITE) (93500)

Effective Date 12/1/2012

CPT(s): 84446

Expiration Date:

Billing No: 93500

Interface Code: M60297

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8505A	A-TOCOPHEROL VITAMIN E	RES	N	mg/L	1823-4

Vitamin A (Mayo VITA) (94940)

Effective Date 3/9/2016

CPT(s): 84590

Expiration Date:

Billing No: 94940

Interface Code: M60298

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8766B	FREE RETINOL (VIT A)	RES	N	mcg/dL	17527-3

Amino Acid, Quant, Random Urine (Mayo AAPD) (90528)

Effective Date 12/1/2012

CPT(s): 82139

Expiration Date:

Billing No: 90528

Interface Code: M60475

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60475A	PHOSPHORSERINE	RES	N	nmoL/mg Creat	28600-5
60475B	PHOSPHOETHANOLAMINE	RES	N	nmoL/mg Creat	28604-7
537D	TAURINE	RES	N	nmoL/mg Creat	28595-7
537G	ASPARAGINE	RES	N	nmoL/mg Creat	28603-9
537F	SERINE	RES	N	nmoL/mg Creat	30058-2
60475C	HYDROXYPROLINE	RES	N	nmoL/mg Creat	28601-3
537L	GLYCINE	RES	N	nmoL/mg Creat	30066-5
537I	GLUTAMINE	RES	N	nmoL/mg Creat	30056-6
60475D	ASPARTIC ACID	RES	N	nmoL/mg Creat	30061-6
60475E	ETHANOLAMINE	RES	N	nmoL/mg Creat	28605-4
537CC	HISTIDINE	RES	N	nmoL/mg Creat	30047-5
537E	THREONINE	RES	N	nmoL/mg Creat	30057-4
537N	CITRULLINE	RES	N	nmoL/mg Creat	30161-4

60475F	SARCOSINE	RES	N	nmoL/mg Creat	28610-4
537X	B-ALANINE	RES	N	nmoL/mg Creat	28588-2
537M	ALANINE	RES	N	nmoL/mg Creat	30068-1
537H	GLUTAMIC ACID	RES	N	nmoL/mg Creat	30059-0
537BB	1-METHYLHISTIDINE	RES	N	nmoL/mg Creat	28606-2
537DD	3-METHYLHISTIDINE	RES	N	nmoL/mg Creat	28594-0
60475G	ARGININOSUCCINIC ACID	RES	N	nmoL/mg Creat	32229-7
537EE	CARNOSINE	RES	N	nmoL/mg Creat	28597-3
60475H	ANSERINE	RES	N	nmoL/mg Creat	28596-5
60475I	HOMOCITRULLINE	RES	N	nmoL/mg Creat	32248-7
537FF	ARGININE	RES	N	nmoL/mg Creat	30062-4
537J	A-AMINOADIPIC ACID	RES	N	nmoL/mg Creat	28598-1
60475J	GAMMA-AMINO-N-BUTYRIC ACID	RES	N	nmoL/mg Creat	28593-2
537Y	B-AMINOISOBUTYRIC ACID	RES	N	nmoL/mg Creat	28602-1
60475K	HYDROXYLYSINE	RES	N	nmoL/mg Creat	30050-9
537O	A-AMINOISOBUTYRIC ACID	RES	N	nmoL/mg Creat	28590-8

537K	PROLINE	RES	N	nmoL/mg Creat	30067-3
537Z	ORNITHINE	RES	N	nmoL/mg Creat	30049-1
537R	CYSTATHIONINE	RES	N	nmoL/mg Creat	28599-9
537Q	CYSTINE	RES	N	nmoL/mg Creat	30065-7
537AA	LYSINE	RES	N	nmoL/mg Creat	30048-3
537S	METHIONINE	RES	N	nmoL/mg Creat	30063-2
537P	VALINE	RES	N	nmoL/mg Creat	30064-0
537V	TYROSINE	RES	N	nmoL/mg Creat	30054-1
537T	ISOLEUCINE	RES	N	nmoL/mg Creat	30052-5
537U	LEUCINE	RES	N	nmoL/mg Creat	30053-3
537W	PHENYLALANINE	RES	N	nmoL/mg Creat	30055-8
60475L	TRYPTOPHAN	RES	N	nmoL/mg Creat	28608-8
60475M	ALLO-ISOLEUCINE	RES	N	nmoL/mg Creat	73908-6
537HH	AAPD INTERPRETATION	RES	N		12467-7

Porphyrins, Quant, Random, Urine (Mayo PQNRU) (93057)

Effective Date 12/1/2012

CPT(s): 84110, 84120

Expiration Date:

Billing No: 93057

Interface Code: M60597

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60597A	UROPORPHYRIN, OCTA	RES	N		25166-0
60597B	HEPTACARBOXYLPORPHYRINS	RES	N		34314-5
60597C	HEXACARBOXYLPORPHYRINS	RES	N		
60597D	PENTACARBOXYLPORPHYRINS	RES	N		34352-5
60597E	COPROPORPHYRIN, TETRA	RES	N		25167-8
60597F	PORPHOBILINOGEN	RES	N		2811-8
60597G	PROPHYRINS INTERPRETATION	RES	N		59462-2

Occult Blood, Immunochemical (Mayo FOBT) (93245)

Effective Date 12/1/2012

CPT(s): 82274

Expiration Date:

Billing No: 93245

Interface Code: M60693

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60693A	OCCULT BLOOD	RES	N		

Smooth Muscle Antibodies (Mayo SMA) (93860)

Effective Date 12/1/2012

CPT(s): 86255

Expiration Date:

Billing No: 93860

Interface Code: M6284

Result/AOE Code	Description	Type	Suppress	Units	LOINC
6284A	ANTI-SMOOTH MUSCLE AB	RES	N		26971-2

Coag Factor X Inhibitor Screen (Mayo F10IS) (95690)

Effective Date 12/1/2012

CPT(s): 85260, 85335

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 95690

Interface Code: M7811 May Reflex M7288

Result/AOE Code	Description	Type	Suppress	Units	LOINC
7811A	COAG FACTOR X ASSAY	RES	N		3218-5
7811B	FACTOR X INHIB SCREEN	RES	N		39556-6

Testosterone, Total + Bioavailable (Mayo TTBS) (96620)

Effective Date 1/1/2015

CPT(s): 84403

Expiration Date:

Billing No: 96620

Interface Code: M80065

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8508E	TESTOSTERONE, TOTAL, S	RES	N	ng/dL	2986-8
80065B	TESTOSTERONE, BIOAVAILABLE	RES	N	ng/dL	2990-0

Enterovirus by Rapid PCR, Other (Mayo LENT) (94200)

Effective Date 6/25/2014

CPT(s): 87498

Expiration Date:

Billing No: 94200

Interface Code: M80066

Result/AOE Code	Description	Type	Suppress	Units	LOINC	AOE Type	AOE List Codes	AOE List Code Descriptions
MSOR23	SPECIMEN SOURCE	AOE	Y			TEXT		
80066A	SPECIMEN SOURCE	RES	N		31208-2			
80066B	ENTEROVIRUS PCR	RES	N		29591-5			

Ganciclovir (DHPG) (Mayo GANC) (97180)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 97180

Interface Code: M80140

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80140A	GANCICLOVIR (DHPG)	RES	N	mcg/mL	15367-6

Erythropoietin (EPO), Serum (Mayo EPO) (91140)

Effective Date 12/1/2012

CPT(s): 82668

Expiration Date:

Billing No: 91140

Interface Code: M80173

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80173A	ERYTHROPOIETIN	RES	N		15061-5

Scl 70 Antibodies, IgG, Serum (Mayo SCL70) (90320)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 90320

Interface Code: M80178

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80178A	Scl 70 AB, IgG	RES	N		47322-3

Jo 1 Antibodies, IgG, Serum (Mayo JO1) (95810)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 95810

Interface Code: M80179

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80179A	Jo 1 Ab, IgG	RES	N		33571-1

Prostatic Acid Phosphatase (PAP) (Mayo PACP) (99491)

Effective Date 12/1/2012

CPT(s): 84066

Expiration Date:

Billing No: 99491

Interface Code: M8019

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8019A	PROSTATIC ACID PHOSPHATASE	RES	N		20420-6

Fluoxetine (Prozac) (Mayo FLUOX) (99618)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 99618

Interface Code: M80228

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80228A	FLUOXETINE	RES	N		3644-2
80228B	NORFLUOXETINE	RES	N		3868-7
80228C	FLUOX-NORFLUOXETINE, TOTAL	RES	N		10339-0

Coxsackie B Ab Panel (Mayo COXB) (96900)

Effective Date 12/1/2012

CPT(s): 86658 x 6

Expiration Date:

Billing No: 96900

Interface Code: M80247

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80247A	COXSACKIE B AB Type 1	RES	N		5104-5
80247B	COXSACKIE B AB Type 2	RES	N		5106-0
80247C	COXSACKIE B AB Type 3	RES	N		5108-6
80247D	COXSACKIE B AB Type 4	RES	N		5110-2
80247E	COXSACKIE B AB Type 5	RES	N		5112-8
80247F	COXSACKIE B AB Type 6	RES	N		5114-4

Coxsackie A Ab Panel (Mayo COXA) (96890)

Effective Date 12/1/2012

CPT(s): 86658 x 6

Expiration Date:

Billing No: 96890

Interface Code: M80248

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80248A	COXSACKIE A AB Type 2	RES	N		9753-5
80248B	COXSACKIE A AB Type 4	RES	N		9754-3
80248C	COXSACKIE A AB Type 7	RES	N		9755-0
80248D	COXSACKIE A AB Type 9	RES	N		9757-6
80248E	COXSACKIE A AB Type 10	RES	N		9750-1
80248F	COXSACKIE A AB Type 16	RES	N		6688-6

Methylmalonic Acid (Mayo MMAS) (92500)

Effective Date 12/1/2012

CPT(s): 83921

Expiration Date:

Billing No: 92500

Interface Code: M80289

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80289A	METHYLMALONIC ACID (MMA)	RES	N		13964-2

Methylmalonic Acid Qn, Ur (Mayo MMAU) (99214)

Effective Date 12/1/2012

CPT(s): 83921

Expiration Date:

Billing No: 99214

Interface Code: M80290

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80290A	METHYLMALONIC ACID, QN	RES	N		32287-5

Galactose-1-Phosphate Uridyltransferase Biochemical Phenotyping, Erythrocytes (Mayo GALTP) (97200)

Effective Date 12/1/2012

CPT(s): 82664

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 97200

Interface Code: M80341 May Reflex M8333

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80341A	GAL-1-P URDYLTRANS PHENOTYPE	RES	N		33780-8
80341B	REVIEWED BY	RES	N		

Arginine Vasopressin (Mayo AVP) (95890)

Effective Date 12/1/2012

CPT(s): 84588

Expiration Date:

Billing No: 95890

Interface Code: M80344

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80344A	ARGININE VASOPRESSIN	RES	N		3126-0

Beta-2 Transferrin: Detect, CSF or Body Fluid (Mayo BETA2) (93880)

Effective Date 12/1/2012

CPT(s): 86335

Expiration Date:

Billing No: 93880

Interface Code: M80351

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80351A	BETA-2 TRANSFERRIN	RES	N		13876-8

Homocysteine, Total, Plasma (Mayo HCYSP) (91970)

Effective Date 12/5/2014

CPT(s): 83090

Expiration Date:

Billing No: 91970

Interface Code: M80379

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80379A	HOMOCYSTEINE, TOTAL	RES	N	mcmol/L	13965-9

Liver/Kidney Microsome type 1 (Mayo LKM) (98970)

Effective Date 12/1/2012

CPT(s): 86376

Expiration Date:

Billing No: 98970

Interface Code: M80387

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80387A	LIVER/KIDNEY MACRO TYPE 1 AB	RES	N		32220-6

Ethotoin (Peganone) (Mayo ETHO) (97690)

Effective Date 12/16/2015

CPT(s): 80339

Expiration Date:

Billing No: 97690

Interface Code: M80449

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80449A	ETHOTOIN	RES	N		3617-8

Lyme Disease by Rapid PCR, Other (Mayo PBORR) (95750)

Effective Date 11/4/2009

CPT(s): 87476

Expiration Date:

Billing No: 95750

Interface Code: M80574

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR14	SPECIMEN SOURCE	AOE	Y			TEXT		
80574A	SPECIMEN SOURCE	RES	N		31208-2			
80574B	LYME DISEASE BY RAPID PCR	RES	N		4991-6			

Osteocalcin (Mayo OSCAL) (99238)

Effective Date 12/1/2012

CPT(s): 83937

Expiration Date:

Billing No: 99238

Interface Code: M80579

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80579A	OSTEOCALCIN	RES	N		2697-1

Renin Activity, Plasma (Mayo PRA) (93000)

Effective Date 12/1/2012

CPT(s): 84244

Expiration Date:

Billing No: 93000

Interface Code: M8060

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8060A	RENIN ACTIVITY	RES	N		2915-7

Organic Acids Screen, Urine (Mayo OAU) (92640)

Effective Date 12/1/2012

CPT(s): 83919

Expiration Date:

Billing No: 92640

Interface Code: M80619

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80619A	ORGANIC ACID SCREEN	RES	N		2676-5

Protein S Activity (Functional) (Mayo S_FX) (93650)

Effective Date 12/1/2012

CPT(s): 85306

Expiration Date:

Billing No: 93650

Interface Code: M80775 Orderable and Reflex for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80775A	PROTEIN S ACTIVITY	RES	N		31102-7

Felbamate (Felbatol), Serum (Mayo FELBA) (91220)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 91220

Interface Code: M80782

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80782A	FELBAMATE (FELBATOL)	RES	N		6899-9

Gabapentin (Mayo GABA) (91320)

Effective Date 1/2/2014

CPT(s): 80171

Expiration Date:

Billing No: 91320

Interface Code: M80826

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80826A	GABAPENTIN, P/S	RES	N	mcg/mL	9738-6

Tropheryma Whipplei, Fld/Tiss (Mayo TWRP) (99667)

Effective Date 3/4/2013

CPT(s): 87798

Expiration Date:

Billing No: 99667

Interface Code: M80909

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR48	SPECIMEN SOURCE	AOE	Y			TEXT		
80909A	TROPHERYMA WHIPPLEI SOURCE	RES	N		31208-2			
80909B	TROPHERYMA WHIPPLEI RESULT	RES	N		42602-3			

Neuron-Specific Enolase (NSE) (Mayo NSE) (96130)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 96130

Interface Code: M80913

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80913A	NEURON SPECIFIC ENOLASE	RES	N		15060-7

Histone Autoantibodies, Serum (Mayo HIS) (97500)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 97500

Interface Code: M80944

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80944A	HISTONE AUTOANTIBODIES	RES	N		43231-0

Varicella Zoster Ab, IgM (Mayo VZM) (95870)

Effective Date 12/1/2012

CPT(s): 86787

Expiration Date:

Billing No: 95870

Interface Code: M80964

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84424B	VARICELLA ZOSTER AB, IGM	RES	N		43588-3

Mumps Antibody IgM (Mayo MMPM) (90619)

Effective Date 12/1/2012

CPT(s): 86735

Expiration Date:

Billing No: 90619

Interface Code: M80977

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80977A	MUMPS AB, IgM	RES	N		6478-2
80977B	MUMPS AB IgM INDEX VALUE	RES	N		25419-3

Phospholipid AB (Cardiolipin), IgG (Mayo GCLIP) (92785)

Effective Date 7/31/2013

CPT(s): 86147

Expiration Date:

Billing No: 92785

Interface Code: M80993

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80993A	PHOSPHOLIPID AB, IgG	RES	N		3286-2

Lamotrigine (Mayo LAMO) (92160)

Effective Date 1/2/2014

CPT(s): 80175

Expiration Date:

Billing No: 92160

Interface Code: M80999

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80999A	LAMOTRIGINE	RES	N		6948-4

Oxcarbazepine Metabolite (Mayo OMHC) (94930)

Effective Date 1/2/2014

CPT(s): 80183

Expiration Date:

Billing No: 94930

Interface Code: M81030

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81030A	OXCARBAZEPINE METABOLITE	RES	N	mcg/mL	31019-3

Glomerular Basement Membrane AB IgG Serum (Mayo GBM) (91380)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 91380

Interface Code: M8106

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8106A	GLOMERULAR BASE. MEMBRANE, IgG AB	RES	N		31254-6

Brucella Total Ab Confirmation (Mayo BRUTA) (93030)

Effective Date 12/1/2012

CPT(s): 86622

Expiration Date:

Billing No: 93030

Interface Code: M8112 Orderable and Reflex for M89476

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8112A	BRUCELLA TOTAL AB AGGLUT.	RES	N		19053-8

Legionella pneumophila (Legionnaires' Disease), Antibody, Serum (Mayo SLEG) (92280)

Effective Date 12/1/2012

CPT(s): 86713

Expiration Date:

Billing No: 92280

Interface Code: M8122

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8122A	LEGIONELLA PNEUMOPHILA AB	RES	N		7947-5

Autoantibodies to U1RNP (Anti RNP) (Mayo RNP) (93150)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 93150

Interface Code: M81357

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81357A	RNP Ab, IgG	RES	N		31588-7

Autoantibodies to Sm, Serum (Mayo SM) (93120)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 93120

Interface Code: M81358

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81358A	Sm Ab, IgG	RES	N		18323-6

Autoantibodies to SS-B/La (Sjogren's Syndrome AB) (SSB Autoantibodies) (Mayo SSB) (93630)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 93630

Interface Code: M81359

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81359A	SS-B/La Ab, IgG	RES	N		33613-1

Autoantibodies to SSA (Ro) Antigen, Serum (Mayo SSA) (93100)

Effective Date 12/1/2012

CPT(s): 86235

Expiration Date:

Billing No: 93100

Interface Code: M81360

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81360A	SS-A/Ro Ab, IgG	RES	N		33610-7

Dehydroepiandrosterone (DHEA), Serum (Mayo DHEA_) (91020)

Effective Date 12/1/2012

CPT(s): 82626

Expiration Date:

Billing No: 91020

Interface Code: M81405

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81405A	DEHYDROEPIANDROSTERONE	RES	N		2193-1

Estrone (Mayo E1) (95860)

Effective Date 12/1/2012

CPT(s): 82679

Expiration Date:

Billing No: 95860

Interface Code: M81418

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81418A	ESTRONE	RES	N		2258-2

Factor V Leiden R506Q Mut, Blood (Mayo F5DNA) (91200)

Effective Date 4/29/2015

CPT(s): 81241

Expiration Date:

Billing No: 91200

Interface Code: M81419 Orderable and Reflex for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81419G	FACTOR V LEIDEN (R506Q) MUT	RES	N		21667-1
81419H	F5DNA INTERPRETATION	RES	N		69049-5
81419J	F5DNA REVIEWED BY:	RES	N		69047-9

Chlamydia Serology (Mayo SCLAM) (98880)

Effective Date 11/16/2012

CPT(s): 86631 x 3, 86632 x 3

Expiration Date:

Billing No: 98880

Interface Code: M8142

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8142B	C. PNEUMONIAE IgG	RES	N		6913-8
8142C	C. PNEUMONIAE IgM	RES	N		6914-6
8142D	C. TRACHOMATIS IgG	RES	N		6919-5
8142E	C. TRACHOMATIS IgM	RES	N		6920-3
8142F	C. PSITTACI IgG	RES	N		6916-1
8142G	C. PSITTACI IgM	RES	N		6917-9

Inflammatory Bowel Disease Panel (Mayo IBDP) (97160)

Effective Date 7/30/2015

CPT(s): 83520 x 2, 86255

Expiration Date:

Billing No: 97160

Interface Code: M81443

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81443A	S. CEREVISIAE AB, IgA	RES	N		47320-7
81443B	S. CEREVISIAE AB, IgG	RES	N		47321-5
81443C	NEUTROPHIL SPECIFIC ANTIBODIES	RES	N		

Dihydrotestosterone (DHT), Serum (Mayo DHTS) (99016)

Effective Date 1/1/2015

CPT(s): 80327

Expiration Date:

Billing No: 99016

Interface Code: M81479

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81479A	DIHYDROTESTOSTERONE	RES	N		1848-1

Ehrlichia Ab Panel (Mayo EHRCP) (97810)

Effective Date 12/1/2012

CPT(s): 86666 x 2

Expiration Date:

Billing No: 97810

Interface Code: M81480

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81480A	ANAPLASMA PHAGOCYTOPHILUM AB, IgG	RES	N		23877-4
81480B	EHRLICHIA CHAFFEENSIS (HME) AB, IgG	RES	N		47405-6

C1 Esterase Inhibitor, Functional, Quant (Mayo FC1EQ) (95110)

Effective Date 9/5/2013

CPT(s): 83520

Expiration Date:

Billing No: 95110

Interface Code: M81493

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81493A	C1 ESTERASE INHIBITOR, FUNCTIONAL	RES	N		48494-9

Vasoactive Intestinal Polypeptide (Mayo VIP) (96610)

Effective Date 12/1/2012

CPT(s): 84586

Expiration Date:

Billing No: 96610

Interface Code: M8150

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8150A	VASOACTIVE INTESTINAL POLYPEPTIDE	RES	N		3125-2

Topiramate (Topamax) (Mayo TOPI) (94460)

Effective Date 5/9/2016

CPT(s): 80201

Expiration Date:

Billing No: 94460

Interface Code: M81546

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81546A	TOPIRAMATE	RES	N		17713-9

Lipoprotein a (Mayo LIPA) (95580)

Effective Date 12/1/2012

CPT(s): 83695

Expiration Date:

Billing No: 95580

Interface Code: M81558

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81558A	LIPOPROTEIN a	RES	N		10835-7

Mycophenolic Acid (Mayo MPA) (97240)

Effective Date 1/2/2014

CPT(s): 80180

Expiration Date:

Billing No: 97240

Interface Code: M81563

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81563A	MYCOPHENOLIC ACID	RES	N		23905-3
81563B	MPA GLUCURONIDE	RES	N		23906-1

Iodine (Mayo IOD) (99446)

Effective Date 9/3/2015

CPT(s): 83018

Expiration Date:

Billing No: 99446

Interface Code: M81574

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81574A	IODINE	RES	N		2494-3

Bartonella Ab Panel, IgG + IgM (Mayo BART) (93940)

Effective Date 12/1/2012

CPT(s): 86611 x 4

Expiration Date:

Billing No: 93940

Interface Code: M81575

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81575A	BART HENSELAE IgG	RES	N		6954-2
81575B	BART HENSELAE IgM	RES	N		6955-9
81575C	BART QUINTANA IgG	RES	N		44827-4
81575D	BART QUINTANA IgM	RES	N		44825-8

GAD65 AB Assay (Glutamic Acid Decarboxylase Antibody) (Mayo GD65S) (95960)

Effective Date 6/18/2014

CPT(s): 86341

Expiration Date:

Billing No: 95960

Interface Code: M81596 Orderable and Reflex for M83370

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81596A	GAD65 AB ASSAY	RES	N	nmol/L	30347-9

Tryptase (Mayo TRYPT) (96930)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 96930

Interface Code: M81608

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81608A	TRYPTASE	RES	N		21582-2

Metanephrines, Fract.,Free, Plasma (Mayo PMET) (92485)

Effective Date 9/9/2013

CPT(s): 83835

Expiration Date:

Billing No: 92485

Interface Code: M81609

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81609A	NORMETANEPHRINE, FREE	RES	N		40851-8
81609B	METANEPHRINE, FREE	RES	N		49700-8

Hemoglobin Electrophoresis Cascade (Mayo HBELC) (90555)

Effective Date 10/8/2013

CPT(s): 83020, 83021

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90555

Interface Code: M81626 May Reflex M9095, M29374, M9180, M60286, M8270, M81644

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83341A	Hb A2	RES	N		4551-8
83341B	Hb F	RES	N		4576-5
81626A	Hb A	RES	N		20572-4
81626B	VARIANT	RES	N		32017-6
81626F	VARIANT 2	RES	N		
81626G	VARIANT 3	RES	N		
81626C	INTERPRETATION	RES	N		49316-3

MTHFR C677T Mutation Analysis, B (Mayo MTHFR) (94800)

Effective Date 4/16/2013

CPT(s): 81291

Expiration Date:

Billing No: 94800

Interface Code: M81648

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81648G	METHYLENETETRAHYDROFOL REDUC MUT	RES	N		21709-1
81648H	MTHFR INTERPRETATION	RES	N		69047-9
81648J	MTHFR REVIEWED BY:	RES	N		

von Willebrand Disease 2N (Normandy) (Mayo VWD2N) (99215)

Effective Date 1/2/2014

CPT(s): 81401

Expiration Date:

Billing No: 99215

Interface Code: M81662

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81662F	VWD2N METHOD	RES	N		
81662G	Thr791Met	RES	N		41268-4
81662H	Arg816Trp	RES	N		41210-6
81662I	Arg854Gln	RES	N		41209-8
81662J	VWD2N INTERPRETATION	RES	N		69049-5
81662L	VWD2N REVIEWED BY:	RES	N		

Complement, Total (Mayo COM) (90850)

Effective Date 12/1/2012

CPT(s): 86162

Expiration Date:

Billing No: 90850

Interface Code: M8167

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8167A	COMPLEMENT, TOTAL	RES	N		4532-8

Viscosity, Serum (Mayo VISCS) (94450)

Effective Date 12/1/2012

CPT(s): 85810

Expiration Date:

Billing No: 94450

Interface Code: M8168

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8168A	VISCOSTIY	RES	N		3128-6

Influenza A Ab, IgG + IgM (Mayo SFLA) (94810)

Effective Date 11/16/2012

CPT(s): 86710 x 2

Expiration Date:

Billing No: 94810

Interface Code: M8169

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8169B	INFLUENZA VIRUS A AB, IgG	RES	N		43837-4
8169C	INFLUENZA VIRUS A AB, IgM	RES	N		43838-2

Prothrombin G20210A Mutation (Mayo PTNT) (94050)

Effective Date 1/1/2013

CPT(s): 81240

Expiration Date:

Billing No: 94050

Interface Code: M81742

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81742G	PROTHROMBIN G20210A MUTATION	RES	N		24475-6
81742H	PTNT INTERPRETATION	RES	N		69049-5
81742J	PTNT REVIEWED BY:	RES	N		

Influenza B Ab, IgG + IgM (Mayo SFLB) (94820)

Effective Date 11/16/2012

CPT(s): 86710 x 2

Expiration Date:

Billing No: 94820

Interface Code: M8175

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8175B	INFLUENZA VIRUS B AB, IgG	RES	N		9535-6
8175C	INFLUENZA VIRUS B AB, IgM	RES	N		9536-4

Mitochondrial AB, M2 (Mayo AMA) (94040)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 94040

Interface Code: M8176

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8176A	MITOCHONDRIAL AB, M2	RES	N		49781-8

Parathyroid Hormone Related Peptide (Mayo PTHRP) (92700)

Effective Date 12/1/2012

CPT(s): 82397

Expiration Date:

Billing No: 92700

Interface Code: M81774

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81774A	PTH RELATED PEPTIDE	RES	N		15087-0

DNA Double Stranded (ds-DNA) Antibody, IgG, Serum (Mayo ADNA) (91060)

Effective Date 12/1/2012

CPT(s): 86225

Expiration Date:

Billing No: 91060

Interface Code: M8178

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8178A	DNA DBL-STRANDED AB, IGG	RES	N	IU/mL	33800-4

Neuron-Specific Enolase (NSE), Spinal Fluid (Mayo NSESF) (97290)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 97290

Interface Code: M81796

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81796A	NEURON SPECIFIC ENOLASE, CSF	RES	N		44802-7

Thyrotropin Receptor Antibody (Mayo THYRO) (97040)

Effective Date 1/1/2013

CPT(s): 83520

Expiration Date:

Billing No: 97040

Interface Code: M81797

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81797A	THYROTROPIN RECEPTOR AB	RES	N		5385-0

Estradiol, Mass Spectrometry (Mayo EEST) (91160)

Effective Date 1/11/2016

CPT(s): 82670

Expiration Date:

Billing No: 91160

Interface Code: M81816 Recommended for pediatric patients (<19 years). Reference ranges include Tanner stages.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81816A	ESTRADIOL	RES	N		2243-4

Food-Vegetable Panel (Mayo FOOD3) (99323)

Effective Date 12/1/2012

CPT(s): 86003

Expiration Date:

Billing No: 99323

Interface Code: M81871

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81871A	FOOD-VEGETABLE PANEL	RES	N		46711-8

Food-Grain Panel (Mayo FOOD4) (96170)

Effective Date 12/1/2012

CPT(s): 86003

Expiration Date:

Billing No: 96170

Interface Code: M81872

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81872A	FOOD-GRAIN PANEL	RES	N		46713-4

Food Panel (Mayo FOOD6) (96180)

Effective Date 11/26/2014

CPT(s): 86003

Expiration Date:

Billing No: 96180

Interface Code: M81874

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81874A	FOOD PANEL	RES	N		30187-9

Phospholipid AB (Cardiolipin), IgM (Mayo MCLIP) (92740)

Effective Date 7/31/2013

CPT(s): 86147

Expiration Date:

Billing No: 92740

Interface Code: M81900

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81900A	PHOSPHOLIPID AB, IgM	RES	N		3287-0

Prostate-Specific Antigen (PSA), Total + Free, Serum (Mayo PSAFT) (92920)

Effective Date 12/1/2012

CPT(s): 84153, 84154

Expiration Date:

Billing No: 92920

Interface Code: M81944

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81944A	TOTAL PSA	RES	N		2857-1
81944B	FREE PSA	RES	N		10886-0
81944C	FREE PSA/PSA RATIO	RES	N		12841-3

Activated Protein C Resistance V (Mayo APCRV) (96660)

Effective Date 12/1/2012

CPT(s): 85307

Expiration Date:

Billing No: 96660

Interface Code: M81967

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81967C	APCRV Ratio	RES	N		13590-5
81967D	INTERPRETATION	RES	N		

C1 Esterase Inhibitor Antigen (Mayo C1ES) (90500)

Effective Date 7/3/2014

CPT(s): 83883

Expiration Date:

Billing No: 90500

Interface Code: M8198

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8198A	C1 ESTERASE INHIBITOR ANTIGEN	RES	N		4477-6

Narcolepsy Associated Antigen, Blood (Mayo NARC) (92560)

Effective Date 1/1/2013

CPT(s): 81383

Expiration Date:

Billing No: 92560

Interface Code: M82026

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82026A	NARCOLEPSY ASSOC AG RESULT	RES	N		53938-7
82026B	INTERPRETATION	RES	N		IP

Porphobilinogen Quant, Random (Mayo PBGU) (99042)

Effective Date 1/22/2013

CPT(s): 84110

Expiration Date:

Billing No: 99042

Interface Code: M82068

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82068A	PORPHOBILINOGEN, RANDOM UR.	RES	N	mcmol/L	2811-8
82068B	INTERPRETATION	RES	N		59462-2
82068C	REVIEWED BY	RES	N		

Sulfamethoxazole (Mayo SFZ) (97030)

Effective Date 5/10/2013

CPT(s): 80299

Expiration Date:

Billing No: 97030

Interface Code: M8238

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8238A	SULFAMETHOXAZOLE	RES	N		10342-4

SS-A/Ro and SS-B/La, IgG (Mayo SSAB) (99242)

Effective Date 12/1/2012

CPT(s): 86235 x 2

Expiration Date:

Billing No: 99242

Interface Code: M82403

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81360A	SS-A/Ro Ab, IgG	RES	N		33610-7
81359A	SS-B/La Ab, IgG	RES	N		33613-1

Acylcarnitines, Quant (Mayo ACRN) (98350)

Effective Date 12/1/2012

CPT(s): 82017

Expiration Date:

Billing No: 98350

Interface Code: M82413

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82413A	ACYLCARNITINES, QUANTITATIVE	RES	N		46252-3
82413B	ACETYLCARNITINE, C2	RES	N	nmol/mL	30191-1
8241EE	ACRYLYCARNITINE C3:1	PRFLX	N	nmol/mL	IP
82413C	PROPIONYLCARNITINE, C3	RES	N	nmol/mL	30551-6
8241FF	FORMIMINOGLUTAMATE, FIGLU	PRFLX	N	nmol/mL	IP
82413D	ISO-/BUTYRYLCARNITINE, C4	RES	N	nmol/mL	43243-5
8241GG	TIGLYLCARNITINE, C5:1	PRFLX	N	nmol/mL	IP
82413E	ISOVALERYL-/2-METHYLBUTYRYLCARN, C5	RES	N	nmol/mL	30531-8
8241HH	3-OH-ISO-/BUTYRLCARNITINE, C4OH	PRFLX	N	nmol/mL	IP
8241II	HEXENOYLCARNITINE, C6:1	PRFLX	N	nmol/mL	IP
82413F	HEXANOYLCARNITINE, C6	RES	N	nmol/mL	30358-6
8241JJ	3-OH-ISOVALERYLCARNITINE, C5-OH	PRFLX	N	nmol/mL	IP
8241KK	BENZOYLCARNITINE	PRFLX	N	nmol/mL	IP
8241LL	HEPATANOYLCARNITINE,C7	PRFLX	N	nmol/mL	IP
82413G	3-OH-HEXANOYLCARNITINE, C6-OH	RES	N	nmol/mL	30236-4
8241MM	PHENYLACETYLCARNITINE	PRFLX	N	nmol/mL	IP
8241NN	SALICYLCARNITINE	PRFLX	N	nmol/mL	IP
82413H	OCTENOYLCARNITINE, C8:1	RES	N	nmol/mL	30541-7
82413I	OCTANOYLCARNITINE, C8	RES	N	nmol/mL	30540-9
8241OO	MALONYLCARNITINE, C3-DC	PRFLX	N	nmol/mL	IP

8241PP	DECADIENOYLCARNITINE, C10:2	PRFLX	N	nmol/mL	IP
82413J	DECENOYLCARNITINE, C10:1	RES	N	nmol/mL	30328-9
82413K	DECANOYLCARNITINE, C10	RES	N	nmol/mL	30327-1
8241QQ	METHYLMALONYL/SUCCINYLCARN,C4-DC	PRFLX	N	nmol/mL	IP
8241RR	3-OH-DECENOYLCARNITINE, C10:1-OH	PRFLX	N	nmol/mL	IP
82413L	GLUTARYLCARNITINE, C5-DC	RES	N	nmol/mL	30349-5
82413M	DODECENOYLCARNITINE, C12:1	RES	N	nmol/mL	30332-1
82413N	DODECANOYLCARNITINE, C12	RES	N	nmol/mL	30331-3
8241SS	3-METHYLGLUTARYLCARNITINE, C6-DC	PRFLX	N	nmol/mL	IP
8241TT	3-OH-DODECENOYLCARNITINE C12:1-OH	PRFLX	N	nmol/mL	IP
82413O	3-OH-DODECANOYLCARNITINE, C12-OH	RES	N	nmol/mL	30233-1
82413P	TETRADECADIENOYLCARNITINE, C14:2	RES	N	nmol/mL	30564-9
82413Q	TETRADECENOYLCARNITINE, C14:1	RES	N	nmol/mL	30566-4
82413R	TETRADECANOYLCARNITINE, C14	RES	N	nmol/mL	30565-6
8241UU	OCTANEDIOYLCARNITINE,C8-DC	PRFLX	N	nmol/mL	IP
82413S	3-OH-TETRADECENOYLCARNITINE, C14:1OH	RES	N	nmol/mL	30190-3
82413T	3-OH-TETRADECANOYLCARNITINE, C14-OH	RES	N	nmol/mL	30238-0
82413U	HEXADECENOYLCARNITINE, C16:1	RES	N	nmol/mL	30357-8
82413V	HEXADECANOYLCARNITINE, C16	RES	N	nmol/mL	30356-0
82413W	3-OH-HEXADECENOYLCARNITINE, C16:1-OH	RES	N	nmol/mL	30235-6
82413X	3-OH-HEXADECANOYLCARNITINE, C16-OH	RES	N	nmol/mL	30234-9
82413Y	OCTADECADIENOYLCARNITINE, C18:2	RES	N	nmol/mL	30534-2
82413Z	OCTADECENOYLCARNITINE, C18:1	RES	N	nmol/mL	30542-5

8241AA	OCTADECANOYLCARNITINE, C 18	RES	N	nmol/mL	30560-7
8241VV	DODECANEDIOYLCARNITINE, C12-DC	PRFLX	N	nmol/mL	IP
8241BB	3-OH-OCTADECADIENOYLCARN, C18:2-OH	RES	N	nmol/mL	30237-2
8241CC	3-OH-OCTADECENOYLCARNITINE, C18:1-OH	RES	N	nmol/mL	30312-3
8241WW	3-OH-OCTADECANOYLCARNITINE, C18-OH	PRFLX	N	nmol/mL	IP
8241DD	ACRN COMMENT:	RES	N		48767-8

Nicotine and Metabolites (Mayo NICOS) (97900)

Effective Date 1/1/2015

CPT(s): 80323

Expiration Date:

Billing No: 97900

Interface Code: M82509

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82509A	NICOTINE	RES	N	ng/mL	3853-9
82509B	COTININE	RES	N	ng/mL	10365-5

Wheat, IgE (Mayo WHT) (97950)

Effective Date 12/1/2012

CPT(s): 86003

Expiration Date:

Billing No: 97950

Interface Code: M82686

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83345B	WHEAT, IgE	RES	N	kU/L	6276-0

Hemoglobin F Red Cell Distribution (Mayo HPFH) (99532)

Effective Date 3/27/2014

CPT(s): 88184

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 99532

Interface Code: M8270 Orderable and Reflex for M84158, M81626; May Reflex XHBF.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81664D	HEMOGLOBIN F, RED CELL DISTRIB.	RES	N		4579-9
81664E	INTERPRETATION	RES	N		59466-3

Latex, IgE (Mayo LATX) (97210)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 97210

Interface Code: M82787

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82787A	LATEX, IGE	RES	N	kU/L	6158-0

Angiotensin Converting Enzyme (ACE), Serum (Mayo ACE) (90300)

Effective Date 12/1/2012

CPT(s): 82164

Expiration Date:

Billing No: 90300

Interface Code: M8285

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
8285A	ANGIOTENSIN CONVERTING ENZYME, S	RES	N		2742-5

Milk, IgE (Mayo MILK) (97930)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 97930

Interface Code: M82871

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
83345A	MILK, IgE	RES	N	kU/L	7258-7

Egg White, IgE (Mayo EGG) (98010)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 98010

Interface Code: M82872

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
83346A	EGG WHITE, IgE	RES	N	kU/L	6106-9

Soybean, IgE (Mayo SOY) (98020)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 98020

Interface Code: M82886

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
83345C	SOYBEAN, IgE	RES	N	kU/L	6248-9

Peanut, IgE (Mayo PEAN) (98030)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 98030

Interface Code: M82888

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
82888A	PEANUT, IgE	RES	N	kU/L	6206-7

Codfish, IgE (Mayo COD) (99555)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 99555

Interface Code: M82889

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82889A	CODFISH, IgE	RES	N	kU/L	6082-2

Timothy Grass, IgE (Mayo TIMG) (99033)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 99033

Interface Code: M82891

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83346B	TIMOTHY GRASS, IgE	RES	N	kU/L	6265-3

Phospholipid Ab (Cardiolipin) IgG, IgM (Mayo CLPMG) (92730)

Effective Date 7/9/2014

CPT(s): 86147 x 2

Expiration Date:

Billing No: 92730

Interface Code: M82976

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80993A	PHOSPHOLIPID AB, IgG	RES	N		3286-2
81900A	PHOSPHOLIPID AB, IgM	RES	N		3287-0

Metanephrines, Fractionated, Random (Mayo METAR) (92490)

Effective Date 12/1/2012

CPT(s): 83835

Expiration Date:

Billing No: 92490

Interface Code: M83005

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83005A	CREATININE CONC.	RES	N		2161-8
83005B	METANEPHRINE/CREATININE	RES	N		35644-4
83005C	NORMETANEPHRINE/CREATININE	RES	N		44342-4
83005D	TOTAL METANEPHRINE/CREATININE	RES	N		32655-3

Metanephrines, Fractionated, 24 hr, Urine (Mayo METAF) (92480)

Effective Date 2/23/2015

CPT(s): 83835

Expiration Date:

Billing No: 92480

Interface Code: M83006

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR2	COLLECTION DURATION	AOE	Y			TEXT		
MVOL2	URINE VOLUME	AOE	Y			TEXT		
83006A	METANEPHRINE, U	RES	N		19049-6			
83006B	NORMETANEPHRINE, U	RES	N		2671-6			
83006C	TOTAL METANEPHRINES	RES	N		2609-6			
83006D	COLLECTION DURATION	RES	N	hours	13362-9			
83006E	URINE VOLUME	RES	N		3167-4			
83006F	COMMENT	RES	N		48767-8			

Saccharomyces Cerevisiae Ab, IgA (Mayo AASCA) (99019)

Effective Date 9/3/2014

CPT(s): 86671

Expiration Date:

Billing No: 99019

Interface Code: M83022

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81443A	S. CEREVISIAE AB, IgA	RES	N		47320-7

Saccharomyces Cerevisiae Ab, IgG (Mayo GASCA) (99052)

Effective Date 9/3/2014

CPT(s): 86671

Expiration Date:

Billing No: 99052

Interface Code: M83023

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81443B	S. CEREVISIAE AB, IgG	RES	N		47321-5

Protein S Antigen (Mayo PSTF) (99765)

Effective Date 12/1/2012

CPT(s): 85306

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99765

Interface Code: M83049 May Reflex M80994

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83049A	PROTEIN S ANTIGEN, FREE	RES	N		27821-8

Lupus Anticoagulant Profile (Mayo LUPPR) (90550)

Effective Date 12/1/2012

CPT(s): 85610, 85613, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90550

Interface Code: M83092 May Reflex M9053, M9118, M8866, M9078, M9121, M9054, M9055, M9070, M9065, M9066, M9067, M9069, M82756, M7289, M7288, M80343, M6625, M9059, M6600, M32467, M32468, M32517

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550A	PROTHROMBIN TIME (PT)	RES	N	s	5902-2
550B	INR	RES	N		6301-6
550D	ACTIVATED PART. THROM. TIME	RES	N	s	14979-9
550H	DRVVT SCREEN RATIO	RES	N	ratio	15359-3
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

Thrombophilia Profile (Mayo THRMP) (90527)

Effective Date 11/27/2013

CPT(s): 81240, 85300, 85303, 85306, 85307, 85366, 85379, 85384, 85390, 85610, 85613, 85670, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90527

Interface Code: M83093 May Reflex M9053, M9118, M8866, M9078, M80775, M80994, M9127, M9031, M81419, M9121, M9054, M9055, M9070, M9065, M9066, M9067, M9069, M82756, M9079, M7289, M7288, M32467, M32468

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550A	PROTHROMBIN TIME (PT)	RES	N	s	5902-2
550B	INR	RES	N		6301-6
550D	ACTIVATED PART. THROM. TIME	RES	N	s	14979-9
550H	DRVVT SCREEN RATIO	RES	N	ratio	15359-3
550K	THROMBIN TIME (BOVINE)	RES	N	s	46717-5
80343A	FIBRINOGEN	RES	N	mg/dL	3255-7
83093A	FIBRINOGEN EQUIV UNITS (FEU)	RES	N	mcg/mL FEU	69049-5
550M	D-DIMER UNITS (DDU)	RES	N	ng/mL DDU	
83093B	SOLUBLE FIBRIN MONOMER	RES	N	mcg/mL	40702-3
550P	ANTITHROMBIN ACTIVITY	RES	N	%	27811-9
550O	PROTEIN C ACTIVITY	RES	N	%	27818-4
83049A	PROTEIN S ANTIGEN, FREE	RES	N	%	27821-8
81742G	PROTHROMBIN G20210A MUTATION	RES	N		24475-6
81742H	PTNT INTERPRETATION	RES	N		69049-5
81742J	PTNT REVIEWED BY:	RES	N		
81967C	APCRV RATIO	RES	N		13590-5
81967D	APCRV INTERPRETATION	RES	N		
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

Bleeding Diathesis Prof, Limited (Mayo BDIAL) (90359)

Effective Date 12/1/2012

CPT(s): 85390, 85240, 85246, 85397, 85291, 85610, 85379, 85366, 85384, 85670, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90359

Interface Code: M83094 May Reflex M9053, M9118, M8866, M9078, M9121, M9054, M9055, M9065, M9066, M9067, M9069, M82756, M7289, M7288, M80340, M9046, M31046, M7806, M7808, M7810, M7802, M7812, M7804, M9084, M32467, M32468

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550A	PROTHROMBIN TIME (PT)	RES	N	s	5902-2
550B	INR	RES	N		6301-6
550D	ACTIVATED PART. THROM. TIME	RES	N	s	14979-9
550K	THROMBIN TIME (BOVINE)	RES	N	s	46717-5
83093A	FIBRINOGEN EQUIV UNITS (FEU)	RES	N	mcg/mL FEU	69049-5
550M	D-DIMER UNITS (DDU)	RES	N	ng/mL DDU	48066-5
83093B	SOLUBLE FIBRIN MONOMER	RES	N	mcg/mL	40702-3
80343A	FIBRINOGEN	RES	N	mg/dL	3255-7
9070A	COAG FACTOR VIII ACT. ASSAY	RES	N	%	3209-4
9051A	VON WILLEBRAND FACTOR AG	RES	N	%	27816-8
83094A	VON WILLEBRAND FACTOR ACT.	RES	N	%	68324-3
9068A	FACTOR XIII SCREEN	RES	N		
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

Prolonged Clot Time Profile (Mayo PROCT) (90551)

Effective Date 12/1/2012

CPT(s): 80500, 85379, 85366, 85384, 85610, 85613, 85670, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90551

Interface Code: M83097 May Reflex M9053, M9118, M8866, M9078, M9121, M9054, M9055, M9070, M9065, M9066, M9067, M9069, M82756, M7289, M7288, M32467, M32468

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550A	PROTHROMBIN TIME (PT)	RES	N	s	5902-2
550B	INR	RES	N		6301-6
550D	ACTIVATED PART. THROM. TIME	RES	N	s	14979-9
550H	DRVVT SCREEN RATIO	RES	N	ratio	15359-3
550K	THROMBIN TIME (BOVINE)	RES	N	s	46717-5
80343A	FIBRINOGEN	RES	N	mg/dL	3255-7
83093A	FIBRINOGEN EQUIV UNITS (FEU)	RES	N	mcg/mL FEU	69049-5
550M	D-DIMER UNITS (DDU)	RES	N	ng/mL DDU	
83093B	SOLUBLE FIBRIN MONOMER	RES	N	mcg/mL	40702-3
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

von Willebrand Profile (Mayo VWPR) (90552)

Effective Date 12/1/2012

CPT(s): 85246, 85397, 85240

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90552

Interface Code: M83099 May Reflex M7289, M7288, M9046, M31046, M32517

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9070A	COAG FACTOR VIII ACT. ASSAY	RES	N	%	3209-4
9051A	VON WILLEBRAND FACTOR AG	RES	N	%	27816-8
83094A	VON WILLEBRAND FACTOR ACT.	RES	N	%	68324-3
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

Fat, Feces, Random or Timed Collection (Mayo FATF) (98410)

Effective Date 12/1/2012

CPT(s): 82710

Expiration Date:

Billing No: 98410

Interface Code: M8310

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR20	COLLECTION DURATION	AOE	Y			TEXT		
8310A	TOTAL WEIGHT	RES	N		30078-0			
8310B	DURATION	RES	N		13363-7			
83634B	% FAT	RES	N					
8310C	TOTAL FAT	RES	N		16142-2			

Factor VIII Inhibitor Eval (Mayo F8INH) (90553)

Effective Date 12/1/2012

CPT(s): 85240

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90553

Interface Code: M83102 May Reflex M7289, M7288, M82539

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9070A	COAG FACTOR VIII ACT. ASSAY	RES	N	%	3209-4

Hepatitis Be Antigen + Antibody (HBeAg + Anti-HBe), Serum (Mayo HEAG) (91600)

Effective Date 12/1/2012

CPT(s): 86707, 87350

Expiration Date:

Billing No: 91600

Interface Code: M8311

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8311A	HEPATITIS BE AG (HBEAG)	RES	N		13954-3
8311B	HEPATITIS BE AB (HBEAB)	RES	N		IP

Levetiracetam (Keppra), Serum (Mayo LEVE) (92120)

Effective Date 1/2/2014

CPT(s): 80299

Expiration Date:

Billing No: 92120

Interface Code: M83140

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83140A	LEVETIRACETAM, S	RES	N		30471-7

Hepatitis C Virus (HCV) Detect/Quant by RT-PCR (Mayo HCVQU) (91640)

Effective Date 1/21/2014

CPT(s): 87522

Expiration Date:

Billing No: 91640

Interface Code: M83142

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83142A	HCV RNA DETECT/QUANT,S	RES	N		11011-4

Q Fever Antibodies, IgG and IgM (Mayo QFP) (94540)

Effective Date 12/1/2012

CPT(s): 86638 x 2

Expiration Date:

Billing No: 94540

Interface Code: M83149

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80965A	Q FEVER PHASE I AB, IgG	RES	N		34716-1
80965B	Q FEVER PHASE II AB, IgG	RES	N		34714-9
81115A	Q FEVER PHASE I AB, IgM	RES	N		9710-5
81115B	Q FEVER PHASE II AB, IgM	RES	N		9711-3
81115C	Q FEVER AB INTERP	RES	N		59464-8

Streptococcus pneumoniae Ag (Mayo SPNEU) (99672)

Effective Date 1/1/2013

CPT(s): 87899

Expiration Date:

Billing No: 99672

Interface Code: M83150

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83150A	STREPTOCOCCUS PNEUMONIAE AG	RES	N		24027-5

Parvovirus B19 by Rapid PCR, Fluid (Mayo PARVO) (94880)

Effective Date 11/4/2009

CPT(s): 87798

Expiration Date:

Billing No: 94880

Interface Code: M83151

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR12	SOURCE	AOE	Y			TEXT		
83151A	PARVOVIRUS B19 by Rapid PCR	RES	N		9571-1			
83151B	SOURCE	RES	N		31208-2			

Haemophilus Influenzae B Ab, IgG (Mayo HIBS) (97700)

Effective Date 12/1/2012

CPT(s): 86684

Expiration Date:

Billing No: 97700

Interface Code: M83261

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83261A	HAEMOPHILUS INFLUENZAE B, AB IgG	RES	N		11257-3

Tick-Borne Ab Panel (Mayo TICKS) (99388)

Effective Date 12/1/2012

CPT(s): 86618, 86666 x 2, 86753

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99388

Interface Code: M83265 May Reflex M9535

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81480B	EHRLICHIA CHAFFEENSIS (HME) AB, IgG	RES	N		47405-6
81480A	ANAPLASMA PHAGOCYTOPHILUM AB, IgG	RES	N		23877-4
83265A	BABESIA MICROTI IgG AB	RES	N		16117-4
82516A	LYME DISEASE SEROLOGY, S	RES	N		20449-5

HRLV-1/11 Ab Confirmation (Mayo HTLVL) (95180)

Effective Date 12/1/2012

CPT(s): 86689

Expiration Date:

Billing No: 95180

Interface Code: M83277

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83277A	HTLV-I/II AB, CONFIRMATION	RES	N		22362-8
83277B	HTLV-I/II BANDS	RES	N		
83277C	HTLV-I/II DISCRIMINATION	RES	N		

Galactose-1-Phosphate Uridyltransferase RBC (Mayo GALT) (92437)

Effective Date 12/1/2012

CPT(s): 82775

Expiration Date:

Billing No: 92437

Interface Code: M8333 Orderable and Reflex for M80341

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8333A	GAL-1-P URIDYLTRANSFERASE RBC	RES	N	U/g Hb	24082-0
8333B	GAL-1-P URIDYLTRANSFERASE COMMENT	RES	N		59462-2
GALT1	REVIEWED BY:	RES	N		

Hemoglobin A2 and F (Mayo A2F) (95970)

Effective Date 10/8/2013

CPT(s): 83021

Expiration Date:

Billing No: 95970

Interface Code: M83341

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83341A	Hb A2	RES	N		4551-8
83341B	Hb F	RES	N		4576-5

Pediatric Allergy Screen, <3 Years (Mayo PAS3) (98160)

Effective Date 12/1/2012

CPT(s): 86003 x 5

Expiration Date:

Billing No: 98160

Interface Code: M83345

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83346A	EGG WHITE, IgE	RES	N	kU/L	6106-9
83345A	MILK, IgE	RES	N	kU/L	7258-7
83345B	WHEAT, IgE	RES	N	kU/L	6276-0
83345C	SOYBEAN, IgE	RES	N	kU/L	6248-9
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4

Pediatric Allergy Screen, 3-8 Years (Mayo PAS38) (99098)

Effective Date 12/1/2012

CPT(s): 86003 x 6

Expiration Date:

Billing No: 99098

Interface Code: M83346

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83346A	EGG WHITE, IgE	RES	N	kU/L	6106-9
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4
83346B	TIMOTHY GRASS, IgE	RES	N	kU/L	6265-3
83720M	SHORT RAGWEED, IgE	RES	N	kU/L	6085-5
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2

Pediatric Allergy Screen, >8 Years (Mayo PAS8) (99119)

Effective Date 12/1/2012

CPT(s): 86003 x 5

Expiration Date:

Billing No: 99119

Interface Code: M83347

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4
83720M	SHORT RAGWEED, IgE	RES	N	kU/L	6085-5
83346B	TIMOTHY GRASS, IgE	RES	N	kU/L	6265-3
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2

Myasthenia Gravis (Mayo MGEA) (96190)

Effective Date 6/18/2014

CPT(s): 83519 x 2, 83520

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 96190

Interface Code: M83370 May Reflex M83107, M84321, M89165, M81596

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8338A	ACH RECEP.(MUSCLE) BIND.AB	RES	N		11034-6
83378A	ACh RECEPTOR (MUSCLE) MODULATING AB	RES	N		30192-9
8746A	STRIATIONAL (STRIATED MUSCLE) AB	RES	N		8097-8

C1Q Complement, Functional, Ser (Mayo C1QFX) (95230)

Effective Date 7/9/2015

CPT(s): 86161

Expiration Date:

Billing No: 95230

Interface Code: M83374

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83374A	C1Q COMPLEMENT, FUNCTIONAL	RES	N	U/mL	

Acetylcholine Receptor (AChR) Binding Ab, Serum (Mayo ARBI) (90020)

Effective Date 6/18/2014

CPT(s): 83519

Expiration Date:

Billing No: 90020

Interface Code: M8338

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8338A	ACH RECEP.(MUSCLE) BIND.AB	RES	N		11034-6

Paraneoplastic Autoantibody Evaluation (Mayo PAVAL) (93620)

Effective Date 6/30/2014

CPT(s): 83520, 86256 x 9, 83519 x 5

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93620

Interface Code: M83380 May Reflex M83108, M83107, M81596, M83378, M89381, XNMOCS, XNMDCS, XAMPCS, XGABCS, XNMDIS, XAMPIS, XGABIS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83380A	ANTI-NEURONAL NUCLEAR AB, TYPE 1	RES	N	titer	13997-2
83380B	ANTI-NEURONAL NUCLEAR AB, TYPE 2	RES	N	titer	43188-2
83380C	ANTI-NEURONAL NUCLEAR AB, TYPE 3	RES	N	titer	33924-2
83380K	AGNA-1	RES	N	titer	53709-2
83380D	PURKINJE CELL CYTOPLASMIC AB, TYPE 1	RES	N	titer	53717-5
83380E	PURKINJE CELL CYTOPLASMIC AB, TYPE 2	RES	N	titer	33925-9
83380F	PURKINJE CELL CYTOPLASMIC AB, TYPE TR	RES	N	titer	33926-7
83380G	AMPHIPHYSIN AB	RES	N	titer	33927-5
83380H	CRMP-5-IgG	RES	N	titer	35386-2
8746A	STRIATIONAL (STRIATED MUSCLE) AB	RES	N	titer	8097-8
83380I	P/Q-TYPE CALCIUM CHANNEL AB	RES	N	nmol/L	33980-4
83380J	CALCIUM CHANNEL BIN AB, N-TYPE	RES	N	nmol/L	33979-6
8338A	ACH RECEP.(MUSCLE) BIND.AB	RES	N	nmol/L	11034-6
84321A	AChR GANGLIONIC NEURONAL AB	RES	N	nmol/L	42233-7
83380L	NEURONAL VGKC-AB	RES	N	nmol/L	41871-5
83380M	INTERPRETIVE COMMENTS	RES	N		69048-7
PAVAL1	REFLEX ADDED	RES	N		

Chromogranin A (Mayo CGAK) (99142)

Effective Date 12/29/2014

CPT(s): 86316

Expiration Date:

Billing No: 99142

Interface Code: M83559

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83559A	CHROMOGRANIN A	RES	N		9811-1

Aldolase, Serum (Mayo ALS) (90080)

Effective Date 12/1/2012

CPT(s): 82085

Expiration Date:

Billing No: 90080

Interface Code: M8363

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8363A	ALDOLASE	RES	N		1761-6

Connective Tissue Disease Cascade (Mayo CTDC) (94850)

Effective Date 5/29/2015
Expiration Date:

CPT(s): 86200, 86038

Additional CPTs will be billed when appropriate.

Billing No: 94850

Interface Code: M83631 May Reflex M9278, M7586, M89035, M87837, XADNAR, XCRITH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9026A	ANTINUCLEAR AB (ANA)	RES	N		5047-6
84182A	CYCLIC CITRULLINATED PEPTIDE AB	RES	N		32218-0
83631A	CTDC INTERPRETATION	RES	N		

Pernicious Anemia Cascade (Mayo ACASM) (99709)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 82607

Additional CPTs will be billed when appropriate.

Billing No: 99709

Interface Code: M83632 May Reflex XIFBPA, XMMAPA, XGASTR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83632A	VITAMIN B12 ASSAY	RES	N	ng/L	2132-9

Streptococcus pneumoniae IgG AB, 23 Serotypes, serum (Mayo PN23) (94990)

Effective Date 12/1/2012

CPT(s): 86317 x 23

Expiration Date:

Billing No: 94990

Interface Code: M83640

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83640A	SEROTYPE 1 (1)	RES	N		27092-6
83640B	SEROTYPE 2 (2)	RES	N		40964-9
83640C	SEROTYPE 3 (3)	RES	N		27096-7
83640D	SEROTYPE 4 (4)	RES	N		27094-2
83640E	SEROTYPE 5 (5)	RES	N		31183-7
83640F	SEROTYPE 8 (8)	RES	N		27113-0
83640G	SEROTYPE 9N (9)	RES	N		27392-0
83640H	SEROTYPE 12F (12)	RES	N		27374-8
83640I	SEROTYPE 14 (14)	RES	N		27387-0
83640J	SEROTYPE 17F (17)	RES	N		40963-1
83640K	SEROTYPE 19F (19)	RES	N		27390-4
83640L	SEROTYPE 20 (20)	RES	N		40965-6
83640M	SEROTYPE 22F (22)	RES	N		40966-4
83640N	SEROTYPE 23F (23)	RES	N		27389-6
83640O	SEROTYPE 6B (26)	RES	N		27118-9
83640P	SEROTYPE 10A (34)	RES	N		40967-2
83640Q	SEROTYPE 11A (43)	RES	N		40968-0
83640R	SEROTYPE 7F (51)	RES	N		25296-5
83640S	SEROTYPE 15B (54)	RES	N		40973-0
83640T	SEROTYPE 18C (56)	RES	N		27395-3
83640U	SEROTYPE 19A (57)	RES	N		40974-8
83640V	SEROTYPE 9V (68)	RES	N		30153-1
83640W	SEROTYPE 33F (70)	RES	N		40969-8

Cryoglobulin, Panel (Mayo CRGSP) (99503)

Effective Date 12/1/2012

CPT(s): 82585, 82595

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99503

Interface Code: M83659 Includes plasma and serum cryoglobulin and cryofibrinogen; May Reflex M28265

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9052B	CRYOGLOBULIN, S	RES	N		15174-6
9052C	CRYOFIBRINOGEN, P	RES	N		11043-7

Tissue Transglut. AB, IgG (Mayo TTGG) (92859)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 92859

Interface Code: M83660 Orderable and Reflex for XCDSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TTGG1	TISSUE TRANSGLUT. AB, IgG	RES	N	U/mL	56537-4

Spotted Fever Group Ab, IgG + IgM (Mayo SFGP) (93920)

Effective Date 12/1/2012

CPT(s): 86757 x 2

Expiration Date:

Billing No: 93920

Interface Code: M83679

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84343A	SPOTTED FEVER GROUP AB, IgG	RES	N		5313-2
84343B	SPOTTED FEVER GROUP AB, IgM	RES	N		5315-7

Glucose 6 Phosphate Dehydrogenase (Mayo G6PD) (95330)

Effective Date 4/23/2013

CPT(s): 82955

Expiration Date:

Billing No: 95330

Interface Code: M8368

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8368A	G-6-PD, QN, RBC	RES	N	U/g Hb	32546-4

Zonisamide (Mayo ZONI) (95370)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 95370

Interface Code: M83685

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83685A	ZONISAMIDE	RES	N		29620-2

ZAP-70 (Mayo ZAP70) (99622)

Effective Date 1/1/2015

CPT(s): 88184, 88185 x 2

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99622

Interface Code: M83727

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPE24	SPECIMEN:	AOE	Y			TEXT		
83727A	ACCESSION NUMBER:	RES	N		NA			
83727B	REFERRING PATHOLOGIST/PHYS:	RES	N		46608-6			
83727C	REF. PATH ADDRESS:	RES	N		74221-3			
83727D	MATERIAL:	RES	N		NA			
83727E	SPECIMEN:	RES	N		31208-2			
83727F	BONE MARROW DIFFERENTIAL:	RES	N		47286-0			
83727G	PERIPHERAL BLOOD:	RES	N		NA			
83727H	ASPIRATE:	RES	N		NA			
83727I	BIOPSY:	RES	N		52121-1			
83727J	MICROSCOPIC DESCRIPTION:	RES	N		NA			
83727K	SPECIAL STAINS:	RES	N		NA			
83727L	FINAL DIAGNOSIS:	RES	N		22637-3			
83727M	COMMENT:	RES	N		48767-8			
83727N	REVISION DESCRIPTION:	RES	N		NA			
83727O	SIGNING PATHOLOGIST:	RES	N		19139-5			
83727P	SPECIAL PROCEDURES:	RES	N		NA			
83727Q	SP SIGNING PATHOLOGIST:	RES	N		19139-5			
83727R	*PREVIOUS REPORT FOLLOWS*	RES	N		NA			
83727S	ADDENDUM:	RES	N		35265-8			
83727T	ADDENDUM COMMENT:	RES	N		22638-1			
83727U	ADDENDUM PATHOLOGIST:	RES	N		19139-5			

Parietal Cell Antibody IgG (Mayo PCAB) (96840)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 96840

Interface Code: M83728

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83728A	PARIETAL CELL AB, IgG	RES	N		40960-7

Aluminum, Serum (Mayo AL) (95680)

Effective Date 12/1/2012

CPT(s): 82108

Expiration Date:

Billing No: 95680

Interface Code: M8373

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8373A	ALUMINUM, SERUM	RES	N		5574-9

Histoplasma Ab Screen (Mayo HISTO) (99394)

Effective Date 12/1/2012

CPT(s): 86698

Expiration Date:

Billing No: 99394

Interface Code: M83853 May Reflex M26692

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83853A	HISTOPLASMA AB SCREEN	RES	N		44522-1

Bilirubin (Amniotic Fluid) (Mayo AFBIL) (90480)

Effective Date 11/7/2012

CPT(s): 82247

Expiration Date:

Billing No: 90480

Interface Code: M8390

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MGEST	GESTATION (weeks)	AOE	Y			TEXT		
8390B	AMNIOTIC FLUID	RES	N	delta OD	12476-8			
8390E	OTHER INFORMATION	RES	N					
8390F	GESTATION	RES	N	wk	18185-9			

UGT1A1 TA Repeat Genotype (Mayo U1A1) (99809)

Effective Date 3/22/2013

CPT(s): 81350

Expiration Date:

Billing No: 99809

Interface Code: M83949

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83949A	TA/TA	RES	N		41044-9
83949B	UGT1A1 TA REPEAT GENOTYPE	RES	N		IP
83949C	REVIEWED BY:	RES	N		NA

Adrenocorticotropic Hormone (ACTH), Plasma (Mayo ACTH) (90060)

Effective Date 12/1/2012

CPT(s): 82024

Expiration Date:

Billing No: 90060

Interface Code: M8411

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8411A	ACTH, PLASMA	RES	N		2141-0

Thalassemia and Hemoglobinopathy Evaluation (Mayo THEVP) (99005)

Effective Date 12/1/2012

CPT(s): 82728, 83020, 83021

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99005

Interface Code: M84158 May Reflex M9180, M9095, M81644, M8270, M31032, M29374, M60286

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84158A	HEMOGLOBINOPATHY INTERPRETATION	RES	N		59466-3
83341A	Hb A2	RES	N		4551-8
83341B	Hb F	RES	N		4576-5
81626A	Hb A	RES	N		20572-4
81626B	VARIANT	RES	N		32017-6
81626F	VARIANT 2	RES	N		IP
81626G	VARIANT 3	RES	N		IP
81626C	INTERPRETATION	RES	N		49316-3
84158B	FERRITIN	RES	N		20567-4

Immunoglobulin Free Light Chains (Mayo FLCP) (99171)

Effective Date 12/1/2012

CPT(s): 83883 x 2

Expiration Date:

Billing No: 99171

Interface Code: M84190

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84190A	KAPPA FREE LIGHT CHAINS	RES	N		36916-5
84190B	LAMBDA FREE LIGHT CHAINS	RES	N		33944-0
84190C	KAPPA/LAMBDA FLC RATIO	RES	N		48378-4

Cortisol, Saliva (Mayo SALCT) (99107)

Effective Date 1/1/2013

CPT(s): 82533

Expiration Date:

Billing No: 99107

Interface Code: M84225

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84225A	CORTISOL, SALIVA	RES	N	ng/dL	2142-8
84225B	AM CORTISOL	RES	N	ng/dL	58674-3
84225C	PM CORTISOL	RES	N	ng/dL	58676-8
84225D	MIDNIGHT CORTISOL	RES	N	ng/dL	58642-0

Estrogens (E1 + E2), Fractionated (Mayo ESTF) (97420)

Effective Date 12/1/2012

CPT(s): 82679, 82670

Expiration Date:

Billing No: 97420

Interface Code: M84230

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81418A	ESTRONE	RES	N		2258-2
81816A	ESTRADIOL, ENHANCED	RES	N		2243-4

Soluble Transferrin Receptor (sTfR) (Mayo STFR) (99172)

Effective Date 12/1/2012

CPT(s): 84238

Expiration Date:

Billing No: 99172

Interface Code: M84283

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84283A	TRANSFERRIN RECEPTOR (sTfR)	RES	N		30248-9

NT-Pro BNP (Mayo PBNP) (99347)

Effective Date 12/1/2012

CPT(s): 83880

Expiration Date:

Billing No: 99347

Interface Code: M84291

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84291A	NT-PRO BNP	RES	N	pg/mL	33762-6

Parvovirus B19 Antibodies, IgG + IgM, Serum (Mayo PARV) (92720)

Effective Date 12/1/2012

CPT(s): 86747 x 2

Expiration Date:

Billing No: 92720

Interface Code: M84325

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84325A	PARVOVIRUS B19 AB,IGG	RES	N		7983-0
84325B	PARVOVIRUS B19 AB,IGM	RES	N		7984-8
84325C	INTERPRETATION	RES	N		59464-8

CD4 T-Cell Count (Mayo TCD4) (93810)

Effective Date 7/24/2014

CPT(s): 86359, 86360

Expiration Date:

Billing No: 93810

Interface Code: M84348

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84348A	CD45 LYMPH COUNT,FLOW	RES	N		27071-0
84348B	% CD3 (T CELLS)	RES	N		8124-0
84348C	% CD4 (HELPER CELLS)	RES	N		8123-2
84348D	%CD8 (SUPP`R CELLS)	RES	N		8101-8
84348E	CD3 (T CELLS)	RES	N		8122-4
84348F	CD4 (HELPER CELLS)	RES	N		24467-3
84348G	CD8 (SUPP`R CELLS)	RES	N		14135-8
84348H	H/S/ RATIO	RES	N		54218-2

Serotonin, RBC (Mayo SERWB) (99511)

Effective Date 12/1/2012

CPT(s): 84260

Expiration Date:

Billing No: 99511

Interface Code: M84373

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84373A	SEROTONIN	RES	N		2939-7

Serotonin, Serum (Mayo SER) (94410)

Effective Date 12/1/2012

CPT(s): 84260

Expiration Date:

Billing No: 94410

Interface Code: M84395

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84395A	SEROTONIN	RES	N		27057-9

Herpes Simplex, HSV Types 1 and 2 AB, IgG and IgM, (Mayo HSV) (91780)

Effective Date 12/1/2012

CPT(s): 86694, 86695, 86696

Expiration Date:

Billing No: 91780

Interface Code: M84422 May Reflex M26589

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84422A	HSV TYPE 1 AB, IGG,S	RES	N		51916-5
84422B	HSV TYPE 2 AB, IGG,S	RES	N		43180-9
87998A	HSV AB, IgM, Screen	RES	N		40729-6

Herpes Simplex, HSV Types 1 and 2 AB, IgG (Mayo HSVG) (94580)

Effective Date 12/1/2012

CPT(s): 86695, 86696

Expiration Date:

Billing No: 94580

Interface Code: M84429

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84422A	HSV TYPE 1 AB, IGG,S	RES	N		51916-5
84422B	HSV TYPE 2 AB, IGG,S	RES	N		43180-9

Bartonella by Rapid PCR, Tissue (Mayo BARRP) (99131)

Effective Date 3/4/2013

CPT(s): 87798

Expiration Date:

Billing No: 99131

Interface Code: M84440

Result/AOE Code	Description	Type	Suppress	Units	LOINC	AOE Type	AOE List Codes	AOE List Code Descriptions
MSOR33	SPECIMEN SOURCE	AOE	Y			TEXT		
84440A	BARTONELLA SPECIMEN SOURCE	RES	N		31208-2			
84440B	BARTONELLA RESULT	RES	N		48864-3			

Lysozyme (Mayo MUR) (94160)

Effective Date 12/1/2012

CPT(s): 85549

Expiration Date:

Billing No: 94160

Interface Code: M8507

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8507A	LYSOZYME (MURAMIDASE)	RES	N		2589-0

Mycoplasma Pneumoniae Ab, IgG/IgM (Mayo MYCPN) (99771)

Effective Date 12/1/2012

CPT(s): 86738 x 2

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99771

Interface Code: M85107 May Reflex M29326

Result/AOE Code	Description	Type	Suppress	Units	LOINC
85107A	M. PNEUMONIAE AB, IgG	RES	N		5255-5
85107B	M. PNEUMONIAE AB, IgM	RES	N		5256-3

Gastrin, Serum (Mayo GAST) (91340)

Effective Date 12/1/2012

CPT(s): 82941

Expiration Date:

Billing No: 91340

Interface Code: M8512

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8512A	GASTRIN, S	RES	N		2333-3

Acetylcholinesterase, RBC (Mayo ACHS) (90710)

Effective Date 12/1/2012

CPT(s): 82482

Expiration Date:

Billing No: 90710

Interface Code: M8522

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8522A	ACETYLCHOLINESTERASE, RBC	RES	N		49230-6

Platelet Antibody (Indirect) (Mayo PLAB) (92780)

Effective Date 12/1/2012

CPT(s): 86022

Expiration Date:

Billing No: 92780

Interface Code: M8538

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8538A	PLATELET AB	RES	N		24375-8
8538B	COMMENT	RES	N		48767-8

Cortisol Free Urine (24 hr) (Mayo CORTU) (99816)

Effective Date 12/1/2012

CPT(s): 82530

Expiration Date:

Billing No: 99816

Interface Code: M8546

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR3	COLLECTION DURATION	AOE	Y			TEXT		
MVOL3	URINE VOLUME	AOE	Y			TEXT		
8546A	CORTISOL, URINE	RES	N		14158-0			
8546C	COLLECTION DURATION	RES	N	hours	13362-9			
8546D	URINE VOLUME	RES	N	mL	3167-4			

Aldosterone, Urine (Mayo ALDU) (90110)

Effective Date 12/1/2012

CPT(s): 82088

Expiration Date:

Billing No: 90110

Interface Code: M8556

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR12	COLLECTION DURATION	AOE	Y			TEXT		
MVOL12	URINE VOLUME	AOE	Y			TEXT		
8556A	ALDOSTERONE	RES	N		1765-7			
8556B	COLLECTION DURATION	RES	N	hours	13362-9			
8556C	URINE VOLUME	RES	N	mL	3167-4			

Aldosterone, Serum (Mayo ALDS) (90100)

Effective Date 12/1/2012

CPT(s): 82088

Expiration Date:

Billing No: 90100

Interface Code: M8557

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8557A	ALDOSTERONE	RES	N		1763-2

Porphyrins, Quant, Urine (Mayo PQNU) (92800)

Effective Date 12/1/2012

CPT(s): 84120, 84110

Expiration Date:

Billing No: 92800

Interface Code: M8562

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR14	COLLECTION DURATION	AOE	Y			TEXT		
MVOL14	URINE VOLUME	AOE	Y			TEXT		
8562B	COLLECTION DURATION	RES	N	hours	13362-9			
8562C	URINE VOLUME	RES	N	mL	3167-4			
8562D	UROPORPHYRIN, OCTA	RES	N		15096-1			
8562E	HEPTACARBOXYPORPHYRIN	RES	N		25434-2			
8562F	HEXACARBOXYPORPHYRIN	RES	N		25438-3			
8562G	PENTACARBOXYPORPHYRIN	RES	N		25494-6			
8562H	COPROPORPHYRIN, TETRA	RES	N		15041-7			
8562I	PORPHOBILINOGEN	RES	N		14882-5			
8562J	INTERPRETATION	RES	N		59462-2			

Hemosiderin, Urine (Mayo UHSD) (95380)

Effective Date 12/1/2012

CPT(s): 83070

Expiration Date:

Billing No: 95380

Interface Code: M8582

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8582A	HEMOSIDERIN	RES	N		4644-1
8582B	HEMOGLOBIN	RES	N		725-2
8582C	RBC	RES	N		13945-1

Mercury, 24 Hr Urine (Mayo HGU) (95140)

Effective Date 12/1/2012

CPT(s): 83825

Expiration Date:

Billing No: 95140

Interface Code: M8592

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR8	COLLECTION DURATION	AOE	Y			TEXT		
MVOL8	URINE VOLUME	AOE	Y			TEXT		
8592AA	MERCURY	RES	N		6693-6			
8592B	COLLECTION DURATION	RES	N	hours	13362-9			
8592C	URINE VOLUME	RES	N	mL	3167-4			
8592D	Hg CONC	RES	N	mcg/mL	21383-5			

Stone Analysis (Mayo CASA) (92140)

Effective Date 9/22/2014

CPT(s): 82365

Expiration Date:

Billing No: 92140

Interface Code: M8596

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
1	STONE SOURCE:	AOE	Y			TEXT		
8596A	STONE ANALYSIS	RES	N		40787-4			
8596B	STONE SOURCE:	RES	N		31208-2			
8596D	1ST. CONSTITUENT:	RES	N					
8596E	2ND CONSTITUENT:	RES	N					
8596F	3RD CONSTITUENT:	RES	N					
8596G	NIDUS, MAJOR	RES	N					
8596H	NIDUS, MINOR	RES	N					
8596I	SHELL, MAJOR	RES	N					
8596J	SHELL, MINOR	RES	N					
8596K	STONE COMMENT	RES	N		48767-8			

Lead, 24 Hr Urine (Mayo PBU) (95220)

Effective Date 12/1/2012

CPT(s): 83655

Expiration Date:

Billing No: 95220

Interface Code: M8600

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR9	COLLECTION DURATION	AOE	Y			TEXT		
MVOL9	URINE VOLUME	AOE	Y			TEXT		
8600A	LEAD, U	RES	N		5677-0			
8600B	COLLECTION DURATION	RES	N	hours	13362-9			
8600C	URINE VOLUME	RES	N	mL	3167-4			
8600D	Pb CONC (ug/L)	RES	N		20625-0			

Thallium, Urine (Mayo TLU) (95130)

Effective Date 7/3/2014

CPT(s): 83018

Expiration Date:

Billing No: 95130

Interface Code: M8603

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR10	COLLECTION DURATION	AOE	Y			TEXT		
MVOL10	URINE VOLUME	AOE	Y			TEXT		
8603A	THALLIUM	RES	N		5746-3			
8603B	COLLECTION DURATION	RES	N	hours	13362-9			
8603C	URINE VOLUME	RES	N	mL	3167-4			
8603D	Tl CONC	RES	N	mcg/mL	21558-2			

PAI-1 Antigen (Mayo PAI1) (99173)

Effective Date 12/11/2015

CPT(s): 85415

Expiration Date:

Billing No: 99173

Interface Code: M86083

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86083A	PAI-1 ANTIGEN	RES	N		22758-7

Copper, Serum (Mayo CUS) (96770)

Effective Date 12/1/2012

CPT(s): 82525

Expiration Date:

Billing No: 96770

Interface Code: M8612

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8612A	COPPER	RES	N		5631-7

Phospholipid Ab IgA (Mayo ACLIP) (99123)

Effective Date 7/31/2013

CPT(s): 86147

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 99123

Interface Code: M86179

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86179A	PHOSPHOLIPID AB IgA	RES	N		17459-9

Mercury, Blood (Mayo HG) (92460)

Effective Date 12/1/2012

CPT(s): 83825

Expiration Date:

Billing No: 92460

Interface Code: M8618

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8618A	MERCURY, B	RES	N		5685-3

Beta-2 Gp 1 Antibody IgM (Mayo MB2GP) (99197)

Effective Date 12/1/2012

CPT(s): 86146

Expiration Date:

Billing No: 99197

Interface Code: M86181

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86181A	BETA 2 GP1 AB, IgM	RES	N		44449-7

Beta-2 Gp 1 Antibody IgG (Mayo GB2GP) (99198)

Effective Date 12/1/2012

CPT(s): 86146

Expiration Date:

Billing No: 99198

Interface Code: M86182

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86182A	BETA 2 GP1 AB, IgG	RES	N		44448-9

West Nile Virus by Rapid PCR, CSF (Mayo LCWNV) (99425)

Effective Date 8/17/2015

CPT(s): 87798

Expiration Date:

Billing No: 99425

Interface Code: M86197

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR31	LCWNV SPECIMEN SOURCE	AOE	Y			TEXT		
86197A	LCWNV SPECIMEN SOURCE	RES	N		31208-2			
86197B	WEST NILE VIRUS PCR	RES	N		34461-4			

Zinc, Serum (Mayo ZNS) (94920)

Effective Date 12/1/2012

CPT(s): 84630

Expiration Date:

Billing No: 94920

Interface Code: M8620

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8620A	ZINC	RES	N		5763-8

Food Panel 2, IgE (Mayo FDP1) (99183)

Effective Date 2/8/2013

CPT(s): 86003

Expiration Date:

Billing No: 99183

Interface Code: M86207

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86207A	FOOD PANEL 2, IgE	RES	N		

Heavy Metals Screen, 24 Hr Urine (Mayo HMSU) (91520)

Effective Date 12/1/2012

CPT(s): 82175, 82300, 83655, 83825

Expiration Date:

Billing No: 91520

Interface Code: M8633

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MDUR7	COLLECTION DURATION	AOE	Y			TEXT		
MVOL7	URINE VOLUME	AOE	Y			TEXT		
8633A	ARSENIC, 24 Hr U	RES	N	mcg/spec	5587-1			
8633G	AS CONCENTRATION	RES	N	mcg/L	21074-0			
8633B	LEAD, 24 Hr U	RES	N	mcg/spec	5677-0			
8633H	PB CONCENTRATION	RES	N	mcg/L	20625-0			
8633D	CADMIUM, 24 Hr U	RES	N	mcg/spec	5612-7			
8633I	CD CONCENTRATION	RES	N	mcg/L	5611-9			
8633C	MERCURY, 24 Hr U	RES	N	mcg/spec	6693-6			
8633J	HG CONCENTRATION	RES	N	mcg/L	5689-5			
8633E	COLLECTION DURATION	RES	N	hours	13362-9			
8633F	TOTAL VOLUME	RES	N	mLs	3167-4			

Parvovirus B19 by Rapid PCR, Plasma (Mayo PARVP) (90121)

Effective Date 11/4/2009

CPT(s): 87798

Expiration Date:

Billing No: 90121

Interface Code: M86337

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MSOR54	SOURCE	AOE	Y			TEXT		
86337A	PARVOVIRUS B19 BY RAPID PCR	RES	N		9572-9			
86337B	SOURCE	RES	N		31208-2			

Thyroid Stimulating Immunoglobulin (TSI) (LATS) (Mayo TSI) (92200)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84445

Billing No: 92200

Interface Code: M8634

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8634A	THYROID-STIMUL. IMMUNOGLOB.	RES	N		30567-2

Arsenic, 24 Hr Urine (Mayo ASU) (95150)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 82175

Billing No: 95150

Interface Code: M8644

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR11	COLLECTION DURATION	AOE	Y			TEXT		
MVOL11	URINE VOLUME	AOE	Y			TEXT		
8644A	ARSENIC, U	RES	N		5587-1			
8644B	COLLECTION DURATION	RES	N	hours	13362-9			
8644C	URINE VOLUME	RES	N		3167-4			
8644D	AS CONC (ug/L)	RES	N		21074-0			

Arsenic, Blood (Mayo ASB) (90440)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 82175

Billing No: 90440

Interface Code: M8645

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8645A	ARSENIC, B	RES	N		5583-0

Pyruvic Acid, Blood (Mayo PYR) (97280)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84210

Billing No: 97280

Interface Code: M8657

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8657A	PYRUVIC ACID, BLOOD	RES	N		14121-8
8657B	PYRUVIC ACID, BLOOD	RES	N		2905-8

Pyruvic Kinase, RBC (Mayo PK) (97220)

Effective Date 12/1/2012

CPT(s): 84220

Expiration Date:

Billing No: 97220

Interface Code: M8659

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8659A	PYRUVATE KINASE, RBC	RES	N		32552-2

Insulin Antibodies (Mayo INAB) (94170)

Effective Date 6/30/2014

CPT(s): 86337

Expiration Date:

Billing No: 94170

Interface Code: M8666

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8666A	INSULIN ABS	RES	N		60463-7

Oxalate, Urine (Mayo OXU) (92660)

Effective Date 11/17/2015

CPT(s): 83945

Expiration Date:

Billing No: 92660

Interface Code: M8669

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MDUR6	COLLECTION DURATION	AOE	Y		
MVOL6	URINE VOLUME	AOE	Y		
8669A	OXALATE, mmol/24 h	RES	N	mmol/24 h	14862-7
8669B	COLLECTION DURATION	RES	N	hours	13362-9
8669C	URINE VOLUME	RES	N	mLs	3167-4
8669D	OX CONC (mmol/L)	RES	N	mmol/L	34349-1
8669E	OXALATE, mg/24 h	RES	N	mg/24 h	2701-1
8669F	OXALATE CONCENTRATION	RES	N	mg/L	27222-9

A O E

Type	List Codes	List Code Descriptions
TEXT		
TEXT		

HIV-2 Ab Evaluation (Mayo HIV2) (95790)

Effective Date 3/1/2013

CPT(s): 86702

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 95790

Interface Code: M86702 May Reflex XHIV2L

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86702A	HIV-2 AB SCREEN, S	RES	N		30361-0

Lactate Dehydrogenase (LD) Isoenzymes, Serum (Mayo LD_I) (92220)

Effective Date 12/1/2012

CPT(s): 83625, 83615

Expiration Date:

Billing No: 92220

Interface Code: M8679

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8679A	LACTATE DEHYDROGENASE	RES	N		14804-9
8679B	LD ISOENZYMES	RES	N		5910-5
8679C	TOTAL LD ACTIVITY	RES	N		14804-9
8679D	I, HEART	RES	N		2536-1
8679E	II	RES	N		2539-5
8679F	III	RES	N		2542-9
8679G	IV	RES	N		2545-2
8679H	V, LIVER	RES	N		2548-6

Cadmium (Mayo CDB) (97520)

Effective Date 12/1/2012

CPT(s): 82300

Expiration Date:

Billing No: 97520

Interface Code: M8682

Result/AOE Code	Description	Type	Suppress	Units	LOINC
15080D	CADMIUM	RES	N		5609-3

Growth Hormone, Serum (Mayo HGH) (91400)

Effective Date 12/1/2012

CPT(s): 83003

Expiration Date:

Billing No: 91400

Interface Code: M8688

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8688A	GROWTH HORMONE, S	RES	N		2963-7

Striational (Striated Muscle) AB (Mayo STR) (93610)

Effective Date 6/30/2014

CPT(s): 83520

Expiration Date:

Billing No: 93610

Interface Code: M8746

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8746A	STRIATIONAL (STRIATED MUSCLE) AB	RES	N		8097-8

HHV-6 by Rapid PCR (Human Herpes Virus 6), Plasma (Mayo HHV6) (99476)

Effective Date 11/12/2015

CPT(s): 87532

Expiration Date:

Billing No: 99476

Interface Code: M87532

Result/AOE Code	Description	Type	Suppress	Units	LOINC
87532B	HHV6 PCR RESULT	RES	N		29495-9

Galactose, Quant, Urine (Mayo GALU) (97230)

Effective Date 12/1/2012

CPT(s): 82760

Expiration Date:

Billing No: 97230

Interface Code: M8765

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8765A	GALACTOSE QUANT URINE	RES	N		2310-1

Hypersensitivity Pneum IgG (Mayo SAL) (92060)

Effective Date 12/1/2012

CPT(s): 86606, 86671 x 2

Expiration Date:

Billing No: 92060

Interface Code: M8768

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9678A	ASPERGILLUS FUMIGATUS, IgG	RES	N		26954-8
8768A	MICROPOLYSPORA FAENI IgG AB	RES	N		26948-0
8768B	THERMOACTINOMYCES VUL. IgG	RES	N		34190-9

West Nile Virus by Rapid PCR, Plasma (Mayo WNVP) (90122)

Effective Date 7/22/2015

CPT(s): 87798

Expiration Date:

Billing No: 90122

Interface Code: M87802

Result/AOE Code	Description	Type	Suppress	Units	LOINC
87802B	WNVP RESULT	RES	N		34892-0

Childhood Allergy Profile w/o IgE (Mayo PR271) (99239)

Effective Date 2/8/2013

CPT(s): 86003 x 11

Expiration Date:

Billing No: 99239

Interface Code: M87824

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8
83720C	DOG DANDER, IgE	RES	N	kU/L	6098-8
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4
83720F	COCKROACH, IgE	RES	N	kU/L	30170-5
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2
83345A	MILK, IgE	RES	N	kU/L	7258-7
82888A	PEANUT, IgE	RES	N	kU/L	6206-7
83345C	SOYBEAN, IgE	RES	N	kU/L	6248-9
83345B	WHEAT, IgE	RES	N	kU/L	6276-0
82889A	CODFISH, IgE	RES	N	kU/L	6082-2
83346A	EGG WHITE, IgE	RES	N	kU/L	6106-9

Ribosome P Ab, IgG (Mayo RIB) (99458)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 99458

Interface Code: M87837 Orderable and Reflex for M83631

Result/AOE Code	Description	Type	Suppress	Units	LOINC
87837A	RIBOSOME P AB	RES	N		53892-6

Immunoglobulin Total Light Chains, Urine (Mayo TLCU) (99586)

Effective Date 12/1/2012

CPT(s): 83883 x 2

Expiration Date:

Billing No: 99586

Interface Code: M87934

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MVOLU	RANDOM SPEC OR 24 HR VOLUME?	AOE	Y			TEXT		
87934A	KAPPA TOTAL LIGHT CHAIN	RES	N		27365-6			
87934B	LAMBDA TOTAL LIGHT CHAIN	RES	N		27394-6			
87934C	KAPPA/LAMBDA TLC RATIO	RES	N					

Lyme Disease by Rapid PCR, Whole Blood (Mayo PBORB) (90678)

Effective Date 11/4/2009

CPT(s): 87476

Expiration Date:

Billing No: 90678

Interface Code: M87973

Result/AOE Code	Description	Type	Suppress	Units	LOINC
87973B	LYME DISEASE BY RAPID PCR	RES	N		32667-8

Tropheryma Whipplei DNA PCR, Blood (Mayo WHIPB) (92529)

Effective Date 3/4/2013

CPT(s): 87798

Expiration Date:

Billing No: 92529

Interface Code: M87974

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSOR57	SPECIMEN SOURCE	AOE	N		
87974A	TROPH. WHIPPLEI BLD SOURCE	RES	N		31208-2
87974B	TROPH. WHIPPLEI BLD RESULT	RES	N		42602-3

A O E

Type	List Codes	List Code Descriptions
TEXT		

HSV Antibody Screen, IgM (Mayo MHSV) (99630)

Effective Date 12/1/2012

CPT(s): 86694

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 99630

Interface Code: M87998 May Reflex M26589

Result/AOE Code	Description	Type	Suppress	Units	LOINC
87998A	HSV AB, IgM, Screen	RES	N		40729-6

Carnitine Plasma (Mayo CARN) (90560)

Effective Date 12/1/2012

CPT(s): 82379

Expiration Date:

Billing No: 90560

Interface Code: M8802

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8802A	TOTAL	RES	N		14288-5
8802B	FREE (FC)	RES	N		14286-9
8802C	ACYLCARNITINE (AC)	RES	N		14282-8
8802D	AC/FC RATIO	RES	N		30193-7
8802E	INTERPRETATION	RES	N		59462-2

Biotinadase, Serum (Mayo BIOTS) (90618)

Effective Date 12/1/2012

CPT(s): 82261

Expiration Date:

Billing No: 90618

Interface Code: M88205

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPE21	SPECIMEN	AOE	Y			TEXT		
MSOR49	SOURCE	AOE	Y			TEXT		
88205A	SPECIMEN	RES	N		31208-2			
88205B	SPECIMEN ID	RES	N					
88205C	SOURCE	RES	N		31208-2			
88205D	ORDER DATE	RES	N					
88205E	REASON FOR REFERRAL	RES	N		42349-1			
88205F	METHOD	RES	N		49549-9			
88205G	BIOTINIDASE	RES	N		1982-8			
88205H	INTERPRETATION	RES	N		59462-2			
88205I	AMENDMENT	RES	N					
88205J	REVIEWED BY	RES	N					
88205K	RELEASE DATE	RES	N					

von Willebrand Factor Multimer Analysis (Mayo VWFM2) (99044)

Effective Date 12/1/2012

CPT(s): 85247

Expiration Date:

Billing No: 99044

Interface Code: M8844

M9051 and M89792 must be ordered in conjunction with this test if NOT previously performed. If test done previously, please submit results when ordering test.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8844A	von WILLEBRAND FACTOR MULTIMER	RES	N		32217-2

Complement, C1q Component (Mayo C1Q) (99022)

Effective Date 12/1/2012

CPT(s): 86160

Expiration Date:

Billing No: 99022

Interface Code: M8851

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8851A	COMPLEMENT C1q	RES	N		4478-4

T4 (Thyroxine), Free by Dialysis Serum (Mayo FRT4D) (94950)

Effective Date 12/1/2012

CPT(s): 84439

Expiration Date:

Billing No: 94950

Interface Code: M8859

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8859A	T4, FREE by DIALYSIS	RES	N	ng/Dl	6892-4

Food Allergy Profile w/o IgE (Mayo PR309) (99903)

Effective Date 2/8/2013

CPT(s): 86003 x 11

Expiration Date:

Billing No: 99903

Interface Code: M88638

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83346A	EGG WHITE, IgE	RES	N	kU/L	6106-9
83345A	MILK, IgE	RES	N	kU/L	7258-7
82888A	PEANUT, IgE	RES	N	kU/L	6206-7
83345C	SOYBEAN, IgE	RES	N	kU/L	6248-9
83345B	WHEAT, IgE	RES	N	kU/L	6276-0
30342A	CORN-FOOD, IgE	RES	N	kU/L	6087-1
30342B	WALNUT-FOOD, IgE	RES	N	kU/L	6273-7
30342C	SHRIMP, IgE	RES	N	kU/L	6246-3
82889A	CODFISH, IgE	RES	N	kU/L	6082-2
30342D	SCALLOP, IgE	RES	N	kU/L	7691-9
30342E	CLAM, IgE	RES	N	kU/L	6076-4

JAK2 V617F Mutation Detection (Mayo JAK2B) (90125)

Effective Date 10/8/2013

CPT(s): 81270

Expiration Date:

Billing No: 90125

Interface Code: M88715

Result/AOE Code	Description	Type	Suppress	Units	LOINC
88715A	JAK2 V617F MUTATION DETECT.	RES	N		43399-5

AFP-L3% and Total AFP (Mayo L3AFP) (99887)

Effective Date 12/1/2012

CPT(s): 82107

Expiration Date:

Billing No: 99887

Interface Code: M88878

Result/AOE Code	Description	Type	Suppress	Units	LOINC
88878A	TOTAL AFP	RES	N		1834-1
88878B	%L3	RES	N		42332-7
88878C	INTERPRETATION	RES	N		

BK Virus, PCR, Urine (Mayo LCBK) (99710)

Effective Date 1/21/2014

CPT(s): 87798

Expiration Date:

Billing No: 99710

Interface Code: M88910

Result/AOE Code	Description	Type	Suppress	Units	LOINC
88910B	BK VIRUS, PCR, U	RES	N		32285-9

ALA Dehydratase, Whole Blood (Mayo ALAD) (99720)

Effective Date 12/1/2012

CPT(s): 82657

Expiration Date:

Billing No: 99720

Interface Code: M88924

Result/AOE Code	Description	Type	Suppress	Units	LOINC
88924A	ALA DEHYDRATASE	RES	N	nmol/L/sec	2813-4
88924B	INTERPRETATION	RES	N		59462-2

PBG Deaminase, Whole Blood (Mayo PBGD_) (99721)

Effective Date 12/1/2012

CPT(s): 82657

Expiration Date:

Billing No: 99721

Interface Code: M88925

Result/AOE Code	Description	Type	Suppress	Units	LOINC
88925A	PBG DEAMINASE, RBC	RES	N	nmol/L/sec	2812-6
88925B	INTERPRETATION	RES	N		59462-2

Antibody to Extractable Nuclear Ag Eval (Mayo ENAE) (99722)

Effective Date 12/1/2012

CPT(s): 86235 x 6

Expiration Date:

Billing No: 99722

Interface Code: M89035 Orderable and Reflex for M83631

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81360A	SS-A/Ro Ab, IgG	RES	N		33610-7
81359A	SS-B/La Ab, IgG	RES	N		33613-1
81358A	Sm Ab, IgG	RES	N		18323-6
81357A	RNP Ab, IgG	RES	N		31588-7
80178A	Scl 70 Ab, IgG	RES	N		47322-3
80179A	Jo 1 Ab, IgG	RES	N		33571-1

Nitrogen, Total, Feces (Mayo NITF) (97190)

Effective Date 12/1/2012

CPT(s): 84999

Expiration Date:

Billing No: 97190

Interface Code: M8909

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MDUR17	COLLECTION DURATION	AOE	Y			TEXT		
8909A	NITROGEN TOTAL, STOOL	RES	N		16141-4			
8909B	COLLECTION DURATION	RES	N	hours	13363-7			
8909C	TOTAL WEIGHT STOOL	RES	N		30078-0			

Cell Bound Platelet Autoantibody (Mayo CBPA) (96300)

Effective Date 12/1/2012

CPT(s): 86023

Expiration Date:

Billing No: 96300

Interface Code: M8937

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z29	WHAT IS PATIENT'S PLATELET COUNT?	AOE	Y			TEXT		
8937A	CELL BOUND PLATELET AUTOANTIBODY	RES	N					
8937B	COMMENT	RES	N		48767-8			

Brucella Ab Screen IgG, IgM (Mayo BRUGM) (99275)

Effective Date 12/1/2012

CPT(s): 86622 x 2

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 99275

Interface Code: M89476 May Reflex M8112

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84327A	BRUCELLA AB, IgG	RES	N		24387-3
84327B	BRUCELLA AB, IgM	RES	N		24388-1
84327C	INTERPRETATION	RES	N		59464-8

Alkaline Phos Total + Isoenzymes (Mayo ALKI) (99965)

Effective Date 12/1/2012

CPT(s): 84075, 84080

Expiration Date:

Billing No: 99965

Interface Code: M89503

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89503B	ALKALINE PHOS. TOTAL	RES	N		6768-6
89503A	ALKALINE PHOS. ISOENZYMES	RES	N		49243-9
89503C	LIVER 1 %	RES	N		15348-6
89503D	LIVER 1	RES	N		13874-3
89503E	LIVER 2 %	RES	N		15349-4
89503F	LIVER 2	RES	N		13875-0
89503G	BONE %	RES	N		15013-6
89503H	BONE	RES	N		1777-2
89503I	INTESTINE %	RES	N		15014-4
89503J	INTESTINE	RES	N		1778-0
89503K	PLACENTAL	RES	N		40793-2

Isoagglutinin Titer, Anti-A (Mayo ATITH) (99153)

Effective Date 12/1/2012

CPT(s): 86886

Expiration Date:

Billing No: 99153

Interface Code: M8964

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8964C	ISOAGGLUTININ TITER, ANTI-A	RES	N		30314-9

Isoagglutinin Titer, Anti-B (Mayo BTITH) (99154)

Effective Date 12/1/2012

CPT(s): 86886

Expiration Date:

Billing No: 99154

Interface Code: M8972

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8972C	ISOAGGLUTININ TITER, ANTI-B	RES	N		30201-8

von Willebrand Factor Activity (Mayo VWFX) (90554)

Effective Date 12/1/2012

CPT(s): 85397

Expiration Date:

Billing No: 90554

Interface Code: M89792

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83094A	VON WILLEBRAND FACTOR ACT.	RES	N	%	68324-3

Arsenic, Random, Urine (Mayo ASRU) (90521)

Effective Date 12/1/2012

CPT(s): 82175

Expiration Date:

Billing No: 90521

Interface Code: M89889

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89889A	ARSENIC, RANDOM, URINE	RES	N	mcg/L	5586-3

Enterovirus by Rapid PCR, Plasma (Mayo ENTP) (90123)

Effective Date 4/10/2014

CPT(s): 87498

Expiration Date:

Billing No: 90123

Interface Code: M89893

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89893B	ENTEROVIRUS PCR	RES	N		29591-5

BK Virus DNA by PCR, Plasma (Mayo LCBKP) (90679)

Effective Date 1/21/2014

CPT(s): 87798

Expiration Date:

Billing No: 90679

Interface Code: M89982

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89982B	BK VIRUS PCR, PLASMA	RES	N		32362-6

Bartonella by Rapid PCR, Whole Blood (Mayo BARTB) (90124)

Effective Date 12/2/2014

CPT(s): 87801

Expiration Date:

Billing No: 90124

Interface Code: M89983

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR51	SPECIMEN SOURCE	AOE	Y			TEXT		
89983A	BARTONELLA BLD. SPECIMEN SOURCE	RES	N		31208-2			
89983B	BARTONELLA BLD. RESULT	RES	N		16275-0			

Histoplasma Antigen (Mayo FHIST) (99220)

Effective Date 12/1/2012

CPT(s): 87385

Expiration Date:

Billing No: 99220

Interface Code: M90018

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90018A	RESULT:	RES	N	ng/mL	51753-2
90018B	COMMENT:	RES	N		

Trichinella Antibody (Mayo STRIC) (99527)

Effective Date 12/1/2012

CPT(s): 86784

Expiration Date:

Billing No: 99527

Interface Code: M9017

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9017A	TRICHINELLA AB	RES	N		19253-4

Gastric Inhibitory Polypeptide (GIP) (Mayo FGIP) (97250)

Effective Date 1/2/2014

CPT(s): 83519

Expiration Date:

Billing No: 97250

Interface Code: M90171

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90171A	GASTRIC INHIBITORY POLYPEPTIDE	RES	N		

Somatostatin (Mayo FSOMA) (99472)

Effective Date 1/2/2014

CPT(s): 84307

Expiration Date:

Billing No: 99472

Interface Code: M90172

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90172A	SOMATOSTATIN	RES	N	pg/mL	

HDL Cholesterol Subclasses (Mayo FHDLS) (99951)

Effective Date 12/1/2012

CPT(s): 83701

Expiration Date:

Billing No: 99951

Interface Code: M90186

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90186A	HDL-2 CHOLESTEROL	RES	N		9832-7
90186B	HDL-3 CHOLESTEROL	RES	N		9833-5

VDRL, Spinal Fluid (Mayo VDSF) (93400)

Effective Date 12/1/2012

CPT(s): 86592

Expiration Date:

Billing No: 93400

Interface Code: M9028

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9028A	VDRL, CSF	RES	N		31146-4

Antithrombin Antigen (Mayo ATTI) (90400)

Effective Date 12/1/2012

CPT(s): 85301

Expiration Date:

Billing No: 90400

Interface Code: M9031 Orderable and Reflex for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9031A	ANTITHROMBIN III AG	RES	N		27812-7

Von Willebrand Factor Antigen, Plasma (Mayo VWAG) (93520)

Effective Date 12/1/2012

CPT(s): 85246

Expiration Date:

Billing No: 93520

Interface Code: M9051

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9051A	VON WILLEBRAND FACTOR AG	RES	N		27816-8

Coag Factor V Assay (Mayo FACTV) (91195)

Effective Date 12/1/2012

CPT(s): 85220

Expiration Date:

Billing No: 91195

Interface Code: M9054 Orderable and Reflex for M83093, M83094, M83097, M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9054A	COAG FACTOR V ASSAY	RES	N		3193-0

Coag Factor VII Assay (Mayo F_7) (97590)

Effective Date 12/1/2012

CPT(s): 85230

Expiration Date:

Billing No: 97590

Interface Code: M9055 Orderable and Reflex for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9055A	COAG FACTOR VII ASSAY	RES	N		3198-9

Thrombin Time (Mayo TT) (93210)

Effective Date 12/1/2012

CPT(s): 85670

Expiration Date:

Billing No: 93210

Interface Code: M9059 Orderable and Reflex for M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550K	THROMBIN TIME (BOVINE)	RES	N		46717-5

Osmotic Fragility, RBC (Mayo FRAG) (95730)

Effective Date 1/12/2016

CPT(s): 85557

Expiration Date:

Billing No: 95730

Interface Code: M9064

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9064A	OSMOTIC FRAGILITY, RBC	RES	N		34964-7
9064B	OSMOTIC FRAGILITY, 0.5 g/dL	RES	N		23915-2
9064C	OSMOTIC FRAGILITY, 0.6 g/dL	RES	N		23917-8
9064D	OSMOTIC FRAGILITY, 0.65 g/dL	RES	N		23919-4
9064E	OSMOTIC FRAGILITY, 0.75 g/dL	RES	N		30543-3
9064F	OSMOTIC FRAGILITY COMMENT	RES	N		59466-3
9064G	SHIPPING CONTROL VIAL	RES	N		

Coag Factor XI Assay (Mayo F_11) (94060)

Effective Date 12/1/2012

CPT(s): 85270

Expiration Date:

Billing No: 94060

Interface Code: M9067 Orderable and Reflex for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9067A	COAG FACTOR XI ASSAY	RES	N		3226-8

Coag Factor XII Assay (Mayo F_12) (95550)

Effective Date 12/1/2012

CPT(s): 85280

Expiration Date:

Billing No: 95550

Interface Code: M9069 Orderable and Reflex for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9069A	COAG FACTOR XII ASSAY	RES	N		3232-6

Plasminogen Activity (Mayo PSGN) (90535)

Effective Date 12/1/2012

CPT(s): 85420

Expiration Date:

Billing No: 90535

Interface Code: M9079 Orderable and Reflex for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550Q	PLASMINOGEN ACTIVITY	RES	N		28660-9

Alpha-2 Plasmin Inhibitor (Mayo APSM) (99375)

Effective Date 12/1/2012

CPT(s): 85410

Expiration Date:

Billing No: 99375

Interface Code: M9084 Orderable and Reflex for M83094

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9084A	ALPHA-2 PLASMIN INHIBITOR	RES	N		27810-1

Hemoglobin Plasma (Mayo PLHBB) (91540)

Effective Date 12/1/2012

CPT(s): 83051

Expiration Date:

Billing No: 91540

Interface Code: M9096

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9096A	TOTAL HEMOGLOBIN	RES	N	mg/dL	721-1
9096B	OXYHEMOGLOBIN	RES	N	mg/dL	

Coag Factor II Assay (Mayo F_2) (94470)

Effective Date 12/1/2012

CPT(s): 85210

Expiration Date:

Billing No: 94470

Interface Code: M9121 Orderable and Reflex for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9121A	COAG FACTOR II ASSAY	RES	N		3289-6

N-Telopeptide,Cross-Linked (Mayo FNTPX) (94360)

Effective Date 12/1/2012

CPT(s): 82523

Expiration Date:

Billing No: 94360

Interface Code: M91264

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91264A	N-TELOPEPTIDE, CROSS LINKED	RES	N		

Protein C Antigen (Mayo PCAG) (92860)

Effective Date 12/1/2012

CPT(s): 85302

Expiration Date:

Billing No: 92860

Interface Code: M9127 Orderable and Reflex for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9127A	PROTEIN C AG, P	RES	N		27820-0

Lyme Disease Serology (Mayo LYME) (97550)

Effective Date 12/1/2012

CPT(s): 86618

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 97550

Interface Code: M9129 May Reflex M9535

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82516A	LYME DISEASE SEROLOGY, S	RES	N		20449-5

Norwalk-like Virus (NLV) Ag, Stool (Mayo FNLV) (99490)

Effective Date 12/1/2012

CPT(s): 87449

Expiration Date:

Billing No: 99490

Interface Code: M91366

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91366A	NOROVIRUS ANTIGEN	RES	N		49117-5

Polio Virus Antibody (Mayo FPOLS) (99372)

Effective Date 12/1/2012

CPT(s): 86382 x 3

Expiration Date:

Billing No: 99372

Interface Code: M91469

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91469A	POLIO 1	RES	N		
91469B	POLIO 2	RES	N		
91469C	POLIO 3	RES	N		

Immune Complex (Mayo FCIC) (99213)

Effective Date 12/1/2012

CPT(s): 86332

Expiration Date:

Billing No: 99213

Interface Code: M91497

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91497A	IMMUNE COMPLEX	RES	N		

Francisella Tularensis Ab (Mayo FRANC) (99112)

Effective Date 12/1/2012

CPT(s): 86000

Expiration Date:

Billing No: 99112

Interface Code: M91552

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91552A	FRANCISELLA AB	RES	N		

Calcitonin (Mayo CATN) (96350)

Effective Date 12/1/2012

CPT(s): 82308

Expiration Date:

Billing No: 96350

Interface Code: M9160

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9160A	CALCITONIN	RES	N		1992-7

Babesia Microti IgG + IgM Antibody (Mayo FBAB) (99460)

Effective Date 12/1/2012

CPT(s): 86753 x 2

Expiration Date:

Billing No: 99460

Interface Code: M91608

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91608A	BABESIA MICROTI IgG AB	RES	N		16117-4
91608B	BABESIA MICROTI IgM AB	RES	N		16118-2
91608C	INTERPRETATION	RES	N		

Chlamydia Trachomatis Culture (Mayo FCTRC) (99479)

Effective Date 12/17/2012

CPT(s): 87110, 87140

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 99479

Interface Code: M91659

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSOR35	SOURCE	AOE	Y		
91659A	CHLAMYDIA CULTURE	RES	N		6349-5
91659B	SOURCE	RES	N		31208-2

A O E

Type	List Codes	List Code Descriptions
TEXT		

Serotonin Release Assay (Mayo FPORC) (90708)

Effective Date 4/2/2014

CPT(s): 86022

Expiration Date:

Billing No: 90708

Interface Code: M91763

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91763A	UNFRACTIONATED HEPARIN LOW DOSE	RES	N		
91763B	UNFRACTIONATED HEPARIN HIGH DOSE	RES	N		
91763C	UNFRACTIONATED HEPARIN RESULT	RES	N		

Schistosoma IgG Antibody (Mayo FSCHS) (99743)

Effective Date 12/1/2012

CPT(s): 86682

Expiration Date:

Billing No: 99743

Interface Code: M91780

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91780A	SCHISTOSOMA IgG AB	RES	N		

Hemoglobin S, Screen (Mayo SDEX) (95980)

Effective Date 12/1/2012

CPT(s): 85660

Expiration Date:

Billing No: 95980

Interface Code: M9180 Orderable and Reflex for M84158, M81626

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9180A	HEMOGLOBIN S, SCREEN	RES	N		4621-9

NMR Lipoprofile (Mayo FNMR2) (99346)

Effective Date 8/11/2015

CPT(s): 83704, 80061

Expiration Date:

Billing No: 99346

Interface Code: M91959

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91959A	HDL-P (TOTAL)	RES	N	umol/L	49748-7
91959B	SMALL LDL-P	RES	N	nmol/L	43727-7
91959C	LDL SIZE	RES	N	nm	17782-4
91959D	LARGE VLDL-P	RES	N	nmol/L	43728-5
91959E	SMALL LDL-P	RES	N	nmol/L	43727-7
91959F	LARGE HDL-P	RES	N	umol/L	43729-3
91959G	VLDL SIZE	RES	N	nm	62254-8
91959H	LDL SIZE	RES	N	nm	17782-4
91959I	HDL SIZE	RES	N	nm	62253-0
91959J	LP-IR SCORE (0-100)	RES	N	nm	
91959K	LDL-P (LDL Particle Number)	RES	N	nmol/L	54434-6
91959L	LDL-C (Calculated)	RES	N	mg/dL	13457-7
91959M	HDL-C	RES	N	mg/dL	2085-9
91959N	TRIGLYCERIDES	RES	N	mg/dL	2571-8
91959O	TOTAL CHOLESTEROL	RES	N	mg/dL	2093-3

17-Hydroxyprogesterone, Serum (Mayo OHPG) (92040)

Effective Date 12/1/2012

CPT(s): 83498

Expiration Date:

Billing No: 92040

Interface Code: M9231

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9231A	17-HYDROXYPROGESTERON, S	RES	N		1668-3

Beta-2-Microglobulin, Serum (Mayo B2M) (90460)

Effective Date 12/1/2012

CPT(s): 82232

Expiration Date:

Billing No: 90460

Interface Code: M9234

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9234A	BETA-2-MICROGLOBULIN	RES	N		1952-1

Flecainide (Mayo FLEC) (96710)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 96710

Interface Code: M9243

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9243A	FLECAINIDE	RES	N		3638-4

Amiodarone (Mayo AMIO) (90220)

Effective Date 6/4/2015

CPT(s): 80299

Expiration Date:

Billing No: 90220

Interface Code: M9247

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9247A	AMIODARONE	RES	N	mcg/mL	3330-8
9247B	DESETHYLAMIODARONE	RES	N	mcg/mL	6774-4

5-Hydroxyindoleacetic Acid (5-HIAA), Urine (Mayo HIAA) (90000)

Effective Date 12/1/2012

CPT(s): 83497

Expiration Date:

Billing No: 90000

Interface Code: M9248

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR5	COLLECTION DURATION	AOE	Y			TEXT		
MVOL5	URINE VOLUME	AOE	Y			TEXT		
9248A	5-HYDROXYINDOLEACET. ACID	RES	N		1695-6			
9248B	COLLECTION DURATION	RES	N	hours	13362-9			
9248C	URINE VOLUME	RES	N		28009-9			

Homovanillic Acid (HVA) 24 hour Urine (Mayo HVA) (97540)

Effective Date 12/1/2012

CPT(s): 83150

Expiration Date:

Billing No: 97540

Interface Code: M9253

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR18	COLLECTION DURATION	AOE	Y			TEXT		
MVOL15	URINE VOLUME	AOE	Y			TEXT		
9253B	HVA, Adult	RES	N		2436-4			
9253C	HVA, Child	RES	N		13760-4			
9253D	COLLECTION DURATION	RES	N	hours	13362-9			
9253E	URINE VOLUME	RES	N	mL	3167-4			

VMA and HVA, Random, Urine, (Mayo VH) (99136)

Effective Date 12/1/2012

CPT(s): 83150, 84585

Expiration Date:

Billing No: 99136

Interface Code: M9254

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9254B	VANILLYLMANDELIC ACID	RES	N	mg/g Cr	3124-5
9254C	HOMOVANILLIC ACID	RES	N	mg/g Cr	11146-8

IgG Subclasses, Serum (Mayo IGGS) (92100)

Effective Date 12/1/2012

CPT(s): 82784, 82787 x 4

Expiration Date:

Billing No: 92100

Interface Code: M9259

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9259A	TOTAL IGG	RES	N		2465-3
9259B	IGG 1	RES	N		2466-1
9259C	IGG 2	RES	N		2467-9
9259D	IGG 3	RES	N		2468-7
9259E	IGG 4	RES	N		2469-5

Thyroxine Binding Globulin (TBG) (Mayo TBGI) (96160)

Effective Date 12/1/2012

CPT(s): 84442

Expiration Date:

Billing No: 96160

Interface Code: M9263

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9263A	THYROXINE BINDING GLOBULIN	RES	N		3021-3

Reticulin Antibodies, Serum (Mayo RTA) (98660)

Effective Date 12/1/2012

CPT(s): 86255

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 98660

Interface Code: M9275

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9275A	RETICULIN ABS, SERUM	RES	N		17521-6

Catecholamine Fractionation Urinary (Mayo CATU) (90580)

Effective Date 3/5/2013

CPT(s): 82384

Expiration Date:

Billing No: 90580

Interface Code: M9276

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR4	COLLECTION DURATION	AOE	Y			TEXT		
MVOL4	URINE VOLUME	AOE	Y			TEXT		
9276B	CATE. FREE COLL DURATION	RES	N	hours	13362-9			
9276C	CATE. FREE URINE VOLUME	RES	N	mL	3167-4			
9276D	NOREPINEPHRINE	RES	N	mcg/24 hr	2668-2			
9276E	EPINEPHRINE	RES	N		2232-7			
9276F	DOPAMINE	RES	N		2218-6			

Centromere Antibodies (Mayo CMA) (98090)

Effective Date 5/27/2014

CPT(s): 83516

Expiration Date:

Billing No: 98090

Interface Code: M9278

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9278A	CENTROMERE ABS	RES	N		31290-0

Sex Hormone Binding Globulin (Mayo SHBG) (96200)

Effective Date 12/24/2013

CPT(s): 84270

Expiration Date:

Billing No: 96200

Interface Code: M9285

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9285A	SEX HORMONE BINDING GLOBULIN	RES	N		13967-5

Acetylcholinesterase, Amn Fl (Mayo ACHE_) (94130)

Effective Date 2/15/2013

CPT(s): 82013

Expiration Date:

Billing No: 94130

Interface Code: M9287 Orderable and Reflex for XAFPA

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MGSAGE	GESTATIONAL AGE (ACHE)	AOE	Y			TEXT		
9287A	ACETYLCHOLINESTERASE, AF	RES	N		30106-9			
9287B	GESTATIONAL AGE (ACHE)	RES	N		18185-9			

Citrate Excretion, Urine (Mayo CITR) (94690)

Effective Date 12/1/2012

CPT(s): 82507

Expiration Date:

Billing No: 94690

Interface Code: M9329

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR25	COLLECTION DURATION	AOE	Y			TEXT		
MVOL22	URINE VOLUME	AOE	Y			TEXT		
82029P	CITRATE EXCRETION, U	RES	N	mg/24 h	6687-8			
8202GG	CITRATE CONCENTRATION	RES	N	mg/dL	21203-5			
8202EE	COLLECTION DURATION	RES	N	hours	13362-9			
8202FF	URINE VOLUME	RES	N	mL	3167-4			

Intrinsic Factor Blocking Antibody (Mayo IFBA) (97570)

Effective Date 12/1/2012

CPT(s): 86340

Expiration Date:

Billing No: 97570

Interface Code: M9335

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9335A	INTRINSIC FACTOR BLOCKING AB	RES	N		31444-3
9335B	COMMENT	RES	N		48767-8

T- + B-Cell QN by Flow Cytometry (Mayo TBBS) (96150)

Effective Date 1/1/2013

CPT(s): 86359, 86360, 86355, 86357

Expiration Date:

Billing No: 96150

Interface Code: M9336

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9336A	T- + B-CELL QUANT.	RES	N		IP
84348A	CD45 LYMPH COUNT,FLOW	RES	N		27071-0
84348B	% CD3 (T CELLS)	RES	N		8124-0
84348H	H/S/ RATIO	RES	N		54218-3
9336F	COMMENT	RES	N		48767-8
9336B	% CD19 (B Cells)	RES	N		8117-4
9336C	% CD16 and CD56 (NK Cells)	RES	N		18267-5
84348C	% CD4 (HELPER CELLS)	RES	N		8123-2
84348D	%CD8 (SUPP`R CELLS)	RES	N		8101-8
84348E	CD3 (T CELLS)	RES	N		8122-4
9336D	CD 19 (B Cells)	RES	N		8116-6
9336E	CD16 and CD56 (NK Cells)	RES	N		20402-4
84348F	CD4 (HELPER CELLS)	RES	N		24467-3
84348G	CD8 (SUPP`R CELLS)	RES	N		14135-8

Glucagon (Mayo GLP) (96560)

Effective Date 12/1/2012

CPT(s): 82943

Expiration Date:

Billing No: 96560

Interface Code: M9358

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9358A	GLUCAGON	RES	N		2338-2

Endomysial AB IgA Serum (Mayo EMA) (93910)

Effective Date 7/1/2014

CPT(s): 86255

Expiration Date:

Billing No: 93910

Interface Code: M9360 Orderable and Reflex for XCDSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9360A	ENDOMYSIAL AB, IgA	RES	N		27038-9

Vanillylmandelic Acid (VMA) 24 Hour Urine (Mayo VMA) (93340)

Effective Date 12/1/2012

CPT(s): 84585

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93340

Interface Code: M9454

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MDUR1	COLLECTION DURATION	AOE	Y		
MVOL1	URINE VOLUME	AOE	Y		
9454A	VMA, ADULT	RES	N		3122-9
9454B	VMA, CHILD(<15YR)	RES	N		30571-4
9454C	COLLECTION DURATION	RES	N	hours	13362-9
9454D	URINE VOLUME	RES	N		3167-4

A O E

Type	List Codes	List Code Descriptions
TEXT		
TEXT		

Lyme Disease Ab, Immunoblot (Mayo LYWB) (95880)

Effective Date 3/26/2013

CPT(s): 86617 x 2

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 95880

Interface Code: M9535 Orderable and Reflex for M83265, M9129

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82516C	IgG IMMUNOBLOT	RES	N		6320-6
9535A	IgG BAND(s)	RES	N		13502-0
82516E	IgM IMMUNOBLOT	RES	N		6321-4
9535B	IgM BAND(s)	RES	N		13503-5
82516F	INTERPRETATION	RES	N		59464-8

HTLV I/II Ab Screen (Mayo HTLVI) (94390)

Effective Date 12/1/2012

CPT(s): 86790

Expiration Date:

Billing No: 94390

Interface Code: M9539

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9539A	HTLV-I/II AB EIA SCREEN	RES	N		29901-6

Iodine, 24 hr Urine (Mayo UIOD) (97510)

Effective Date 12/1/2012

CPT(s): 83789

Expiration Date:

Billing No: 97510

Interface Code: M9549

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDUR21	COLLECTION DURATION	AOE	Y			TEXT		
MVOL18	URINE VOLUME	AOE	Y			TEXT		
9549A	IODINE	RES	N	mcg/spec	2492-7			
9549B	COLLECTION DURATION	RES	N	hours	13362-9			
9549C	URINE VOLUME	RES	N	mL	3167-4			
9549D	IODINE CONCENTRATION	RES	N	mcg/L	26842-5			

HLA-B27, Blood (Mayo LY27B) (91960)

Effective Date 3/13/2014

CPT(s): 86812

Expiration Date:

Billing No: 91960

Interface Code: M9648

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9648A	HLA B27	RES	N		4821-5
9648B	HLA B27 INTERPRETATION	RES	N		

Aspergillus Fumigatus, IgG Ab (Mayo SASP) (99163)

Effective Date 12/1/2012

CPT(s): 86606

Expiration Date:

Billing No: 99163

Interface Code: M9678

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9678A	ASPERGILLUS FUMIGATUS, IgG	RES	N		26954-8

Androstenedione, Serum (Mayo ANST) (90280)

Effective Date 12/1/2012

CPT(s): 82157

Expiration Date:

Billing No: 90280

Interface Code: M9709

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9709B	ANDROSTENEDIONE, S	RES	N		1854-9

Selenium, Serum (Mayo SES) (99203)

Effective Date 12/1/2012

CPT(s): 84255

Expiration Date:

Billing No: 99203

Interface Code: M9765

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9765A	SELENIUM	RES	N	ng/dL	5724-0

Marijuana Urine Screen (26100)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 26100

Interface Code: MARSC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MARSC	MARIJUANA URINE SCREEN	RES	N		14312-3

Bird Fancier's Panel III (MML to IBT Lab) (99290)

Effective Date 12/1/2012

CPT(s): 82785, 86003 x 5, 86331 x 12

Expiration Date:

Billing No: 99290

Interface Code: MBIRD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BIRD	BIRD FANCIER'S PROFILE	RES	N		

Methemoglobin Quant. (26151)

Effective Date 12/1/2012

CPT(s): 83050

Expiration Date:

Billing No: 26151

Interface Code: METHGB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
METHGB	METHEMOGLOBIN QUANT.	RES	N	%	2614-6

Magnesium (25950)

Effective Date 12/1/2012

CPT(s): 83735

Expiration Date:

Billing No: 25950

Interface Code: MG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MG	MAGNESIUM	RES	N	mg/dL	19123-9

Miscellaneous Blood Bank Testing

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Additional CPTs will be billed when appropriate.

Billing No: 99999

Interface Code: MISCBB

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z23	BB Info: Indicate request and info required	AOE	Y			TEXT		
BBREQ	HIS Comments:	RES	N					

NASH FibroSURE (Mayo) (99235)

Effective Date 6/9/2015
Expiration Date:

CPT(s): 82172, 82247, 82465, 82947, 82977, 83883, 84450, 84460, 84478

Billing No: 99235

Interface Code: MNASH

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
NASHHT	NASH PATIENT HEIGHT INCHES	AOE	N			NUMERIC		
NASHWT	NASH PATIENT WEIGHT LBS	AOE	N			NUMERIC		
NASH	NASH FIBROSURE	RES	N					

Monospot (Heterophile) Screen (26380)

Effective Date 7/30/2014
Expiration Date:

CPT(s): 86308

Billing No: 26380

Interface Code: MONOT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MONOT	MONOSPOT(HETEROPHILE) SCREEN	RES	N		5213-4

Phenosense Integrase (Mayo) (92543)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 87906

Billing No: 92543

Interface Code: MPHENO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PHENO	PHENOSENSE INTEGRASE	RES	N		

West Nile Virus Ab Neut by PRNT (Focus 88315 via Mayo) (90130)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86382

Billing No: 90130

Interface Code: MWNCON

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WNCON	WEST NILE VIRUS NEUT TEST	RES	N		

Mycoplasma IgM AB qual. (26395)

Effective Date 12/1/2012

CPT(s): 86738

Expiration Date:

Billing No: 26395

Interface Code: MYCOPL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MYCOPL	MYCOPLASMA IgM AB, QUAL	RES	N		21406-4

Myoglobin (26391)

Effective Date 12/1/2012

CPT(s): 83874

Expiration Date:

Billing No: 26391

Interface Code: MYOS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MYOS	MYOGLOBIN	RES	N	ng/mL	2639-3

Sodium (28350)

Effective Date 12/1/2012

CPT(s): 84295

Expiration Date:

Billing No: 28350

Interface Code: NA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NA	SODIUM	RES	N	mEq/L	2951-2

ACTH Stimulation (Cortisol Stimulation Study) (22620)

Effective Date 4/11/2013

CPT(s): 82533 x 3

Expiration Date:

Billing No: 22620

Interface Code: NACTH

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
NCORBT	TIME OF BASELINE DRAW	AOE	Y			TEXT		
NCOR3T	TIME OF 30 MIN DRAW	AOE	Y			TEXT		
NCOR6T	TIME OF 60 MIN DRAW	AOE	Y			TEXT		
NCORB	CORTISOL BASELINE	RES	N	ug/dL	43215-3			
NCOR30	CORTISOL (30 MINUTE)	RES	N	ug/dL	26530-6			
NCOR60	CORTISOL (60 MINUTE)	RES	N	ug/dL	26528-0			

Adenovirus DNA Detection, Other (UNMC) (99387)

Effective Date 12/1/2012

CPT(s): 87798

Expiration Date:

Billing No: 99387

Interface Code: NADVOT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADVOT	ADENOVIRUS DNA DETECTION	RES	N		

ZAlpha-Feto Maternal Serum (UNMC AFPO) (FMCH, G+F use only) (99500)

Effective Date 9/14/2015

CPT(s): 82105

Expiration Date:

Billing No: 99500

Interface Code: NAFPMS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NSPBIF	OPEN SPINA BIFIDA	RES	N		
QCOM	QUAD/AFP COMMENT:	RES	N		

Amikacin, Peak (UNMC AMIKP) (91883)

Effective Date 3/11/2016

CPT(s): 80150

Expiration Date:

Billing No: 91883

Interface Code: NAMIKP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMIKP	AMIKACIN PEAK	RES	N	ug/mL	3319-1

Amikacin, Trough (UNMC AMIKT) (91318)

Effective Date 3/11/2016

CPT(s): 80150

Expiration Date:

Billing No: 91318

Interface Code: NAMIKT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMIKT	AMIKACIN TROUGH	RES	N	ug/mL	3321-7

Drug Confirmation GC/MS - Amphetamine,Urine (MT 4740) (91062)

Effective Date 1/1/2015

CPT(s): 80324

Expiration Date:

Billing No: 91062

Interface Code: NAMPC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NAMPC	DRUG CONFIRM GC/MS - AMPHETAMINE (U)	RES	N		

ANA Screen (50295)

Effective Date 12/1/2012

CPT(s): 86038

Expiration Date:

Billing No: 50295

Interface Code: NANA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ANASC	ANA SCREEN	RES	N	U	5047-6
ANAINT	INTERPRETATION	RES	N		44083-4

Drug Confirmation GC/MS - Barbiturate, Urine (MT 1512) (91064)

Effective Date 1/1/2015

CPT(s): 80345

Expiration Date:

Billing No: 91064

Interface Code: NBARBC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NBARBC	DRUG CONFIRM GC/MS -BARBITUATE (U)	RES	N		

Newborn DAT (Direct Coombs) (10310)

Effective Date 12/1/2012

CPT(s): 86880

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 10310

Interface Code: NBDAT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%DIG	DAT, ANTI-IgG	RES	N		1006-6

Drug Confirmation GC/MS - Benzodiazapine, Urine (MT 21396) (91066)

Effective Date 1/1/2015

CPT(s): 80346

Expiration Date:

Billing No: 91066

Interface Code: NBENZC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NBENZC	DRUG CONFIRM GC/MS - BENZODIAZAPINE (U)	RES	N		

Brain Natriuretic Peptide (BNP) (21245)

Effective Date 12/1/2012

CPT(s): 83880

Expiration Date:

Billing No: 21245

Interface Code: NBNP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NBNP	BRAIN NATRIURETIC PEPTIDE (BNP)	RES	N	pg/mL	30934-4

Bordetella pertussis, Rapid by DNA Amp (CHI-StE) (28320)

Effective Date 12/8/2014

CPT(s): 86615

Expiration Date:

Billing No: 28320

Interface Code: NBPERT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BPERT	B. PERTUSSIS, RAPID by DNA AMP	RES	N		43913-3

Cancer Antigen 15-3 (28672)

Effective Date 12/1/2012

CPT(s): 86300

Expiration Date:

Billing No: 28672

Interface Code: NCA153

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CA153	CANCER ANTIGEN 15-3	RES	N	U/mL	6875-9

Calcium Ionized (21550)

Effective Date 12/1/2012

CPT(s): 82330

Expiration Date:

Billing No: 21550

Interface Code: NCAION

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NCAION	CALCIUM IONIZED	RES	N	mM/L at pH 7.4	19072-8

Calprotectin, Fecal (ARUP 0092303) (90590)

Effective Date 11/4/2014

CPT(s): 83993

Expiration Date:

Billing No: 90590

Interface Code: NCALPR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CALPRO	CALPROTECTIN, FECAL	RES	N	ug/g	38445-3

CBC w/ Auto Diff (40300)

Effective Date 10/8/2013

CPT(s): 85025

Expiration Date:

Smear review or manual differential will be done if indicated

Billing No: 40300

Interface Code: NCBC May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WBC	WBC	RES	N	tho/cmm	6690-2
RBC	RBC	RES	N	mil/cmm	789-8
HGB	HEMOGLOBIN	RES	N	gm/dL	718-7
HCT	HEMATOCRIT	RES	N	%	4544-3
MCV	MCV	RES	N	fL	787-2
MCH	MCH	RES	N	pg	785-6
MCHC	MCHC	RES	N	%	786-4
RDW	RDW	RES	N	%	788-0
PLTC	PLATELET COUNT	RES	N	tho/cmm	777-3
MPV	MPV	RES	N	cmc	32623-1
DTYP	DIFF TYPE	RES	N		49024-3
APNRBC	NRBC %, AUTO	RES	N	%	58413-6
ABNRBC	NRBC ABS, AUTO	RES	N	tho/cmm	771-6
BLSTP	BLAST, %	PRFLX	N	%	709-6
PROMP	PROMYELOCYTE, %	PRFLX	N	%	783-1
MYEP	MYELOCYTE, %	PRFLX	N	%	749-2
METAP	METAMYELOCYTE, %	PRFLX	N	%	740-1
BANDP	BAND NEUTROPHIL, %	PRFLX	N	%	764-1
SEGP	SEG NEUTROPHIL, %	PRFLX	N	%	769-0
LYMPP	LYMPHOCYTE, %	PRFLX	N	%	737-7
MONOP	MONOCYTE, %	PRFLX	N	%	744-3
EOSP	EOSINOPHIL, %	PRFLX	N	%	714-6
BASOP	BASOPHIL, %	PRFLX	N	%	707-0
BLSTAB	BLAST, ABS	PRFLX	N	tho/cmm	708-8
TOTANC	NEUTROPHIL TOTAL, ABS	PRFLX	N	tho/cmm	753-4
LYMPAB	LYMPHOCYTE, ABS	PRFLX	N	tho/cmm	732-8
MONOAB	MONOCYTE, ABS	PRFLX	N	tho/cmm	743-5
EOSAB	EOSINOPHIL, ABS	PRFLX	N	tho/cmm	712-0

BASOAB	BASOPHIL, ABS	PRFLX	N	tho/cmm	705-4
APIG	IM GRANS %, AUTO	PRFLX	N	%	71695-1
APNEUT	NEUTROPHIL %, AUTO	PRFLX	N	%	770-8
APLYMP	LYMPHOCYTE %, AUTO	PRFLX	N	%	736-9
APMONO	MONOCYTE %, AUTO	PRFLX	N	%	5905-5
APEOS	EOSINOPHIL %, AUTO	PRFLX	N	%	713-8
APBASO	BASOPHIL %, AUTO	PRFLX	N	%	706-2
ABIG	IM GRANS ABS, AUTO	PRFLX	N	tho/cmm	53115-2
ABNEUT	NEUTROPHIL ABS, AUTO	PRFLX	N	tho/cmm	751-8
ABLYMP	LYMPHOCYTE ABS, AUTO	PRFLX	N	tho/cmm	731-0
ABMONO	MONOCYTE ABS, AUTO	PRFLX	N	tho/cmm	742-7
ABEOS	EOSINOPHIL ABS, AUTO	PRFLX	N	tho/cmm	711-2
ABBASO	BASOPHIL ABS, AUTO	PRFLX	N	tho/cmm	704-7
MEG	MEGAKARYOCYTE	PRFLX	N	#/100 WBC	19252-6
RLYMP	REACTIVE LYMPHOCYTES	PRFLX	N	% of total lymphs	13046-8
NRBC	NRBC	PRFLX	N	#/100 WBC	771-6
SMREV	SMEAR REVIEW	PRFLX	N		
RBCM	RBC MORPHOLOGY	PRFLX	N		6742-1
HYPO	HYPOCHROMASIA	PRFLX	N		728-6
POLY	POLYCHROMASIA	PRFLX	N		10378-8
SPHER	SPHEROCYTES	PRFLX	N		802-9
TARG	TARGET CELLS	PRFLX	N		10381-2
STOM	STOMATOCYTES	PRFLX	N		10380-4
OVAL	OVALOCYTES	PRFLX	N		774-0
TEAR	TEAR DROPS	PRFLX	N		7791-7
FRAG	FRAGMENTED RBC's	PRFLX	N		51630-2
BURR	BURR CELLS	PRFLX	N		7790-9
ACAN	ACANTHOCYTES	PRFLX	N		7789-1
SICKL	SICKLE CELLS	PRFLX	N		801-1
HGBC	HEMOGLOBIN C CRYSTALS	PRFLX	N		48707-4
BSTIP	BASOPHILIC STIPPLING	PRFLX	N		703-9
HJ	HOWELL-JOLLY BODIES	PRFLX	N		7793-3
PAPP	PAPPENHEIMER BODIES	PRFLX	N		7795-8

MALAR	MALARIAL PARASITES	PRFLX	N	32700-7
ROUL	ROULEAUX	PRFLX	N	7797-4
AGGL	COLD AGGLUTINATION	PRFLX	N	32672-8
WBCM	WBC MORPHOLOGY	PRFLX	N	
TG	TOXIC GRANULATION	PRFLX	N	803-7
TV	TOXIC VACULATION	PRFLX	N	50672-5
DB	DOHLE BODIES	PRFLX	N	7792-5
HYPSG	HYPERSEGMENTATION	PRFLX	N	765-8
HYPOG	HYPOGRANULATION	PRFLX	N	40654-6
PLCLYM	PLASMACYTOID LYMPHOCYTES	PRFLX	N	33834-3
PLTE	PLATELET ESTIMATE	PRFLX	N	9317-9
PLTM	PLATELET MORPHOLOGY	PRFLX	N	48705-8
BZPLT	BIZARRE PLATELETS	PRFLX	N	60455-3
MCPLT	MACRO PLATELETS	PRFLX	N	5908-9
CLPLT	CLUMPED PLATELETS	PRFLX	N	7796-6
AGPLT	AGRANULAR PLATELETS	PRFLX	N	33216-3
MACCYT	MACROCYTOSIS	PRFLX	N	738-5
MICCYT	MICROCYTOSIS	PRFLX	N	741-9

Cyclic Citrullinated Peptide AB (28674)

Effective Date 12/1/2012

CPT(s): 86200

Expiration Date:

Billing No: 28674

Interface Code: NCCP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CCPG	CYCLIC CITRULLINATED PEP AB	RES	N	U/mL	32218-0

Clostridium difficile by DNA Amplification (52520)

Effective Date 12/1/2012

CPT(s): 87493

Expiration Date:

Billing No: 52520

Interface Code: NCDIFF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CSPEC	SPECIMEN	RES	N		66746-9
CDIFF	CL DIFFICILE TOXIN	RES	N		34712-0

Celiac Disease Reflexive Cascade (ARUP 2008114) (90699)

Effective Date 10/22/2015

CPT(s): 82784

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90699

Interface Code: NCECAS May Reflex additional testing

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CELCAS	CELIAC DISEASE CASCADE	RES	N		

Celiac Disease Profile IV (92409)

Effective Date 7/1/2014

CPT(s): 83516 x 3, 86255 x 2

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 92409

Interface Code: NCELPR Package includes the following tests: Tissue Transglutaminase AB, IgA (28681), Gliadin (Deamidated) AB, IgG (28680), Gliadin (Deamidated) AB, IgA (28679), Reticulin Antibodies, Serum (Mayo RTA) (98660), Endomysial AB IgA Serum (Mayo EMA) (93910)

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Chlamydia Trachomatis, Swab/Urine (52455)

Effective Date 12/1/2012

CPT(s): 87491

Expiration Date:

Billing No: 52455

Interface Code: NCHLAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES2	SPECIMEN DESCRIPTION	AOE	Y		
SDES2	SPECIMEN DESCRIPTION	RES	N		31208-2
NCHLA	CHLAMYDIA TRACH AG DNA AMP	RES	N		35729-3

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	ENCV`UR`URINE	Endocervical`Urethral`Urine

Chlamydia Trachomatis, Pap Vial (52456)

Effective Date 10/14/2014

CPT(s): 87491

Expiration Date:

Billing No: 52456

Interface Code: NCHLAV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHLAV	CHLAMYDIA TRACH AG DNA AMP	RES	N		35729-3

Chylomicron Screen, BF (UNMC) (90938)

Effective Date 8/12/2014

CPT(s): 82664

Expiration Date:

Billing No: 90938

Interface Code: NCHYLO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
Z38	FLUID TYPE	AOE	Y		
CHYLO	CHYLOMICRON SCREEN, BF	RES	N		

A O E

Type	List Codes	List Code Descriptions
TEXT		

Cytomegalovirus Ab, IgG + IgM (50350)

Effective Date 7/9/2014

CPT(s): 86644, 86645

Expiration Date:

Billing No: 50350

Interface Code: NCMVAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMVIGG	CMV IgG INDEX	RES	N	index	5124-3
CGINT	CYTOMEGALOVIRUS AB. IgG	RES	N		13949-3
CMVIGM	CMV IgM INDEX	RES	N	index	5126-8
CMINT	CYTOMEGALOVIRUS AB, IgM	RES	N		24119-0

Cytomegalovirus Ab, IgG (50360)

Effective Date 7/9/2014

CPT(s): 86644

Expiration Date:

Billing No: 50360

Interface Code: NCMVIG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMVIGG	CMB IgG INDEX	RES	N	index	5124-3
CGINT	CYTOMEGALOVIRUS AB. IgG	RES	N		13949-3

Cytomegalovirus Ab, IgM (50370)

Effective Date 7/9/2014

CPT(s): 86645

Expiration Date:

Billing No: 50370

Interface Code: NCMVIM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMVIGM	CMV IgM INDEX	RES	N	index	5126-8
CMINT	CYTOMEGALOVIRUS AB, IgM	RES	N		24119-0

Drug Confirmation GC/MS - Cocaine, Urine (MT 831) (91068)

Effective Date 1/1/2015

CPT(s): 80353

Expiration Date:

Billing No: 91068

Interface Code: NCOCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NCOCC	DRUG CONFIRM GC/MS - COCAINE (U)	RES	N		

Compliance 10 Drug Screen w/ Reflex (MedTox 100427) (93410)

Effective Date 1/1/2015

CPT(s): 80301, 80324, 80346, 80348, 80353, 80354, 80358, 80359, 80365, 82570

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 93410

Interface Code: NCOM10

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COM10	COMPLIANCE DRUG SCREEN 10	RES	N		

Compliance Drug Screen (Medtox 100425) (90508)

Effective Date 1/1/2015

CPT(s): 80326, 80331, 80334, 80337, 80338, 80341, 80344, 80346, 80348, 80353, 80354, 80355, 80357, 80358, 80359, 80360, 80361, 80364, 80365, 80366, 80367, 80368, 80370, 80371, 80372, 80373, 80301, 80377, 82570, 80302, 83992

Expiration Date:

Billing No: 90508

Interface Code: NCOMMD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COMMD	COMPLIANCE DRUG SCREEN	RES	N		

Creatinine Clearance (22750)

Effective Date 12/18/2014

CPT(s): 82575

Expiration Date:

Billing No: 22750

Interface Code: NCRC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UVOL	URINE VOLUME	AOE	N	mL		TEXT		
HRS	COLLECTION PERIOD	AOE	N	hrs		TEXT		
INCH	HEIGHT	AOE	N	inches		TEXT		
LBS	WEIGHT	AOE	N	lbs		TEXT		
CORCL	MEASURED CLEARANCE	RES	N	ml/min/sq.m	33558-8			
ESTCL	ESTIMATED CLEARANCE	RES	N	ml/min/sq.m	35592-5			
VAR	VARIANCE FROM ESTIMATE	RES	N	%				
CR	CREATININE	RES	N	mg/dL	2160-0			
UCR	CREATININE, URINE	RES	N	mg/dL	2161-8			
UCRDCL	CREATININE, TIMED URINE	RES	N	mg/day	2162-6			
UVOL	URINE VOLUME	RES	N	mL	28009-9			
HRS	COLLECTION PERIOD	RES	N	hrs	13362-9			
INCH	HEIGHT	RES	N	inches	8302-2			
LBS	WEIGHT	RES	N	lbs	29463-7			

Cyclosporine A (UNMC) (94320)

Effective Date 12/1/2012

CPT(s): 80158

Expiration Date:

Billing No: 94320

Interface Code: NCYCLO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NCYCLO	Cyclosporine A (UNMC)	RES	N		

Drugs of Abuse Screen, 10 Panel (MedTox 20318) (91252)

Effective Date 11/3/2015

CPT(s): 80301

Expiration Date:

Billing No: 91252

Interface Code: NDAU10

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DAU10	DRUGS OF ABUSE 10	RES	N		

Gliadin (Deamidated) AB, IgA (28679)

Effective Date 10/30/2012

CPT(s): 83516

Expiration Date:

Billing No: 28679

Interface Code: NDGLA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DGLA	GLIADIN (DEAMIDATED) AB, IgA	RES	N	EU/mL	63453-5
DGLAI	GLIADIN IgA INTERPRETATION	RES	N		

Gliadin (Deamidated) AB, IgG (28680)

Effective Date 10/30/2012

CPT(s): 83516

Expiration Date:

Billing No: 28680

Interface Code: NDGLG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DGLG	GLIADIN (DEAMIDATED) AB, IgG	RES	N	EU/mL	63459-2
DGLGI	GLIADIN IgG INTERPRETATION	RES	N		

Dehydroepiandrosterone Sulfate (DHEA-S) (23010)

Effective Date 12/1/2012

CPT(s): 82627

Expiration Date:

Billing No: 23010

Interface Code: NDHEAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DHEAS	DHEA-S	RES	N	ug/dL	2191-5

Digitoxin (Quest 417Z) (91050)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 91050

Interface Code: NDIGIT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NDIGIT	DIGITOXIN	RES	N		

Phenytoin (Dilantin), Total (26950)

Effective Date 6/4/2013

CPT(s): 80185

Expiration Date:

Billing No: 26950

Interface Code: NDILAN

Result/AOE Code	Description	Type	Suppress	Units	LOINC	AOE Type	AOE List Codes	AOE List Code Descriptions
DTDIL	DATE OF LAST DOSE	AOE	N			DATE		
TMDIL	TIME OF LAST DOSE	AOE	N			TEXT		
DSDIL	DOSAGE	AOE	N			TEXT		
DILANT	PHENYTOIN	RES	N	mg/L	3968-5			
DTDIL	DATE OF LAST DOSE	RES	N		29742-4			
TMDIL	TIME OF LAST DOSE	RES	N		29637-6			
DSDIL	DOSAGE	RES	N		18817-7			

D-Dimer Quant (40450)

Effective Date 10/29/2014

CPT(s): 85379

Expiration Date:

Billing No: 40450

Interface Code: NDIM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NDIMER	D-DIMER, QUANT.	RES	N	mg/L	48065-7
NDICOM	VTE EXCLUSION CUTOFF	RES	N	mg/L	48065-7

Epstein-Barr Virus (EBNA), IgG (50380)

Effective Date 7/9/2014

CPT(s): 86664

Expiration Date:

Billing No: 50380

Interface Code: NEBNA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EBNA	EBNA INDEX	RES	N	index	31372-6
EBNAI	EBNA	RES	N		5156-5

Epstein Barr Virus (EBV) Ab, IgG, IgM, EBNA (50410)

Effective Date 7/9/2014

CPT(s): 86664, 86665 x 2

Expiration Date:

Billing No: 50410

Interface Code: NEBV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EBVG	EBV VCA IgG INDEX	RES	N	index	5157-3
EBVGI	EBV VCA IgG	RES	N		24114-1
EBVM	EBV VCA IgM INDEX	RES	N	index	5159-9
EBVMI	EBV VCA IgM	RES	N		24115-8
EBNA	EBNA INDEX	RES	N	index	31372-6
EBNAI	EBNA	RES	N		5156-5
EBVINT	INTERPRETATION	RES	N		

Epstein-Barr Virus VCA, IgG (50390)

Effective Date 7/9/2014

CPT(s): 86665

Expiration Date:

Billing No: 50390

Interface Code: NEBVG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EBVG	EBV VCA IgG INDEX	RES	N	index	5157-3
EBVGI	EBV VCA IgG	RES	N		24114-1

Epstein-Barr Virus VCA, IgM (50400)

Effective Date 7/9/2014

CPT(s): 86665

Expiration Date:

Billing No: 50400

Interface Code: NEBVM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EBVM	EBV VCA IgM INDEX	RES	N	index	5159-9
EBVMI	EBV VCA IgM	RES	N		24115-8

Eosinophils, Absolute (40550)

Effective Date 12/1/2009

CPT(s): 85999

Expiration Date:

Billing No: 40550

Interface Code: NEOCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ABEOS	EOSINOPHIL ABS, AUTO	RES	N	thou/cmm	711-2

Fluid Cell Count w/ Cell ID (41000)

Effective Date 6/2/2015

CPT(s): 89051

Expiration Date:

Billing No: 41000

Interface Code: NFCTID

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
FLTYPE	TYPE, FL	AOE	N			TEXT		
FSIT	SITE, FL	AOE	N			TEXT		
FVOL	VOLUME in mL, FL	AOE	N			NUMERIC		
FLTYPE	TYPE, FL	RES	N		14725-6			
FSIT	SITE, FL	RES	N		19803-6			
FVOL	VOLUME, FL	RES	N	mL	12254-9			
FAPP	APPEARANCE, FL	RES	N		9335-1			
FCOL	COLOR, FL	RES	N		6824-7			
FRBC	RBC, FL	RES	N	/cmm	23860-0			
FNC	NUCLEATED CELLS, FL	RES	N	/cmm	71690-2			
FMNC	MONONUCLEAR CELLS, FL	RES	N	%	30437-8			
FPMN	POLYNUCLEAR CELLS, FL	RES	N	%	26513-2			
FOTH	OTHER CELLS, FL	RES	N		58472-2			
FCOM	COMMENTS, FL	RES	N					
BFNRD	REFERENCE RANGE, FL	RES	N		19147-8			

Group A Strep AG w/rfx cult. (50000)

Effective Date 12/1/2012

CPT(s): 87430

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 50000

Interface Code: NGASS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NGASS	GROUP A STREP SCR w/ RFX CULT	RES	N		11268-0

Neisseria Gonorrhoeae, Swab/Urine (54565)

Effective Date 3/8/2016

CPT(s): 87591

Expiration Date:

Billing No: 54565

Interface Code: NGCAMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES1	SPECIMEN DESCRIPTION:	AOE	Y			SELECTLIST	ENCV`UR`URINE	Endocervical`Urethral`Urine
SDES1	SPECIMEN DESCRIPTION:	RES	N		31208-2			
GCAMP	N GONORRHOEAE AG DNA AMP	RES	N		43403-5			

Neisseria Gonorrhoeae/ Chlamydia Trachomatis, Swab/Urine (52458)

Effective Date 12/1/2012

CPT(s): 87491, 87591

Expiration Date:

Billing No: 52458

Interface Code: NGCCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES5	SPECIMEN DESCRIPTION:	AOE	Y			SELECTLIST	ENCV`UR`URINE	Endocervical`Urethral`Urine
SDES5	SPECIMEN DESCRIPTION:	RES	N		31208-2			
GCAMP	N GONORRHOEAE AG DNA AMP	RES	N		43403-5			
NCHLA	CHLAMYDIA TRACH AG DNA AMP	RES	N		35729-3			

Neisseria Gonorrhoeae/ Chlamydia Trachomatis, Pap Vial (54568)

Effective Date 3/7/2016

CPT(s): 87491, 87591

Expiration Date:

Billing No: 54568

Interface Code: NGCCTV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GCAMPV	N GONORRHOEAE AG DNA AMP	RES	N		43403-5
CHLAV	CHLAMYDIA TRACH AG DNA AMP	RES	N		35729-3

Neisseria Gonorrhoeae, Pap Vial (54566)

Effective Date 3/7/2016

CPT(s): 87591

Expiration Date:

Billing No: 54566

Interface Code: NGCV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GCAMPV	N GONORRHOEAE AG DNA AMP	RES	N		43403-5

Gestational Diabetic Screen (23700)

Effective Date 12/1/2012

CPT(s): 82950

Expiration Date:

Billing No: 23700

Interface Code: NGDS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
Z16	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
GGGTA	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
GT1TA	TIME OF 1 HOUR DRAW	AOE	Y			TEXT		
GGGA	GLUCOSE LOAD:	RES	N	grams	4269-7			
GT1A	GLUCOSE TOL-1 HR	RES	N	mg/dL	20438-8			
GTREFA	GLUCOSE TOL COMMENTS	RES	N		50667-5			

GI Pathogen Panel w/ Reflex (UNMC) (93334)

Effective Date 1/22/2015

CPT(s): 87507

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93334

Interface Code: NGIP

Isolation cultures will automatically be ordered for specimens positive for Campylobacter and Shigella. Recovery cultures for other pathogens IDed may be performed upon physician request.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMPY	CAMPYLOBACTER SP.	RES	N		71429-5
PLESI	PLESIOMONAS SP.	RES	N		70296-9
SLMSP	SALMONELLA SPECIES	RES	N		49612-5
VBRSP	VIBRIO SPECIES	RES	N		49609-1
VBRC	VIBRIO CHOLERAE	RES	N		61371-1
YRSE	Y. ENTEROCOLITICA	RES	N		48646-4
EAEC	E. COLI (EAEC)	RES	N		IP
EPEC	E. COLI (EPEC)	RES	N		IP
ETEC	E. COLI (ETEC)	RES	N		IP
STECOL	E. COLI (STEC)	RES	N		53947-8
EC157	E. COLI (O157)	RES	N		38990-8
EIEC	SHIGELLA (EIEC)	RES	N		IP
CRYPT	CRYPTOSPORIDIUM	RES	N		60545-1
CAYE	C. CAYETANENSIS	RES	N		41436-7
EHISTO	E. HISTOLYTICA	RES	N		6396-6
GLAMB	GIARDIA LAMBLIA	RES	N		60544-4
ADNVF	ADENOVIRUS F 40/41	RES	N		39528-5
ASTRV	ASTROVIRUS	RES	N		69938-9
NOROV	NOROVIRUS GI/GII	RES	N		56748-7
ROTVA	ROTAVIRUS A	RES	N		62859-4
SAPO	SAPOVIRUS	RES	N		72111-8
GIPCOM	GIP COMMENT	RES	N		IP
GIPLAB	GIP PERFORMING LAB	RES	N		IP

Glucose Tolerance, OB, 2hr (F,1,2 hr) (24205)

Effective Date 12/1/2012

CPT(s): 82951

Expiration Date:

Billing No: 24205

Interface Code: NGTOB2

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
Z16	GRAMS OF GLUCOSE GIVEN?	AOE	Y			TEXT		
NGGGT	TIME GLUCOSE GIVEN	AOE	Y			TEXT		
NGTFT	TIME OF FASTING DRAW	AOE	Y			TEXT		
NGT1T	TIME OF 1 HOUR DRAW	AOE	Y			TEXT		
NGT2T	TIME OF 2 HOUR DRAW	AOE	Y			TEXT		
NGGG	GLUCOSE LOAD:	RES	N	grams	4269-7			
NGTF	GLUCOSE TOL-FASTING	RES	N	mg/dL	1547-9			
NGT1	GLUCOSE TOL-1 HR	RES	N	mg/dL	14756-1			
NGT2	GLUCOSE TOL-2 HR	RES	N	mg/dL	20436-2			
NGTREF	GLUCOSE TOL COMMENTS	RES	N		50667-5			

Hemoglobin A1C (24500)

Effective Date 12/1/2012

CPT(s): 83036

Expiration Date:

Billing No: 24500

Interface Code: NHA1C

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HA1C	HEMOGLOBIN A1C	RES	N	%	4548-4
EAG	EST. AVERAGE GLUCOSE (eAG)	RES	N	mg/dl	27353-2

Hepatitis C (HCV) Antibody (24800)

Effective Date 12/1/2012

CPT(s): 86803

Expiration Date:

Billing No: 24800

Interface Code: NHCV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCVSC	SIGNAL to CUT-OFF RATIO	RES	N		48159-8
HCV	HEPATITIS C ANTIBODY	RES	N		16128-1
HCVCOM	INTERPRETATION:	RES	N		

Hepatitis C High Reso Genotype (ARUP 2006898) (90844)

Effective Date 11/20/2015

CPT(s): 87902

Expiration Date:

Billing No: 90844

Interface Code: NHCVGE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCVGEN	HEP C HIGH RES GENOTYPE	RES	N		32266-7

CBC w/o Diff (Hemogram) (41200)

Effective Date 5/20/2015

CPT(s): 85027

Expiration Date:

Billing No: 41200

Interface Code: NHEMOG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WBC	WBC	RES	N	tho/cmm	6690-2
RBC	RBC	RES	N	mil/cmm	789-8
HGB	HEMOGLOBIN	RES	N	gm/dL	718-7
HCT	HEMATOCRIT	RES	N	%	4544-3
MCV	MCV	RES	N	fL	787-2
MCH	MCH	RES	N	pg	785-6
MCHC	MCHC	RES	N	%	786-4
RDW	RDW	RES	N	%	788-0
PLTC	PLATELET COUNT	RES	N	tho/cmm	777-3
APNRBC	NRBC %, AUTO	RES	N	%	58413-6
ABNRBC	NRBC ABS, AUTO	RES	N	tho/cmm	771-6

HIV 1/2 Ag/Ab 4th Generation with Reflex to Confirmation (24915)

Effective Date 12/17/2015

CPT(s): 87389

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 24915

Interface Code: NHIV12 May Reflex XHIVDI XHV1WB, XHIV2L

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIV	HIV 1/2 AG/AB 4TH GENERATION	RES	N		56888-1

H Pylori AB, IgG, IgM, IgA (50460)

Effective Date 12/1/2012

CPT(s): 86677 x 3

Expiration Date:

Billing No: 50460

Interface Code: NHPYL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HPYLG	HELICOBACTER PYLORI, AB, IgG	RES	N	U/mL	7902-0
HPYLM	HELICOBACTER PYLORI, AB, IgM	RES	N	U/mL	7903-8
HPYLA	HELICOBACTER PYLORI, AB, IgA	RES	N	U/mL	7901-2

Helicobacter Pylori AB, IgA (50450)

Effective Date 12/1/2012

CPT(s): 86677

Expiration Date:

Billing No: 50450

Interface Code: NHPYLA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HPYLA	HELICOBACTER PYLORI, AB, IgA	RES	N	U/mL	7901-2

Helicobacter Pylori AB, IgG (50430)

Effective Date 12/1/2012

CPT(s): 86677

Expiration Date:

Billing No: 50430

Interface Code: NHPYLG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HPYLG	HELICOBACTER PYLORI, AB, IgG	RES	N	U/mL	7902-0

Helicobacter Pylori AB, IgM (50440)

Effective Date 12/1/2012

CPT(s): 86677

Expiration Date:

Billing No: 50440

Interface Code: NHPYLM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HPYLM	HELICOBACTER PYLORI, AB, IgM	RES	N	U/mL	7903-8

Herpes Simplex Virus 1 by NAAT (24858)

Effective Date 3/22/2016

CPT(s): 87529

Expiration Date:

Billing No: 24858

Interface Code: NHSV1

Result/AOE Code	Description	Type	Suppress	Units	LOINC	AOE Type	AOE List Codes	AOE List Code Descriptions
HSV1SO	HSV SOURCE	AOE	N			SELECTLIST	ANOR`VC`NASAL`OCULAR`ORAL`UR`SKN`PENIS	ANORECTAL`VAGINAL-CERVICAL`NASAL`OCULAR`ORAL`URETHRAL`SKIN`PENIS
HSV1SO	HSV SOURCE	RES	N		31208-2			
HSV1	HERPES SIMPLEX VIRUS 1	RES	N		16130-7			

Herpes Simplex Virus 1/2 by NAAT (24857)

Effective Date 3/22/2016

CPT(s): 87529 x 2

Expiration Date:

Billing No: 24857

Interface Code: NHSV12

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
HSV1SO	HSV SOURCE	AOE	N			SELECTLIST	ANOR`VC`NASAL`OCULAR`ORAL`UR`SKN`PENIS`LABIA	ANORECTAL`VAGINAL-CERVICAL`NASAL`OCULAR`ORAL`URETHRAL`SKIN`PENIS`LABIA
HSV1SO	HSV SOURCE	RES	N		31208-2			
HSV1	HERPES SIMPLEX VIRUS 1	RES	N		16130-7			
HSV2	HERPES SIMPLES VIRUS 2	RES	N		16131-5			

Herpes Simplex Virus 2 by NAAT (24859)

Effective Date 3/22/2016

CPT(s): 87529

Expiration Date:

Billing No: 24859

Interface Code: NHSV2

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
HSV2SO	HSV SOURCE	AOE	N			SELECTLIST	ANOR`VC`NASAL`OCULAR`ORAL`UR`SKN`PENIS	ANORECTAL`VAGINAL-CERVICAL`NASAL`OCULAR`ORAL`URETHRAL`SKIN`PENIS
HSV2SO	HSV SOURCE	RES	N		31208-2			
HSV2	HERPES SIMPLES VIRUS 2	RES	N		16131-5			

Inflammatory Bowel Disease Profile (ARUP 0050567) (91134)

Effective Date 4/1/2015

CPT(s): 86671 x 2, 86255

Expiration Date:

Billing No: 91134

Interface Code: NIBDP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IBDP	INFLAMMATORY BOWEL DIS PROF	RES	N		

Interferon Neutralizing AB (ATH112) (96510)

Effective Date 12/16/2015

CPT(s): 86382, 88313

Expiration Date:

Billing No: 96510

Interface Code: NINA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NINA	INTERFERON NEUTRALIZING AB	RES	N		

Influenza Antigen, A and B (54080)

Effective Date 1/27/2014

CPT(s): 87400 x 2

Expiration Date:

Billing No: 54080

Interface Code: NINFLU

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SPEC7	SPECIMEN	AOE	Y			SELECTLIST	NASP`NPWASH`THRT	Nasopharyngeal Swab`Nasopharyngeal Washing`Throat Swab
SPEC7	SPECIMEN	RES	N		31208-2			
FLUA	INFLUENZA A	RES	N		46082-4			
FLUB	INFLUENZA B	RES	N		46083-2			

Lacosamide (VIMPAT) (MT777) (90170)

Effective Date 1/1/2015

CPT(s): 80339

Expiration Date:

Billing No: 90170

Interface Code: NLAC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NLACO	LACOSAMIDE	RES	N	ug/mL	

Lasix (Furosemide) (92180)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 92180

Interface Code: NLASX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NLASX	LASIX (FUROSEMIDE)	RES	N		

Lymph Subset Panel 5 (Q83608) (92340)

Effective Date 12/1/2012

CPT(s): 86361

Expiration Date:

Billing No: 92340

Interface Code: NLYM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NLYM5	LYMPHOCYTE SUBSET PANEL 5	RES	N		

Malaria/Blood Parasite (23761)

Effective Date 3/30/2009

CPT(s): 87015, 85060

Expiration Date:

Report and charges will be generated from Pathology Medical Services.

Billing No: 23761

Interface Code: NMAL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MALA	MALARIA/BLOOD PARASITE	RES	N		

Drug Confirmation, THC, Urine (Marijuana Metabolite) (MT 149) (92360)

Effective Date 1/1/2015

CPT(s): 80349

Expiration Date:

Billing No: 92360

Interface Code: NMARJC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMARJC	THC (Marijuana) METABOLITE URINE QT (confirm)	RES	N		

Maternal Screen 3 (Quest 29452) (92400)

Effective Date 6/25/2014

CPT(s): 82105, 82677, 84702

Expiration Date:

Billing No: 92400

Interface Code: NMAT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMAT3	MATERNAL SCREEN 3	RES	N		

Rubeola (Measles) AB, IgG (28682)

Effective Date 7/9/2014

CPT(s): 86765

Expiration Date:

Billing No: 28682

Interface Code: NMEAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MEAS	RUBEOLA IgG INDEX	RES	N	index	5244-9
MEASI	RUBEOLA (MEASLES) AB, IgG	RES	N		35275-7

Immune Status, MMR (30000)

Effective Date 8/12/2014

CPT(s): 86735, 86762, 86765

Expiration Date:

Billing No: 30000

Interface Code: NMMR Package includes Mumps IgG (NMUMP), Rubella Ab IgG (NRUB) and Rubeola (NMEAS)

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Myeloperoxidase Ab (MPO) IgG (28675)

Effective Date 12/18/2012

CPT(s): 83876

Expiration Date:

Billing No: 28675

Interface Code: NMPO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MPO	MYELOPEROXIDASE AB (MPO) IgG	RES	N	U/mL	48404-8
MPOI	MPO INTERPRETATION	RES	N		

Miscellaneous Test

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: NMT

Result/AOE		Type	Suppress	Units	LOINC	A O E		
Code	**Description**					**Type**	**List Codes**	**List Code Descriptions**
REFNO	REF LAB TEST NO.	AOE	Y			TEXT		
SPEC	SPECIMEN	AOE	N			TEXT		
NTST	TEST	AOE	N			TEXT		
REFLAB	REF LAB NAME:	AOE	N			TEXT		
SPEC	SPECIMEN	RES	N		31208-2			
NTST	TEST	RES	N					
RSLT	RESULT	RES	N					
REFLAB	REF LAB NAME:	RES	N					

Miscellaneous Test (Additional 2nd test)

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: NMT2

Result/AOE		Type	Suppress	Units	LOINC	A O E		
Code	**Description**					**Type**	**List Codes**	**List Code Descriptions**
REFNO2	REF LAB TEST NO.	AOE	Y			TEXT		
SPECM2	SPECIMEN	AOE	N			TEXT		
NTST2	TEST	AOE	N			TEXT		
RFLAB2	REF LAB NAME:	AOE	N			TEXT		
SPECM2	SPECIMEN	RES	N					
NTST2	TEST	RES	N					
RSLT2	RESULT	RES	N					
RFLAB2	REF LAB NAME:	RES	N					

Miscellaneous Test (Additional 3rd test)

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: NMT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
REFNO3	REF LAB TEST NO.	AOE	Y			TEXT		
SPECM3	SPECIMEN	AOE	N			TEXT		
NTST3	TEST	AOE	N			TEXT		
RFLAB3	REF LAB NAME:	AOE	N			TEXT		
SPECM3	SPECIMEN	RES	N					
NTST3	TEST	RES	N					
RSLT3	RESULT	RES	N					
RFLAB3	REF LAB NAME:	RES	N					

Mumps IgG Screen (50420)

Effective Date 7/9/2014

CPT(s): 86735

Expiration Date:

Billing No: 50420

Interface Code: NMUMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MUMPG	MUMPS IgG INDEX	RES	N	index	25418-5
MUMPI	MUMPS IgG	RES	N		6476-6

Neuronal Nuclear Antibody (Hu / Anna-1) w/Reflex (Q37053) (92580)

Effective Date 12/1/2012

CPT(s): 84181, 86255, 86256

Expiration Date:

Billing No: 92580

Interface Code: NNEUHU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NNEUHU	NEURONAL NUCLEAR AB (Hu / Anna-1) w/RFX	RES	N		

OB Panel w/ Reflex (65000)

Effective Date 8/12/2014

CPT(s): 80055

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 65000

Interface Code: NOBPN Package includes NCBC, RPR, NRUB, HBSR. May Reflex HBSCF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

OB Panel w/ Reflex HIV1/2 4th Generation (65002)

Effective Date 1/18/2016

CPT(s): 80081

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 65002

Interface Code: NOBPNH Package includes NCBC, RPR, NRUB, HBSR, NHIV12. May Reflex HBSCF, XHIVD1, XHV1WB, XHIV2L

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Drug Confirmation, Opiate, Expanded, Urine (Medtox 9377) (93325)

Effective Date 1/1/2015

CPT(s): 80356, 80361, 80365

Expiration Date:

Billing No: 93325

Interface Code: NOPIC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NOPIC	DRUG CONFIRM OPIATE, EXPANDED	RES	N		

Drug Confirmation GC/MS - PCP, Urine (MT 693) (90093)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 90093

Interface Code: NPCPC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NPCPC	DRUG CONFIRM GC/MS - PCP (U)	RES	N		

Proteinase 3 Ab (PR3), IgG (28677)

Effective Date 12/18/2012

CPT(s): 83516

Expiration Date:

Billing No: 28677

Interface Code: NPR3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PR3AB	PROTEINASE 3 AB (PR3) IgG	RES	N	U/mL	46267-1
PR3I	PR3 INTERPRETATION	RES	N		

Prothrombin Time - PT (INR) (41500)

Effective Date 12/1/2012

CPT(s): 85610

Expiration Date:

Billing No: 41500

Interface Code: NPT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PTINR	INR (COUMADIN MONITOR)	RES	N		6301-6
TPTINR	INR RANGE	RES	N		

PTT (Partial Thromboplastin Time) (41600)

Effective Date 12/1/2012

CPT(s): 85730

Expiration Date:

Billing No: 41600

Interface Code: NPTT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NPTT	PTT (Partial Thromboplastin Time)	RES	N	seconds	14979-9

ZQUAD Screen-Maternal (FMCH, G+F use only) (93950)

Effective Date 9/14/2015

CPT(s): 82105, 82677, 84702, 86336

Expiration Date:

Billing No: 93950

Interface Code: NQUAD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NDOWN	DOWN SYNDROME	RES	N		
NSPBIF	OPEN SPINA BIFIDA	RES	N		
NTRIS	TRISOMY 18	RES	N		
QCOM	COMMENT:	RES	N		

Retic Count (41650)

Effective Date 12/1/2012

CPT(s): 85045

Expiration Date:

Billing No: 41650

Interface Code: NRETIA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RETICP	RETIC %, AUTO	RES	N	%	17849-1
RETICA	RETIC ABS, AUTO	RES	N	tho/cmm	60474-4

RSV Antigen (52955)

Effective Date 1/27/2014

CPT(s): 87420

Expiration Date:

Billing No: 52955

Interface Code: NRSV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SPEC8	SPECIMEN	AOE	Y		
SPEC8	SPECIMEN	RES	N		31208-2
RSVR	RSV ANTIGEN	RES	N		68966-1

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	NASP`NPWASH	Nasophyngeal Swab`Nasopharyngeal Washing

Rubella Antibody, IgG (28280)

Effective Date 8/12/2014

CPT(s): 86762

Expiration Date:

Billing No: 28280

Interface Code: NRUB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RUBG	RUBELLA AB, IgG	RES	N	IU/mL	8014-3
RUBI	RUBELLA INTERPRETATION	RES	N		20458-6

Sensory Neuropathy Profile-XP (ATH263) (93058)

Effective Date 1/1/2015

CPT(s): 83520 x 6, 83516

Expiration Date:

Billing No: 93058

Interface Code: NSENMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NSEN	SENSORY NEUROPATHY PROFILE	RES	N		

Sensorimotor Neuropathy Profile Complete (ATH287) (93060)

Effective Date 1/2/2014

CPT(s): 83520 x 10, 83516

Expiration Date:

Billing No: 93060

Interface Code: NSMPRO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NSMPRO	SENSORIMOTOR NEUROPATH PROF	RES	N		

Occult Blood, Stool 1-3 Specimens (54570)

Effective Date 9/2/2015

CPT(s): 82270

Expiration Date:

Billing No: 54570

Interface Code: NSTOB

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
COLD1	SPEC 1 COLLECT DATE:	AOE	N		41394-8	DATE		
COLT1	SPEC 1 COLLECT TIME:	AOE	N		49049-0	TEXT		
COLD2	SPEC 2 COLLECT DATE:	AOE	N		61100-4	DATE		
COLT2	SPEC 2 COLLECT TIME:	AOE	N		49972-3	TEXT		
COLD3	SPEC 3 COLLECT DATE:	AOE	N		61099-8	DATE		
COLT3	SPEC 3 COLLECT TIME:	AOE	N		49971-5	TEXT		
STOB1	OCCULT BLOOD (SPEC 1)	RES	N		14563-1			
COLD1	SPEC 1 COLLECT DATE:	RES	N		41394-8			
COLT1	SPEC 1 COLLECT TIME:	RES	N		49049-0			
STOB2	OCCULT BLOOD (SPEC 2)	RES	N		14564-9			
COLD2	SPEC 2 COLLECT DATE:	RES	N		61100-4			
COLT2	SPEC 2 COLLECT TIME:	RES	N		49972-3			
STOB3	OCCULT BLOOD (SPEC 3)	RES	N		14565-6			
COLD3	SPEC 3 COLLECT DATE:	RES	N		61099-8			
COLT3	SPEC 3 COLLECT TIME:	RES	N		49971-5			

Occult Blood, Stool, 1 Specimen Only (54570)

Effective Date 9/2/2015

CPT(s): 82270

Expiration Date:

Billing No: 54570

Interface Code: NSTOB1

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
COLD1	SPEC 1 COLLECT DATE:	AOE	N		41394-8	DATE		
COLT1	SPEC 1 COLLECT TIME:	AOE	N		49049-0	TEXT		
STOB1	OCCULT BLOOD (SPEC 1)	RES	N		14563-1			
COLD1	SPEC 1 COLLECT DATE:	RES	N		41394-8			
COLT1	SPEC 1 COLLECT TIME:	RES	N		49049-0			

Occult Blood, Stool, 2 Specimens Only (54570)

Effective Date 9/2/2015

CPT(s): 82270

Expiration Date:

Billing No: 54570

Interface Code: NSTOB2

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
COLD1	SPEC 1 COLLECT DATE:	AOE	N		41394-8	DATE		
COLT1	SPEC 1 COLLECT TIME:	AOE	N		49049-0	TEXT		
COLD2	SPEC 2 COLLECT DATE:	AOE	N		41394-8	DATE		
COLT2	SPEC 2 COLLECT TIME:	AOE	N		49049-0	TEXT		
STOB1	OCCULT BLOOD (SPEC 1)	RES	N		14563-1			
COLD1	SPEC 1 COLLECT DATE:	RES	N		41394-8			
COLT1	SPEC 1 COLLECT TIME:	RES	N		49049-0			
STOB2	OCCULT BLOOD (SPEC 2)	RES	N		14563-1			
COLD2	SPEC 2 COLLECT DATE:	RES	N		41394-8			
COLT2	SPEC 2 COLLECT TIME:	RES	N		49049-0			

Thyroid Autoantibodies Panel (28673)

Effective Date 12/1/2012

CPT(s): 86800, 86376

Expiration Date:

Billing No: 28673

Interface Code: NTAP Includes Anti-TPO and Anti-Tg

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TPOAB	THYROID PEROXIDASE (TPO) AB	RES	N	U/mL	56477-3
TGAB	THYROGLOBULIN (Tg) ANTIBODY	RES	N	U/mL	56536-6
TAPCOM	THYROID AB COMMENT:	RES	N		

M Tuberculosis, QuantiFERON (TB) (UNMC) (99434) (Public Health Testing Only)

Effective Date 6/4/2013

CPT(s): 86480

Expiration Date:

Billing No: 99434

Interface Code: NTBIA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TBIA	TB INTERFERON ANTIGEN	RES	N		

Thyroglobulin (Tg) Antibody (28671)

Effective Date 12/1/2012

CPT(s): 86800

Expiration Date:

Billing No: 28671

Interface Code: NTGAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TGAB	THYROGLOBULIN (Tg) ANTIBODY	RES	N	U/mL	56536-6
TGCOM	ANTI-TG COMMENT:	RES	N		

Thiopurine Drug Metabolites (ARUP 2011134) (91103)

Effective Date 3/31/2016

CPT(s): 83789

Expiration Date:

Billing No: 91103

Interface Code: NTHIOP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
THIOP	THIOPURINE DRUG METABOLITES	RES	N		

Tobramycin, Peak (UNMC TOBRAP) (99565)

Effective Date 3/11/2016

CPT(s): 80200

Expiration Date:

Billing No: 99565

Interface Code: NTOBRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOBRAP	TOBRAMYCIN PEAK	RES	N	mcg/mL	4057-6

Tobramycin, Random (UNMC TOBRAR) (91317)

Effective Date 3/11/2016

CPT(s): 80200

Expiration Date:

Billing No: 91317

Interface Code: NTOBRR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOBRAR	TOBRAMYCIN RANDOM	RES	N	mcg/mL	35670-9

Tobramycin, Trough (UNMC TOBRAT) (99566)

Effective Date 3/11/2016

CPT(s): 80200

Expiration Date:

Billing No: 99566

Interface Code: NTOBRT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOBRAT	TOBRAMYCIN, TROUGH	RES	N	mcg/mL	40597-2

Thyroid Peroxidase (TPO) Antibody (28670)

Effective Date 12/1/2012

CPT(s): 86376

Expiration Date:

Billing No: 28670

Interface Code: NTPOAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TPOAB	THYROID PEROXIDASE (TPO) AB	RES	N	U/mL	56477-3
TPOCOM	ANTI-TPO COMMENT:	RES	N		

Trichomonas, Urine (50101)

Effective Date 12/1/2012

CPT(s): 81015

Expiration Date:

Billing No: 50101

Interface Code: NTRICU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRIK	TRICHOMONAS	RES	N		5813-1

T-SPOT TB (Oxford Lab) (93398)

Effective Date 10/29/2014

CPT(s): 86481

Expiration Date:

Billing No: 93398

Interface Code: NTSPOT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NSPOT	T-SPOT TB TEST	RES	N		

Tissue Transglutaminase AB, IgA (28681)

Effective Date 10/30/2012

CPT(s): 83516

Expiration Date:

Billing No: 28681

Interface Code: NTTGA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TTA	TISSUE TRANSGLUT. AB, IgA	RES	N	AU/mL	46128-5
TTAI	TTA INTERPRETATION	RES	N		

Fibrillarin (U3 RNP) (ZW164) (90394)

Effective Date 6/24/2013

CPT(s): 83520

Expiration Date:

Billing No: 90394

Interface Code: NU3RNP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
U3RNP	FIBRILLARIN (U3 RNP)	RES	N		

Urea Clearance (29130)

Effective Date 12/1/2012

CPT(s): 84545

Expiration Date:

Billing No: 29130

Interface Code: NURECL

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
INCH	HEIGHT	AOE	Y	inches		TEXT		
LBS	WEIGHT	AOE	Y	lbs		TEXT		
UVOL	URINE VOLUME	AOE	N	mL		TEXT		
HRS	COLLECTION PERIOD	AOE	N	hrs		TEXT		
UREASC	UREA STD CLEARANCE	RES	N	mL/min	13506-1			
UREAMC	UREA MAXIMUM CLEARANCE	RES	N	mL/min	50063-7			
BUN	BUN	RES	N	mg/dL	3094-0			
UNGM24	UREA NITROGEN, TIMED URINE	RES	N	gm/day	3096-5			
UVOL	URINE VOLUME	RES	N	mL	28009-9			
HRS	COLLECTION PERIOD	RES	N	hrs	13362-9			

25-Hydroxy Vitamin D (29600)

Effective Date 12/1/2012

CPT(s): 82306

Expiration Date:

Billing No: 29600

Interface Code: NVITD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VITAD	25-HYDROXY VITAMIN D	RES	N	ng/mL	49054-0
VITINT	INTERPRETATION	RES	N		

Varicella-Zoster Virus, IgG (29520)

Effective Date 7/9/2014

CPT(s): 86787

Expiration Date:

Billing No: 29520

Interface Code: NVZV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VZVG	VZV IgG INDEX	RES	N	index	5403-1
VZVI	VARICELLA-ZOSTER, IgG	RES	N		15410-4

Wet Prep (50310)

Effective Date 12/1/2012

CPT(s): 87210

Expiration Date:

Billing No: 50310

Interface Code: NWETP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
WPSP	SPECIMEN, WET PREP	AOE	N			TEXT		
WPSP	SPECIMEN, WET PREP	RES	N		66746-9			
WPWBC	WBC, WET PREP	RES	N		32761-9			
WPRBC	RBC, WET PREP	RES	N		44242-6			
WPEPI	EPITHELIAL CELLS, WET PREP	RES	N		32762-7			
WPTRIC	TRICHOMONAS, WET PREP	RES	N		32766-8			
WPCLUE	CLUE CELLS, WET PREP	RES	N		32764-3			
WPYEAS	YEAST, WET PREP	RES	N		32765-0			
WPBAC	BACTERIA, WET PREP	RES	N		32763-5			
WPOTH	OTHER ORGANISMS, WET PRET	RES	N		680-9			

West Nile Virus AB, IgG + IgM (50490)

Effective Date 12/1/2012

CPT(s): 86788, 86789

Expiration Date:

Billing No: 50490

Interface Code: NWNILE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NNILEG	WEST NILE VIRUS, IgG INDEX	RES	N		38997-3
NNILGI	WEST NILE VIRUS, IgG	RES	N		29566-7
NNILEM	WEST NILE VIRUS, IgM INDEX	RES	N		38166-5
NNILMI	WEST NILE VIRUS, IgM	RES	N		29567-5
NILEIN	WEST NILE INTERPRETATION	RES	N		

Ova and Parasites with Stain (O + P) (54850)

Effective Date 6/19/2014

CPT(s): 87177, 87209

Expiration Date:

Billing No: 54850

Interface Code: OAP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STCONC	STOOL CONCENTRATION	RES	N		10704-5
STPERM	STOOL PERMANENT MOUNT	RES	N		10704-5

Occult Blood, Gastic (54580)

Effective Date 12/1/2012

CPT(s): 82271

Expiration Date:

Billing No: 54580

Interface Code: OBG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
OBM	OCCULT BLOOD, GASTRIC	RES	N		2334-1

Manual Differential (40500)

Effective Date 12/1/2012

CPT(s): 85007

Expiration Date:

Billing No: 40500

Interface Code: ODIFF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ODIFF	MANUAL DIFFERENTIAL	RES	N		49024-3

Opiates Screen (26450)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 26450

Interface Code: OPIATE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
OPIATE	OPIATES SCREEN	RES	N		19299-7

Osmolality Serum (26500)

Effective Date 12/1/2012

CPT(s): 83930

Expiration Date:

Billing No: 26500

Interface Code: OSMO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
OSM	OSMOLALITY SERUM	RES	N	mOsm/kg	2692-2
OSMCA	OSMOLALITY CALCULATED	RES	N	mOsm/kg	18182-6
OSMGA	OSMOLALITY GAP	RES	N	mOsm/kg	33264-3

Prealbumin (27400)

Effective Date 4/29/2015

CPT(s): 84134

Expiration Date:

Billing No: 27400

Interface Code: PALB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PALB	PREALBUMIN	RES	N	mg/dL	46130-1

Pathology Specimen

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No: x999

Interface Code: PATH

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
PMSTIS	TISSUE SITE EACH PART	AOE	N			TEXT		
PMSPT	Number of Parts being Submitted	AOE	N			NUMERIC		
PMSTM	TIME IN FORMALIN (list each part/piece)	AOE	N			TEXT		
PMSSP	SURGICAL PROCEDURE	AOE	N			TEXT		
PMSCD	Clinical Diagnosis and History	AOE	N			TEXT		
PATH		RES	N		11529-5			

PCP (Phencyclidine) Screen (26700)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 26700

Interface Code: PCP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PCP	PCP (Phencyclidine) Screen	RES	N		14310-7

Specific Gravity, Pericardial Fluid (28486)

Effective Date 12/1/2012

CPT(s): 84315

Expiration Date:

Billing No: 28486

Interface Code: PCSPG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PCSPG	SPECIFIC GRAVITY, PERICARDIAL FLUID	RES	N		68384-7

Protein Electro Serum w/ T.Protein (27600)

Effective Date 12/1/2012

CPT(s): 84155, 84165

Expiration Date:

Billing No: 27600

Interface Code: PEL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TP	TOTAL PROTEIN	RES	N	gm/dL	2885-2
PEALB	ALBUMIN	RES	N	gm/dL	2862-1
PEA1	ALPHA-1	RES	N	gm/dL	2865-4
PEA2	ALPHA-2	RES	N	gm/dL	2868-8
PEBETA	BETA	RES	N	gm/dL	2871-2
PEGAM	GAMMA	RES	N	gm/dL	2874-6
MCBAND	MONOCLONAL BAND, SERUM	RES	N		13348-8
PEINT	SERUM ELEC. INTERPRETATION	RES	N		12851-2

Protein Electro Serum w/ T. Protein w/ Reflex Ifix (27605)

Effective Date 12/1/2012

CPT(s): 84155, 84165

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 27605

Interface Code: PELRFX Reflex Immunofixation, Serum (SIFIX) if monoclonal peak present

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TP	TOTAL PROTEIN	RES	N	gm/dL	2885-2
PEALB	ALBUMIN	RES	N	gm/dL	2862-1
PEA1	ALPHA-1	RES	N	gm/dL	2865-4
PEA2	ALPHA-2	RES	N	gm/dL	2868-8
PEBETA	BETA	RES	N	gm/dL	2871-2
PEGAM	GAMMA	RES	N	gm/dL	2874-6
MCBND6	MONOCLONAL BAND, SERUM	RES	N		13348-8
REFLX1	SERUM ELEC REFLEX COMMENT:	RES	N		
PEINT2	SERUM ELEC INTERPRETATION	RES	N		12851-2

Platelet Function Assay (41360)

Effective Date 12/10/2013

CPT(s): 85576 x 2

Expiration Date:

Billing No: 41360

Interface Code: PFA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CEPI	COLLAGEN/EPINEPHRINE	RES	N	Closure Seconds	24471-5
CADP	COLLAGEN/ADP	RES	N	Closure Seconds	24472-3
PFCOM	PFA COMMENT	RES	N		

pH Blood (26830)

Effective Date 12/1/2012

CPT(s): 82800

Expiration Date:

Billing No: 26830

Interface Code: PH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PH	pH Blood	RES	N	Units	2744-1

Phenobarbital (26850)

Effective Date 12/1/2012

CPT(s): 80184

Expiration Date:

Billing No: 26850

Interface Code: PHEN

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTPHEN	PHEN DATE OF LAST DOSE	AOE	N			DATE		
TMPHEN	PHEN TIME OF LAST DOSE	AOE	N			TEXT		
DSPHEN	PHEN DOSAGE	AOE	N			TEXT		
PHENOB	PHENOBARBITAL	RES	N	mg/L	3948-7			
DTPHEN	PHEN DATE OF LAST DOSE	RES	N		29742-4			
TMPHEN	PHEN TIME OF LAST DOSE	RES	N		29637-6			
DSPHEN	PHEN DOSAGE	RES	N		18817-7			

Phosphorus (PO4) (27050)

Effective Date 12/1/2012

CPT(s): 84100

Expiration Date:

Billing No: 27050

Interface Code: PHOS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PHOS	PHOSPHORUS (PO4)	RES	N	mg/dL	2777-1

pH, Urine by Meter (26870)

Effective Date 12/1/2012

CPT(s): 83986

Expiration Date:

Billing No: 26870

Interface Code: PHU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PHU	pH, URINE (by Meter)	RES	N	Units	2756-5

Specific Gravity, Pleural Fluid (28488)

Effective Date 12/1/2012

CPT(s): 84315

Expiration Date:

Billing No: 28488

Interface Code: PLSPG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PLSPG	SPECIFIC GRAVITY, PLEURAL FLUID	RES	N		14349-5

Platelet Count Automated (41350)

Effective Date 5/20/2015

CPT(s): 85049

Expiration Date:

Billing No: 41350

Interface Code: PLT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PLTC	PLATELET COUNT	RES	N	tho/cmm	777-3

Pregnancy Test Serum (HCG Qual.) (24400)

Effective Date 12/1/2012

CPT(s): 84703

Expiration Date:

Billing No: 24400

Interface Code: PREG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PREG	PREGNANCY TEST SERUM (HCG Qual.)	RES	N		2110-5

Prenatal ABO Rh + Antibody Screen (10050)

Effective Date 12/1/2012

CPT(s): 86900, 86901, 86850

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 10050

Interface Code: PREN May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%ABR	PATIENT ABO/Rh (D)	RES	N		882-1
%AS	PT ANTIBODY SCREEN	RES	N		890-4
%DU	PATIENT WEAK D (DU)	PRFLX	N		972-0
AGREM	PT ANTIGEN REMARKS	PRFLX	N		19066-0
ASREM	ANTIBODY SCREEN REMARKS	PRFLX	N		19066-0
PPCA	PREV ANTIBODY COM	PRFLX	N		19066-0
%DBS	DAT, POLYSPECIFIC	PRFLX	N		1007-4
%DIG	DAT, ANTI-IgG	PRFLX	N		1006-6
%ELU	RBC ANTIBODY ELUTED	PRFLX	N		897-9
A1PT	A1 SUBTYPE ON PATIENT	PRFLX	N		844-1
BCLCBE	Rh PHENOTYPE	PRFLX	N		
BCPT	C ANTIGEN TYPE on PT	PRFLX	N		
BEPT	E ANTIGEN TYPE on PT	PRFLX	N		
BKPT	K ANTIGEN TYPE on PT	PRFLX	N		1096-7
BMPT	M ANTIGEN TYPE on PT	PRFLX	N		1225-2
BNPT	N ANTIGEN TYPE on PT	PRFLX	N		1261-7
BSPT	S ANTIGEN TYPE ON PT	PRFLX	N		1320-1
COLDAB	COLD AUTOADSORPTION	PRFLX	N		896-1
CWPT	Cw ANTIGEN TYPE on PT	PRFLX	N		960-5
DC3	DAT, ANTI-C3b, -C3d	PRFLX	N		55774-4
EAS	ENZYME ANTIBODY SCREEN	PRFLX	N		
FYAPT	Fy(a) ANTIGEN TYPE on PT	PRFLX	N		1027-2
FYBPT	Fy(b) ANTIGEN TYPE on PT	PRFLX	N		1033-0
JKAPT	Jk(a) ANTIGEN TYPE on PT	PRFLX	N		1072-8
JKBPT	Jk(b) ANTIGEN TYPE on PT	PRFLX	N		1078-5
KPAPT	Kp(a) ANTIGEN TYPE on PT	PRFLX	N		1102-3
LAS	LISA ANTIBODY SCREEN	PRFLX	N		890-4
LCPT	c ANTIGEN TYPE on PT	PRFLX	N		1159-3
LEAPT	Le(a) ANTIGEN TYPE on PT	PRFLX	N		1115-5
LEBPT	Le(B)ANTIGEN TYPE on PT	PRFLX	N		1121-3
LEPT	e ANTIGEN TYPE on PT	PRFLX	N		1165-0
LKPT	CELLANO (k) TYPE on PT	PRFLX	N		4469-3
LSPT	s ANTIGEN TYPE on PT	PRFLX	N		1213-8
P1PT	P1 TYPE on PATIENT	PRFLX	N		1291-4
PABO	PATIENT'S ABO GROUP	PRFLX	N		883-9
PAS	PeG ANTIBODY SCREEN, 3 DROPS	PRFLX	N		890-4

RAS	ROOM TEMP ANTIBODY SCREEN	PRFLX	N	890-4
SPAS	SOLID PHASE ANTIBODY SCREEN	PRFLX	N	890-4
WARMA	WARM AUTOADSORPTION	PRFLX	N	904-3

Procalcitonin (27425)

Effective Date 2/22/2013

CPT(s): 84145

Expiration Date:

Billing No: 27425

Interface Code: PROCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PROCT	PROCALCITONIN	RES	N	ng/mL	33959-8

Progesterone (27450)

Effective Date 12/1/2012

CPT(s): 84144

Expiration Date:

Billing No: 27450

Interface Code: PROG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PROG	PROGENTERONE	RES	N	ng/mL	2839-9

Prolactin (27500)

Effective Date 12/1/2012

CPT(s): 84146

Expiration Date:

Billing No: 27500

Interface Code: PROL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PROL	PROLACTIN	RES	N	ng/mL	2842-3

Protein C Activity Functional (41400)

Effective Date 12/1/2012

CPT(s): 85303

Expiration Date:

Billing No: 41400

Interface Code: PROTC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PROTC	PROTEIN C ACTIVITY FUNCTIONAL	RES	N	%	27819-2

PSA (Prostate Specific Antigen),Total (27950)

Effective Date 12/1/2012

CPT(s): 84153

Expiration Date:

Billing No: 27950

Interface Code: PSAG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PSAG	PSA (Prostate Specific Antigen),TOTAL	RES	N	ng/mL	2857-1

Peripheral Blood Smear Consultation (Pathologist Review) (90610)

Effective Date 4/15/2013

CPT(s):

Expiration Date:

Billing No: 90610

Interface Code: PSCST

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
PMSTIS	TISSUE REMOVED (SITE)	AOE	Y			TEXT		
PMSSP	SURGICAL PROCEDURE	AOE	Y			TEXT		
PMSCD	Clinical Diagnosis and History	AOE	Y			TEXT		
PSCST	Peripheral Blood Consult	RES	N		48807-2			

Pap ThinPrep with Age Based reflex HPV (88175TIA)

Effective Date 3/23/2015

CPT(s): 88175

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 88175TIA

Interface Code: PTAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
PMSSOU	SOURCE	AOE	Y			SELECTLIST	CER`VAG	CERVICOVAGINAL`VAGINAL
PMSLMP	LMP	AOE	Y			TEXT		
PMSMH	Preg/Post Part/Post Meno/Hyst	AOE	Y			MULTISELE		
PMSCON	Contraceptive/Hormone History	AOE	Y			MULTISELE		
PMSCD	Clinical Diagnosis and History	AOE	Y			TEXT		
PTAB	Pap ThinPrep Screening	RES	N		33717-0			

Parathyroid Hormone (PTH) Intact (26660)

Effective Date 12/1/2012

CPT(s): 83970

Expiration Date:

Billing No: 26660

Interface Code: PTH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PTH	Parathyroid Hormone (PTH) Intact	RES	N	pg/mL	2731-8

Parathyroid Hormone (PTH) w/ Calcium (26667)

Effective Date 12/1/2012

CPT(s): 83970, 82310

Expiration Date:

Billing No: 26667

Interface Code: PTHCA Package includes PTH and CA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Parathyroid Hormone (PTH) w/Minerals (26665)

Effective Date 12/1/2012

CPT(s): 83970, 82310, 84100, 82565

Expiration Date:

Billing No: 26665

Interface Code: PTHPN Package includes PTH, CA, PHOS and CR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Pap ThinPrep with reflex to High-Risk HPV (88175TIH)

Effective Date 7/1/2015

CPT(s): 88175

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 88175TIH

Interface Code: PTHPV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
PMSSOU	SOURCE	AOE	Y			SELECTLIST	CER`VAG	CERVICOVAGINAL`VAGINAL
PMS1618	16/18 HPV Testing?	AOE	Y			SELECTLIST	N`PAPNEG`HRPOS	NO`HIGH RISK HPV POS & PAP NEG`HIGH RISK HPV POSITIVE
PMSHPV	Conditions for HR HPV Testing?	AOE	Y			SELECTLIST	HPV`HPVH`HPVE`HPVA`HPVB	WITH ASC-US`WITH ASC-H AND ASC-US`WITH ABNORMAL(ECA)`WITH ANY INTERPRETATION`WITH ASCUS OR NEGATIVE INTERPRETATION
PMSLMP	LMP	AOE	Y			TEXT		
PMSMH	Preg/Post Part/Post Meno/Hyst	AOE	Y			MULTISELE		
PMSCON	Contraceptive/Hormone History	AOE	Y			MULTISELE		
PMSCD	Clinical Diagnosis and History	AOE	Y			TEXT		
PTHPV	Pap ThinPrep with reflex to High-Risk HPV (Choose conditions)	RES	N		33717-0			

Pap ThinPrep Imaged (88175T)

Effective Date 7/1/2015

CPT(s): 88175

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 88175T

Interface Code: PTI

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
PMSSOU	SOURCE	AOE	Y			SELECTLIST	CER`VAG	CERVICOVAGINAL`VAGINAL
PMSLMP	LMP	AOE	Y			TEXT		
PMSMH	Preg/Post Part/Post Meno/Hyst	AOE	Y			MULTISELE		
PMSCON	Contraceptive/Hormone History	AOE	Y			MULTISELE		
PMSCD	Clinical Diagnosis and History	AOE	Y			TEXT		
PTI	Pap ThinPrep	RES	N		33717-0			

Specific Gravity, Peritoneal Fluid (28487)

Effective Date 12/1/2012

CPT(s): 84315

Expiration Date:

Billing No: 28487

Interface Code: PTSPG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PTSPG	SPECIFIC GRAVITY, PERITONEAL FLUID	RES	N		14348-7

Multiple Sclerosis Profile 5 (Quest 11186) (90014)

Effective Date 12/1/2012

CPT(s): 82040, 82042, 83873, 83916, 82784 x 2, 84165 x 2

Expiration Date:

Billing No: 90014

Interface Code: Q11186

Result/AOE Code	Description	Type	Suppress	Units	LOINC
11186A	PROTEIN, TOTAL, SERUM	RES	N	g/dL	2885-2
11186B	ALBUMIN, SERUM	RES	N	g/dL	2862-1
11186C	ALPHA 1 GLOBULIN, SERUM	RES	N	g/dL	2865-4
11186D	ALPHA 2 GLOBULIN, SERUM	RES	N	g/dL	2868-8
11186E	BETA GLOBULIN, SERUM	RES	N	g/dL	2871-2
11186F	GAMMA GLOBULIN, SERUM	RES	N	g/dL	2874-6
11186G	ABNORMAL PROTEIN BAND 1, SERUM	RES	N	g/dL	51435-6
11186H	ABNORMAL PROTEIN BAND 2, SERUM	RES	N	g/dL	33018-3
11186I	ABNORMAL PROTEIN BAND 3, SERUM	RES	N	g/dL	50796-2
11186J	SERUM ELECTROPH. INTERP:	RES	N		12851-2
11186K	PROTEIN, TOTAL, CSF	RES	N	mg/dL	2880-3
11186L	PRE-ALBUMIN, CSF	RES	N	%	13973-3
11186M	ALBUMIN, CSF	RES	N	%	13974-1
11186N	ALPHA 1 GLOBULIN, CSF	RES	N	%	13972-5
11186O	ALPHA 2 GLOBULIN, CSF	RES	N	%	13975-8
11186P	BETA GLOBULIN, CSF	RES	N	%	13976-6
11186Q	GAMMA GLOBULIN, CSF	RES	N	%	13977-4
11186R	CSF ELECTROPHORESIS INTERP:	RES	N		13439-5
11186S	MYELIN BASIC PROTEIN	RES	N	mcg/L	2638-5
11186T	OLIGOCLONAL BANDS, CSF	RES	N		12782-9
11186U	SYNTHESIS RATE IgG, CSF	RES	N	mg/24h	14116-8
11186V	IgG INDEX, CSF	RES	N		14117-6
11186W	ALBUMIN, CSF	RES	N	mg/dL	1746-7
11186X	IgG, CSF	RES	N	mg/dL	2464-6
11186Y	IMMUNOGLOBULIN G, SERUM	RES	N	mg/dL	2465-3
11186Z	ALBUMIN, SERUM	RES	N	g/dL	1751-7

Phenosense (Quest 113193) (90098)

Effective Date 1/2/2014

CPT(s): 87903, 87904 x 11

Expiration Date:

Billing No: 90098

Interface Code: Q11319

Result/AOE Code	Description	Type	Suppress	Units	LOINC
11319A	PHENOSENSE	RES	N		

Fecal Fat, Qualitative (Quest 13118) (99859)

Effective Date 1/13/2016

CPT(s): 82705

Expiration Date:

Billing No: 99859

Interface Code: Q13118

Result/AOE Code	Description	Type	Suppress	Units	LOINC
13118A	FECAL FAT QUALITATIVE	RES	N		10753-2

Sodium, Feces (Quest 13829) (90381)

Effective Date 7/2/2013

CPT(s): 84302

Expiration Date:

Billing No: 90381

Interface Code: Q13829

Result/AOE Code	Description	Type	Suppress	Units	LOINC
13829A	SODIUM, FECES	RES	N	mEq/L	15207-4

Potassium, Feces (Quest 13830) (90382)

Effective Date 7/2/2013

CPT(s): 84311

Expiration Date:

Billing No: 90382

Interface Code: Q13830

Result/AOE Code	Description	Type	Suppress	Units	LOINC
13830A	POTASSIUM, FECES	RES	N	mEq/L	15202-5

Catecholamines, Frac Plasma (Quest 14566) (99775)

Effective Date 6/25/2014

CPT(s): 82384

Expiration Date:

Billing No: 99775

Interface Code: Q14566

Result/AOE Code	Description	Type	Suppress	Units	LOINC
14566A	EPINEPHRINE	RES	N		2230-1
14566B	NOREPINEPHRINE	RES	N		2666-6
14566C	DOPAMINE	RES	N		2216-0
14566D	CATECHOLAMINES,TOTAL	RES	N		2056-0

Respiratory Viral Screen w/ Reflex (Quest 14860X) (90236)

Effective Date 4/16/2013
Expiration Date:

CPT(s): 87299
Additional CPTs will be billed when appropriate.

Billing No: 90236

Interface Code: Q14860 May Reflex Q39607

Result/AOE Code	Description	Type	Suppress	Units	LOINC
QSOR	SOURCE	AOE	Y		
14860A	RESPIRATORY DFA VIRAL SCREEN	RES	N		12272-1
14860B	SOURCE	RES	N		

A O E

Type	List Codes	List Code Descriptions
TEXT		

IGF-1 Insulin-Like Growth Factor-1 (Quest 16293) (90294)

Effective Date 1/24/2014
Expiration Date:

CPT(s): 84305

Billing No: 90294

Interface Code: Q16293

Result/AOE Code	Description	Type	Suppress	Units	LOINC
16293A	IGF-1, LC/MS	RES	N		2484-4
16293B	Z-SCORE (Male)	RES	N		
16293C	Z-SCORE (Female)	RES	N		

HE4, Ovarian Cancer Monitor (Quest 16500) (99918)

Effective Date 6/4/2013
Expiration Date:

CPT(s): 86305

Billing No: 99918

Interface Code: Q16500

Result/AOE Code	Description	Type	Suppress	Units	LOINC
16500A	HE4, OVARIAN CANCER RESULT	RES	N	pM	55180-4

1,25-Dihydroxy Vitamin D (Quest 16558) (90755)

Effective Date 5/7/2013
Expiration Date:

CPT(s): 82652

Billing No: 90755

Interface Code: Q16558

Result/AOE Code	Description	Type	Suppress	Units	LOINC
16558A	1,25-DIHYDROXY VIT D TOTAL	RES	N	pg/mL	62292-8
16558B	VITAMIN D3, 1,25-DIHYDROXY	RES	N	pg/mL	1649-3
16558C	VITAMIN D2, 1,25-DIHYDROXY	RES	N	pg/mL	62291-0

HIV-1 Integrase Genotype (Quest 16868) (90337)

Effective Date 1/21/2014

CPT(s): 87906

Expiration Date:

Billing No: 90337

Interface Code: Q16868

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
QVLOAD	VALUE OF LAST VIRAL LOAD	AOE	Y			TEXT		
QDLOAD	DATE VIRAL LOAD COLLECTED	AOE	Y			TEXT		
16868A	VALUE OF LAST VIRAL LOAD	RES	N					
16868B	DATE VIRAL LOAD COLLECTED	RES	N					
16868C	RALTEGRAVIR RESISTANCE	RES	N					
16868E	ELVITEGRAVIR RESISTANCE	RES	N					
16868F	DOLUTEGRAVIR RESISTANCE	RES	N					

Propoxyphene w/Confirm, Urine (Quest 16894) (90849)

Effective Date 1/1/2015

CPT(s): 80301

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90849

Interface Code: Q16894

Result/AOE Code	Description	Type	Suppress	Units	LOINC
16894A	PROPOXYPHENE	RES	N	ng/mL	19114-1
16894B	NORPROPOXYPHENE	RES	N	ng/mL	19635-2

HLA B High Resolution (Quest 17396) (91085)

Effective Date 4/30/2015

CPT(s): 81380

Expiration Date:

Billing No: 91085

Interface Code: Q17396

Result/AOE Code	Description	Type	Suppress	Units	LOINC
17396A	HLA B HIGH RESOLUTION	RES	N		IP

Strep Pneumoniae IgG AB-14 (Quest 19564X) (99939)

Effective Date 12/1/2012

CPT(s): 86317 x 14

Expiration Date:

Billing No: 99939

Interface Code: Q19564

Result/AOE Code	Description	Type	Suppress	Units	LOINC
19564A	STREP PNEUMONIAE IgG AB	RES	N		

HLA-B 5701 Typing (Quest 19774) (99648)

Effective Date 12/24/2014

CPT(s): 81381

Expiration Date:

Billing No: 99648

Interface Code: Q19774

Result/AOE Code	Description	Type	Suppress	Units	LOINC
19774A	HLA-B 5701 TYPING	RES	N		50956-2

T-3 Uptake (Quest 2482) (90094)

Effective Date 6/4/2013

CPT(s): 84479

Expiration Date:

Billing No: 90094

Interface Code: Q2482

Result/AOE Code	Description	Type	Suppress	Units	LOINC
2482A	T-3 UPTAKE	RES	N	%	3050-2

Antinuclear Antibody, IFA w/Reflex Titer (Q249) (99261)

Effective Date 12/1/2012

CPT(s): 86038

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99261

Interface Code: Q249 May Reflex Q18167

Result/AOE Code	Description	Type	Suppress	Units	LOINC
249D	ANA SCREEN, IFA	RES	N		42254-3
249E	ADDITIONAL TESTING	RES	N		

Culture Cytomegalovirus (CMV), Conv and Rapid (Quest 2627) (90445)

Effective Date 6/25/2014

CPT(s): 87252

Expiration Date:

Billing No: 90445

Interface Code: Q2627

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
QSOR2	CMV CULTURE SOURCE	AOE	Y			TEXT		
2627D	CMV CULTURE SOURCE	RES	N					
2627E	CMV RAPID CULTURE	RES	N					
2627F	CMV CONVENTIONAL CULTURE	RES	N					

Streptolysin O Antibody (Quest 265X) (90380)

Effective Date 12/1/2012

CPT(s): 86060

Expiration Date:

Billing No: 90380

Interface Code: Q265

Result/AOE Code	Description	Type	Suppress	Units	LOINC
265B	STREPTOLYSIN O AB	RES	N	IU/mL	5370-2

Sickle Solubility Test (Quest 3231) (93090)

Effective Date 4/16/2013

CPT(s): 85660

Expiration Date:

Billing No: 93090

Interface Code: Q3231

Result/AOE Code	Description	Type	Suppress	Units	LOINC
3231A	SICKLE SOLUBILITY TEST	RES	N		6864-3

IGF Binding Protein-3 (Quest 34458) (90262)

Effective Date 10/22/2013

CPT(s): 83519

Expiration Date:

Billing No: 90262

Interface Code: Q34458

Result/AOE Code	Description	Type	Suppress	Units	LOINC
34458A	IGF BINDING PROTEIN-3	RES	N	mg/L	2483-6

Legionella Antigen, DFA (Quest 34475) (90238)

Effective Date 9/9/2013

CPT(s): 87278

Expiration Date:

Billing No: 90238

Interface Code: Q34475

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
QSOR	SOURCE	AOE	N			TEXT		
34475A	LEGIONELLA ANTIGEN RESULT	RES	N		588-4			

Hepatitis C, RNA, Quant PCR (Quest 35645) (93700)

Effective Date 9/10/2013

CPT(s): 87522

Expiration Date:

Billing No: 93700

Interface Code: Q35645

Result/AOE Code	Description	Type	Suppress	Units	LOINC
35645A	HCV RNA, PCR, QUANT	RES	N	IU/mL	11011-4
35645B	HCV RNA, PCR, QUANT (log)	RES	N	log IU/mL	38180-6

Testosterone, Free and Total (Quest 36170) (99313)

Effective Date 12/1/2012

CPT(s): 84402, 84403

Expiration Date:

Billing No: 99313

Interface Code: Q36170

Result/AOE Code	Description	Type	Suppress	Units	LOINC
36170D	TESTOSTERONE, TOTAL	RES	N	ng/dL	2986-8
36170E	TESTOSTERONE, FREE	RES	N	pg/mL	2991-8

Hexagonal Phase Confirmation (Quest 36573X) (93251)

Effective Date 12/1/2012

CPT(s): 85598

Expiration Date:

Billing No: 93251

Interface Code: Q36573 Orderable and Reflex for Q7079

Result/AOE Code	Description	Type	Suppress	Units	LOINC
36573A	HEXAGONAL PHASE CONFIRMATION	RES	N		33930-9

IGF Binding Protein-1 (Quest 36590) (90441)

Effective Date 10/22/2013

CPT(s): 83519

Expiration Date:

Billing No: 90441

Interface Code: Q36590

Result/AOE Code	Description	Type	Suppress	Units	LOINC
36590A	IGF BINDING PROTEIN-1	RES	N	ng/mL	12722-5
36590B	IGF BND PROT-1 RESULTS RCVD	RES	N		

Free T3 by Dialysis w/T3 Total (Quest 36598) (93180)

Effective Date 6/25/2014

CPT(s): 84481, 84480

Expiration Date:

Billing No: 93180

Interface Code: Q36598

Result/AOE Code	Description	Type	Suppress	Units	LOINC
36598C	FREE T3	RES	N	pg/dL	29239-1
36598D	T3, TOTAL	RES	N	ng/dL	3053-6

DNA(ds) Antibody, IFA w/Reflex Titer (Quest 37092) (90622)

Effective Date 11/26/2014

CPT(s): 86255

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90622

Interface Code: Q37092 May Reflex Q90067

Result/AOE Code	Description	Type	Suppress	Units	LOINC
37092C	DNA AB (ds) CRITHIDIA, IFA	RES	N		6457-6
37092D	DNA (ds) ADDITIONAL TESTING	RES	N		IP

Hepatitis C RNA, Qual TMA (Quest 37273) (93167)

Effective Date 4/2/2014

CPT(s): 87521

Expiration Date:

Billing No: 93167

Interface Code: Q37273

Result/AOE Code	Description	Type	Suppress	Units	LOINC
37273B	HCV RNA, QUAL, TMA	RES	N		11259-9

ZHepatitis B Core Ab, Total w/ Reflex to IgM for Client N0391 only(Quest 37676) (91272)

Effective Date 1/21/2016
Expiration Date:

CPT(s): 86704
Additional CPTs will be billed when appropriate.

Billing No: 91272

Interface Code: Q37676 May reflex Q4848

Result/AOE Code	Description	Type	Suppress	Units	LOINC
501AA	HEPATITIS B CORE AB TOTAL	RES	N		13952-7
37676A	PROGRESSIVE HB CORE AB IGM	RES	N		IP

HIV 1 RNA Quant PCR (Quest 40085) (93690)

Effective Date 1/15/2015
Expiration Date:

CPT(s): 87536

Billing No: 93690

Interface Code: Q40085

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
QADD	PATIENT ADDRESS	AOE	Y			TEXT		
QCITY	PATIENT CITY	AOE	Y			TEXT		
QSTATE	PATIENT STATE	AOE	Y			TEXT		
QZIP	PATIENT ZIP CODE	AOE	Y			TEXT		
QURACE	PATIENT RACE	AOE	Y			TEXT		
QHISP	PATIENT HISPANIC Y/N	AOE	Y			TEXT		
QSSN	SOCIAL SECURITY NUMBER	AOE	Y			TEXT		
QDOC	REQUESTING PHYSICIAN	AOE	Y			TEXT		
QDOCAD	PHYSICIAN ADDRESS	AOE	Y			TEXT		
QDOCCI	PHYSICIAN CITY	AOE	Y			TEXT		
QDOCST	PHYSICIAN STATE	AOE	Y			TEXT		
QDOCZI	PHYSICIAN ZIP CODE	AOE	Y			TEXT		
QDOCPH	PHYSICIAN PHONE	AOE	Y			TEXT		
QDRAW	DRAWING SITE (STATE)	AOE	Y			TEXT		
40085A	HIV-1 RNA COPIES/mL	RES	N	copies/mL	20447-9			
40085B	HIV-1 RNA LOG cps/mL	RES	N	Log cps/mL	29541-0			

FTA-ABS (Quest 4112) (91300)

Effective Date 1/21/2013
Expiration Date:

CPT(s): 86780

Billing No: 91300

Interface Code: Q4112

Result/AOE Code	Description	Type	Suppress	Units	LOINC
4112B	FTA-ABS	RES	N		5393-4

Estrogen, Total (Q439) (91180)

Effective Date 12/1/2012

CPT(s): 82672

Expiration Date:

Billing No: 91180

Interface Code: Q439

Result/AOE Code	Description	Type	Suppress	Units	LOINC
439B	TOTAL ESTROGEN	RES	N	pg/mL	2254-1

Ristocetin Cofactor Activity (Quest 4459X) (91517)

Effective Date 6/4/2013

CPT(s): 85245

Expiration Date:

Billing No: 91517

Interface Code: Q4459

Result/AOE Code	Description	Type	Suppress	Units	LOINC
4459AA	RISTOCETIN COFACT ACTIVITY	RES	N	%	6014-5

ssDNA IgG Antibody (Quest 45972) (90375)

Effective Date 11/27/2013

CPT(s): 86226

Expiration Date:

Billing No: 90375

Interface Code: Q45972

Result/AOE Code	Description	Type	Suppress	Units	LOINC
45972A	ssDNA IgG, ANTIBODY	RES	N	U/mL	10360-6

Hepatitis B Core Ab, Total (Quest 501) (90931)

Effective Date 8/12/2014

CPT(s): 86704

Expiration Date:

Billing No: 90931

Interface Code: Q501

Result/AOE Code	Description	Type	Suppress	Units	LOINC
501AA	HEPATITIS B CORE AB TOTAL	RES	N		13952-7

Legionella pneumophila Culture (Quest 688X) (90237)

Effective Date 6/4/2013

CPT(s): 87081

Expiration Date:

Billing No: 90237

Interface Code: Q688

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
QSOR	SOURCE	AOE	N			TEXT		
688A	LEGIONELLA CULTURE RESULT	RES	N					
14860B	SOURCE	RES	N					

ANCA Screen w/Reflex w/Titer (Quest 70171) (92410)

Effective Date 12/16/2015

CPT(s): 86021

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 92410

Interface Code: Q70171 May Reflex Q18755, Q18756, Q18757

Result/AOE Code	Description	Type	Suppress	Units	LOINC
70171A	ANCA SCREEN	RES	N		17351-8
70171B	ANA COMMENT	RES	N		8251-1

Lupus Anticoagulant Eval w/ Reflex (Quest 7079) (95650)

Effective Date 6/4/2013

CPT(s): 85613, 85730

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 95650

Interface Code: Q7079 Always Reflex/auto order Q17408, Q33693; May Reflex Q15111, Q36573, Q883

Result/AOE Code	Description	Type	Suppress	Units	LOINC
7079G	LUPUS ANTICOAGULANT EVAL	RES	N		3281-3

Lymphocyte Subset Panel 3 (Quest 71958) (99570)

Effective Date 6/25/2014

CPT(s): 86359, 86360

Expiration Date:

Billing No: 99570

Interface Code: Q71958

Result/AOE Code	Description	Type	Suppress	Units	LOINC
71958A	LYMPHOCYTES, ABSOLUTE	RES	N	cells/uL	731-0
71958C	CD3, ABSOLUTE	RES	N	cells/uL	8122-4
71958D	CD3, PERCENTAGE	RES	N	%	8124-0
71958F	CD4, ABSOLUTE	RES	N	cells/uL	24467-3
71958G	CD4, PERCENTAGE	RES	N	%	8123-2
71958H	CD8, ABSOLUTE	RES	N	cells/Ul	14135-8
71958I	CD8, PERCENTAGE	RES	N	%	8101-8
71958J	CD4/CD8 RATIO	RES	N	ratio	54218-3

Folic Acid, Red Blood Cell (Q8041) (99466)

Effective Date 12/1/2012

CPT(s): 82747

Expiration Date:

Billing No: 99466

Interface Code: Q8041

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
QHCT	HEMATOCRIT RESULT	AOE	Y			TEXT		
8041A	FOLATE, RBC	RES	N	ng/mL	2283-0			

Direct LDL (Quest 8293X) (99319)

Effective Date 4/16/2013

CPT(s): 83721

Expiration Date:

Billing No: 99319

Interface Code: Q8293

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8293B	DIRECT LDL	RES	N	mg/dL	18262-6

HBV DNA Quant by RT PCR (Quest 8369) (90444)

Effective Date 9/9/2013

CPT(s): 87517

Expiration Date:

Billing No: 90444

Interface Code: Q8369

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8369C	HEPATITIS B VIRUS DNA	RES	N	IU/mL	42595-9
8369D	HEPATITIS B VIRUS DNA (copies)	RES	N	copies/mL	48398-2

STRATIFY JCV Ab w/Rfx Inhibition (Quest 90257) (90436)

Effective Date 10/22/2013

CPT(s): 86711

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90436

Interface Code: Q90257 May Reflex Q90259

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90257A	STRATIFY JCV ANTIBODY	RES	N		70173-0

Alcohol Metabolites w/ Confirm, U (Quest 90418) (90311)

Effective Date 1/1/2015

CPT(s): 80321

Expiration Date:

Billing No: 90311

Interface Code: Q90418

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90418A	ALCOHOL METABOLITES	RES	N	ng/mL	55349-5
90418B	ETHYL GLUCURONIDE	RES	N	ng/mL	45324-1
90418C	ETHYL SULFATE	RES	N	ng/mL	60676-4
90418D	PLEASE NOTE:	RES	N		8262-8

Hepatitis C RNA NS3 Genotype (Quest 90924) (90838)

Effective Date 10/26/2015

CPT(s): 87902

Expiration Date:

Billing No: 90838

Interface Code: Q90924

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90924A	HCV NS3 SUBTYPE	RES	N		73654-6
90924B	BOCEPREVIR RESISTANCE	RES	N		IP
90924E	PARITAPREVIR RESISTANCE	RES	N		IP
90924D	SIMEPREVIR RESISTANCE	RES	N		IP

T3 Reverse, LCMSMS (Quest 90963) (99244)

Effective Date 4/16/2013

CPT(s): 84482

Expiration Date:

Billing No: 99244

Interface Code: Q90963

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90963A	T3 REVERSE	RES	N	ng/dL	3052-8

Omega-3 and -6 Fatty Acids (Quest 91001) (93169)

Effective Date 8/17/2015

CPT(s): 82542

Expiration Date:

Billing No: 93169

Interface Code: Q91001

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91001A	OMEGA-3 (EPA+DHA) INDEX	RES	N	%	
91001B	RISK	RES	N	INDEX	
91001C	OMEGA-6/OMEGA-3 RATIO	RES	N		
91001D	EPA/ARACHIDONIC ACID RATIO	RES	N		
91001E	ARACHIDONIC ACID	RES	N	%	
91001F	EPA	RES	N	%	
91001G	DHA	RES	N	%	

STRATIFY JCV Ab w/Index w/Reflex to Inhibition (Quest 91665) (90470)

Effective Date 11/12/2013

CPT(s): 86711

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90470

Interface Code: Q91665 May Reflex Q90259

Result/AOE Code	Description	Type	Suppress	Units	LOINC
91665A	STRATIFY JCV AB INDEX	RES	N		
91665B	STRATIFY JCV ANTIBODY	RES	N		70173-0

HCV RNA Genotype NS5b Drug Resistance (Quest 92204) (91215)

Effective Date 4/1/2016

CPT(s): 87902

Expiration Date:

Billing No: 91215

Interface Code: Q92204

Result/AOE Code	Description	Type	Suppress	Units	LOINC
92204A	HCV RNA GENOTYPE NS5b	RES	N		IP

HCV RNA Genotype NS5a Drug Resistance (Quest 92447) (91214)

Effective Date 4/1/2016

CPT(s): 87902

Expiration Date:

Billing No: 91214

Interface Code: Q92447

Result/AOE Code	Description	Type	Suppress	Units	LOINC
92447A	HCV NS5a SUBTYPE	RES	N		IP
92447B	DACLATASVIR RESISTANCE	RES	N		IP
92447C	LEDIPASVIR RESISTANCE	RES	N		IP
92447D	OMBITASVIR RESISTANCE	RES	N		IP
92447E	ELBASVIR RESISTANCE	RES	N		IP

Strychnine, Urine (Quest 9317) (90377)

Effective Date 6/21/2013

CPT(s): 80323

Expiration Date:

Billing No: 90377

Interface Code: Q9317

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9317A	STRYCHNINE, URINE	RES	N		5740-6

Osmolality, Feces (Quest 968) (90383)

Effective Date 7/2/2013

CPT(s): 84999

Expiration Date:

Billing No: 90383

Interface Code: Q968

Result/AOE Code	Description	Type	Suppress	Units	LOINC
968AA	OSMOLALITY, FECES	RES	N	mOsm	2693-0

HTLV I/II, Western Blot (Q8511) (90749)

Effective Date 12/1/2012

CPT(s): 86689

Expiration Date:

Billing No: 90749

Interface Code: QHTLV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HTLVWB	HTLV I/II	RES	N		

Infliximab and Anti Inflix AB (Quest 803770) (90848)

Effective Date 4/15/2014

CPT(s): 80299, 82397

Expiration Date:

Billing No: 90848

Interface Code: QINFLX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
INFLI	INFLIXIMAB and ANTI INFLIX AB	RES	N		

Islet Cell IgG Cytoplasmic AB (Q111282) (92515)

Effective Date 12/1/2012

CPT(s): 86341

Expiration Date:

Billing No: 92515

Interface Code: QISLET

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ISLET	ISLET CELL IgG CYTOPL AB	RES	N		

ANA Screen w/ Reflex Algorithm (50296)

Effective Date 12/1/2012

CPT(s): 86038

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 50296

Interface Code: RANA May Reflex M8178, M89035, M9278, M87837

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ANASC	ANA SCREEN	RES	N		5047-6
ANAINT	ANA INTERPRETATION	RES	N		44083-4

Renal Function Panel (Inc. GFR) (28150)

Effective Date 12/1/2012

CPT(s): 80069

Expiration Date:

Billing No: 28150

Interface Code: RENAL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NA	SODIUM	RES	N	mEq/L	2951-2
K	POTASSIUM	RES	N	mEq/L	2823-3
CL	CHLORIDE	RES	N	mEq/L	2075-0
CO2V	T. CO2 (BICARB)	RES	N	mM/L	2028-9
GLUC	GLUCOSE	RES	N	mg/dL	2345-7
BUN	BUN	RES	N	mg/dL	3094-0
CR	CREATININE	RES	N	mg/dL	2160-0
BC	BUN/CR	RES	N	Ratio	3097-3
CA	CALCIUM	RES	N	mg/dL	17861-6
ALB	ALBUMIN	RES	N	gm/dL	61152-5
PHOS	PHOSPHORUS	RES	N	mg/dL	2777-1
EGFR	GFR, EST. Non African-Amer.	RES	N	mL/min /1.73m 2	48642-3
BGFR	GFR, EST. African-American	RES	N	mL/min /1.73m 2	48643-1

Culture, NP/Nasal (52750)

Effective Date 12/1/2012

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 52750

Interface Code: RESNP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CULT	CULTURE	RES	N		32355-0
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	NASP	NASOPHARYNGEAL
TEXT		

Culture, Respiratory (55000)

Effective Date 12/1/2012

CPT(s): 87070, 87205

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55000

Interface Code: RESP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	BALV`BBP`BW`BRONCB`ET`NARES`NASL`NASP`SP`SPIN`SPASP`TASP`TRAC`BWASH	BRONCHOALVEOLAR LAVAGE`BRONCH BRUSH PROTECTIVE`BRONCHIAL WASHINGS`BRONCHIAL BRUSHINGS`ENDOTRACHEAL`NARES`NASAL`NASOPHARYNGEAL`SPUTUM`SPUTUM,INDUCED`SPUTUM,ORAL ASPIRATION`TRACHEAL ASPIRATE`TRACHEOSTOMY`BRUSH WASHINGS
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		32355-0			
RPT	REPORT STATUS	RES	N					

Respiratory Pathogen Panel by PCR (54610)

Effective Date 4/1/2016

CPT(s): 87486, 87581, 87633, 87798

Expiration Date:

Billing No: 54610

Interface Code: RESPBF PCR Panel Includes: Adenovirus, Coronavirus (229E,OC43,NL63,HKU1), Metapneumovirus, Rhinovirus/Enterovirus, Influenza (A,H1,2009 H1N1v, H3), Influenza B, Parainfluenza (1,2,3,4), RSV, Bordetella pertussis, Chlamydophila pneumoniae, and Mycoplasma pneumoniae.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADOVIR	ADENOVIRUS	RES	N		39528-5
COHKU1	CORONAVIRUS HKU1	RES	N		62423-9
CONL63	CORONAVIRUS NL63	RES	N		41005-0
CO229E	CORONAVIRUS 229E	RES	N		41003-5
COOC43	CORONAVIRUS OC43	RES	N		41009-2
METVIR	METAPNEUMOVIRUS	RES	N		38917-1
RHINEN	RHINOVIRUS/ENTEROVIRUS	RES	N		40991-2
INFLUA	INFLUENZA A	RES	N		22827-0
INFLUB	INFLUENZA B	RES	N		40982-1
PARVR1	PARAINFLUENZA VIRUS 1	RES	N		29908-1
PARVR2	PARAINFLUENZA VIRUS 2	RES	N		29909-9
PARVR3	PARAINFLUENZA VIRUS 3	RES	N		29910-7
PARVR4	PARAINFLUENZA VIRUS 4	RES	N		41010-0
RSVIRU	RESPIRATORY SYNCYTIAL VIRUS	RES	N		40988-8
BORPER	BORDETELLA PERTUSSIS	RES	N		23826-1
CHLPNE	CHLAMYDOPHILA PNEUMONIAE	RES	N		34645-2
MYCPNE	MYCOPLASMA PNEUMONIAE	RES	N		29257-3
BIOFCM	ASSAY COMMENT	RES	N		N/A

Rheumatoid Factor (RF) (28200)

Effective Date 12/1/2012

CPT(s): 86431

Expiration Date:

Billing No: 28200

Interface Code: RF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RF	RHEUMATOID FACTOR (RF)	RES	N	IU/mL	15205-8

Rh Type (10200)

Effective Date 12/1/2012

CPT(s): 86901

Expiration Date:

Billing No: 10200

Interface Code: RH May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PRH	PATIENT`S Rh (D) TYPE	RES	N		10331-7
RHREM	Rh IMMUNE GLOB REM	RES	N		19066-0
ARREM	PT ABO/Rh/SPEC REMARKS	RES	N		19066-0
%DU	PATIENT WEAK D (DU)	PRFLX	N		972-0

Microalbumin Urine Random (w/ Urine Creatinine) (26300)

Effective Date 12/1/2012

CPT(s): 82043, 82570

Expiration Date:

Billing No: 26300

Interface Code: RMALB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCR	CREATININE, URINE	RES	N	mg/dL	2161-8
MALB	MICROALBUMIN, mg/L	RES	N	mg/L	14957-5
MALBR	MICROALBUMIN, mg/G Creat	RES	N	mg/G Creat	14959-1

Rotavirus by EIA (55100)

Effective Date 12/1/2012

CPT(s): 87425

Expiration Date:

Billing No: 55100

Interface Code: ROTAV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
ROTAA	EIA FOR ROTAVIRUS	RES	N		5880-0
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	STOOL	STOOL
TEXT		

RPR w/ Reflex Titer (28270)

Effective Date 12/1/2012

CPT(s): 86592

Expiration Date:

Billing No: 28270

Interface Code: RPR May Reflex RPRT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RPR	RPR w/ REFLEX TITER	RES	N		20507-0

TSH w/reflex to FT4 (Thyroid Stimulating Hormone (29110)

Effective Date 12/1/2012

CPT(s): 84443

Expiration Date:

Additional CPT will be billed when appropriate.

Billing No: 29110

Interface Code: RTSH May Reflex FT4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RTSH	TSH w/rfx FREE T4	RES	N	mIU/L	3016-3

Salicylate (28305)

Effective Date 1/1/2015

CPT(s): 80329

Expiration Date:

Billing No: 28305

Interface Code: SALIC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTSAL	DATE OF LAST DOSE	AOE	N			DATE		
TMSAL	TIME OF LAST DOSE	AOE	N			TEXT		
DSSAL	DOSAGE	AOE	N			TEXT		
SAL	SALICYLATE	RES	N	mg/L	4024-6			
DTSAL	DATE OF LAST DOSE	RES	N		29742-4			
TMSAL	TIME OF LAST DOSE	RES	N		29637-6			
DSSAL	DOSAGE	RES	N		18817-7			

Semen, Analysis, Automated (41910)

Effective Date 12/1/2012

CPT(s): 89320

Expiration Date:

Billing No: 41910

Interface Code: SEMA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COLLD	COLLECTION DATE:	RES	N		33882-2
COLLT	COLLECTION TIME:	RES	N		13358-7
ABPR	PERIOD OF ABSTINENCE:	RES	N		10587-4
ANPU	PURPOSE OF ANALYSIS:	RES	N		33035-7
SVOL	VOLUME	RES	N	mL	3160-9
SEPH	pH	RES	N	units	2752-4
SAPP	APPEARANCE	RES	N		13359-5
SLIQ	LIQUEFACTION TIME	RES	N	min.	10580-9
SWBC	LEUKOCYTES, SEMEN	RES	N	mil/mL	811-0
SMICRO	MICROSCOPIC, SEMEN	RES	N		
SMRP	MOTILITY, RAPID PROGRESSIVE	RES	N	%	
SMSP	MOTILITY, SLOW PROGRESSIVE	RES	N	%	
SMNP	MOTILITY, NON-PROGRESSIVE	RES	N	%	
SMOT	MOTILITY, TOTAL PROGRESSIVE	RES	N	%	
SCT	SPERM COUNT	RES	N	mil/mL	9780-8
SMORPH	SPERM MORPHOLOGY	RES	N	% Normal	9704-8
SMWHO	W.H.O, REVISION:	RES	N		

Semen Analysis Post Vas (41920)

Effective Date 12/1/2012

CPT(s): 89321

Expiration Date:

Billing No: 41920

Interface Code: SEMPV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SWBC	LEUKOCYTES, SEMEN	RES	N	mil/mL	811-0
SMICRO	MICROSCOPIC, SEMEN	RES	N		
SPCT	SPERM COUNT, POST VAS	RES	N		51623-7

Eosinophil Smear, Not Blood (40600)

Effective Date 4/29/2015

CPT(s): 89190

Expiration Date:

Billing No: 40600

Interface Code: SEOS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SSOURC	SPECIMEN SOURCE, SMEAR	AOE	N			TEXT		
SSOURC	SPECIMEN SOURCE, SMEAR	RES	N		39111-0			
SEOSP	EOSINOPHILS %, SMEAR	RES	N	%	26452-3			
WBCTOT	TOTAL NUMBER OF WBC COUNTED	RES	N	Cells	74689-1			

Immunofixation Serum (Qualitative) (25000)

Effective Date 12/1/2012

CPT(s): 86334

Expiration Date:

Billing No: 25000

Interface Code: SIFIX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IFIGG	IgG, IF	RES	N		18301-2
IFIGA	IgA, IF	RES	N		18299-8
IFIGM	IgM, IF	RES	N		18303-8
IFKAP	KAPPA, IF	RES	N		40635-5
IFLAM	LAMBDA, IF	RES	N		40639-7
IFINT	IF INTERPRETATION:	RES	N		25700-6

Culture, Superficial Wound (55550)

Effective Date 12/24/2014

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55550

Interface Code: SKIN Culture does NOT routinely include Gram Stain

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	ANKL`ARM`BACK`BOIL`BRST`BUTT`CAPDS`BURN`CHEEK`CHEST`CONJ`CONL`CORN`ELBOW`EMESIS`ESB`EYE`FACE`FING`FINGN`FOOT`GAS`GASTR`HAIR`HAND`HEAD`HIP`KNEE`LEG`LIPP`MOUTH`NAIL`NSC`NECK`PENIS`PERIN`SEM`SHOL`SKN`TOEN`WRIST	ANKLE`ARM`BACK`BOIL`BREAST`BUTT`CAPD SITE`BURN`CHEEK`CHEST`CONJUNCTIVAL`CONTACT LENS`CORNEA`ELBOW`EMESIS`ESOPHAGEAL BRUSHINGS`EYE`FACE`FINGER`FINGER NAIL`FOOT`GASTRIC`GASTROSTOMY`HAIR`HAND`HEAD`HIP`KNEE`LEG`LIP`MOUTH`NAIL`NASOGASTRIC`NECK`PENIS`PERINEUM`SEMEN`SHOULDER`SKIN`TOENAIL`WRIST
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	PRFLX	N		664-3			
CULT	CULTURE	RES	N		21020-3			
RPT	REPORT STATUS	RES	N					

Surface Markers, Flow Cytometry (UNMC) (99059)

Effective Date 5/7/2013

CPT(s): 88184, 88185, 88187

Expiration Date:

Additional CPTs will be billed.

Billing No: 99059

Interface Code: SMFLOW

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SURSPE	SURFACE MARKER SPECIMEN	AOE	Y			TEXT		
PMSFI	Flow Cytometry for Initial Diagnosis or Remission?	AOE	Y			TEXT		
PMSFDX	DIAGNOSIS:	AOE	Y			TEXT		
SMFLOW	SURFACE MARKER, FLOW CYTOMETRY	RES	N					

Semen Morphology incl. Cell Count (41940)

Effective Date 12/1/2012

CPT(s): 89310

Expiration Date:

Billing No: 41940

Interface Code: SMORCT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SCT	SPERM COUNT	RES	N	mil/mL	9780-8
SMORPH	SPERM MORPHOLOGY	RES	N	% Normal	9704-8
SMWHO	W.H.O.REVISION:	RES	N		

Semen Morphology (41945)

Effective Date 12/1/2012

CPT(s): 85999

Expiration Date:

Billing No: 41945

Interface Code: SMORPH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SMORPH	SPERM MORPHOLOGY	RES	N	% Normal	9704-8

Culture, Salmonella/Shigella (55150)

Effective Date 12/1/2012

CPT(s): 87045

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55150

Interface Code: SSC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CULT	CULTURE	RES	N		43371-4
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	STOOL	STOOL
TEXT		

Culture, Stool w/ Escherichia coli (55450)

Effective Date 12/1/2012

CPT(s): 87427, 87046, 87045

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55450

Interface Code: STEC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
ECOEIA	E COLI SHIG TOXINS	RES	N		21261-1
CULT	CULTURE	RES	N		625-4
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	STOOL	STOOL
TEXT		

Culture, Stool (55500)

Effective Date 12/1/2012

CPT(s): 87045, 87046

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55500

Interface Code: STLC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
CULT	CULTURE	RES	N		625-4
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	STOOL	STOOL
TEXT		

Norwalk Virus Detection (UNMC) (92957)

Effective Date 12/1/2012

CPT(s): 87798

Expiration Date:

Billing No: 92957

Interface Code: STNORW

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STNOR	NORWALK VIRUS DETECTION, STOOL	RES	N		

Cryptosporidium Ag Stool (52650)

Effective Date 12/1/2012

CPT(s): 87272

Expiration Date:

Billing No: 52650

Interface Code: STSPOR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STSPOT	CRYPTOSPORIDIUM BY DFA	RES	N		10704-5

Leukocytes Stool (54250)

Effective Date 12/1/2012

CPT(s): 89055

Expiration Date:

Billing No: 54250

Interface Code: STWBC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STWBC	LEUKOCYTES, STOOL	RES	N		13349-6

Synovial Fluid Crystals (55650)

Effective Date 12/1/2012

CPT(s): 89060

Expiration Date:

Billing No: 55650

Interface Code: SYNCRY

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SCRY	SYNOVIAL FLUID CRYSTALS	RES	N		5781-0

Rheumatoid Factor Syn Fl (RF) (28250)

Effective Date 12/1/2012

CPT(s): 86431

Expiration Date:

Billing No: 28250

Interface Code: SYNRF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SYNRF	RHEUMATOID FACTOR, SYN FL (RF)	RES	N	IU/mL	13634-1

T3 Total (Triiodothyronine) (28550)

Effective Date 12/1/2012

CPT(s): 84480

Expiration Date:

Billing No: 28550

Interface Code: T3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
T3	T3 Total (Triiodothyronine)	RES	N	ng/dL	3053-6

T4 (Thyroxine) (28600)

Effective Date 12/1/2012

CPT(s): 84436

Expiration Date:

Billing No: 28600

Interface Code: T4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
T4	T4 (Thyroxine)	RES	N	ug/dL	3026-2

T4 Free and TSH (29090)

Effective Date 12/1/2012

CPT(s): 84443, 84439

Expiration Date:

Billing No: 29090

Interface Code: T4FTSH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FT4	T4, FREE	RES	N	ng/dL	3024-7
TSH	TSH	RES	N	mIU/L	3016-3

Tacrolimus (FK 506) (28700)

Effective Date 12/1/2012

CPT(s): 80197

Expiration Date:

Billing No: 28700

Interface Code: TACR

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTTAC	DATE OF LAST DOSE	AOE	N			DATE		
TMTAC	TIME OF LAST DOSE	AOE	N			TEXT		
DSTAC	DOSAGE	AOE	N			TEXT		
TAC	TACROLIMUS	RES	N	mcg/L	11253-2			
DTTAC	DATE OF LAST DOSE	RES	N		29742-4			
TMTAC	TIME OF LAST DOSE	RES	N		29637-6			
DSTAC	DOSAGE	RES	N		18817-7			

Carbamazepine (Tegretol) (21600)

Effective Date 12/1/2012

CPT(s): 80156

Expiration Date:

Billing No: 21600

Interface Code: TEG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTTEG	CARB DATE OF LAST DOSE	AOE	N			DATE		
TMTEG	CARB TIME OF LAST DOSE	AOE	N			TEXT		
DSTEG	CARB DOSAGE	AOE	N			TEXT		
TEGRET	CARBAMAZEPINE	RES	N	mg/L	3432-2			
DTTEG	CARB DATE OF LAST DOSE	RES	N		29742-4			
TMTEG	CARB TIME OF LAST DOSE	RES	N		29637-6			
DSTEG	CARB DOSAGE	RES	N		18817-7			

Testosterone Total (28750)

Effective Date 12/1/2012

CPT(s): 84403

Expiration Date:

Billing No: 28750

Interface Code: TESTT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TESTT	TESTOSTERONE TOTAL	RES	N	ng/dL	2986-8

Theophylline (28800)

Effective Date 12/1/2012

CPT(s): 80198

Expiration Date:

Billing No: 28800

Interface Code: THEO

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
DTTHEO	THEO DATE OF LAST DOSE	AOE	N			DATE		
TMTHEO	THEO TIME OF LAST DOSE	AOE	N			TEXT		
DSTHEO	THEO DOSAGE	AOE	N			TEXT		
DRUG	DRUG GIVEN	AOE	N			TEXT		
THEOPH	THEOPHYLLINE	RES	N	mg/L	4049-3			
DTTHEO	THEO DATE OF LAST DOSE	RES	N		29742-4			
TMTHEO	THEO TIME OF LAST DOSE	RES	N		29637-6			
DSTHEO	THEO DOSAGE	RES	N		18817-7			
DRUG	DRUG GIVEN	RES	N					

Culture, Throat (55700)

Effective Date 12/1/2012

CPT(s): 87070

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55700

Interface Code: THRC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	THRT	THROAT
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		626-2			
RPT	REPORT STATUS	RES	N					

Thyroid Function Cascade (29120)

Effective Date 12/1/2012

CPT(s): 84443

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 29120

Interface Code: THYCAS May Reflex THYFT4, THYT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TSH	TSH	RES	N	mIU/mL	3016-3

Antibody Titer (10120)

Effective Date 12/1/2012

CPT(s): 86886

Expiration Date:

Billing No: 10120

Interface Code: TITER

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TCUR	CURRENT TITER OF	RES	N		50401-9
TPREV	PREVIOUS TITER OF	RES	N		50401-9
TICOM	TITER COMMENTS	RES	N		19066-0

Microalbumin Timed Urine (w/ Urine Creatinine) (26350)

Effective Date 12/1/2012

CPT(s): 82043, 82570

Expiration Date:

Billing No: 26350

Interface Code: TMALB May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HRS	COLLECTION PERIOD	AOE	N	hrs	
UVOL	URINE VOLUME	AOE	N	mL	
HRS	COLLECTION PERIOD	RES	N	hrs	13362-9
UVOL	URINE VOLUME	RES	N	mL	28009-9
UCR	CREATININE, URINE	RES	N	mg/dL	2161-8
UCRD	CREATININE, TIMED URINE	RES	N	mg/day	2162-6
MALB	MICROALBUMIN, mg/L	RES	N	mg/L	14957-5
MALBU	MICROALBUMIN, mg/24 hrs	RES	N	mg/24 hrs	14956-7
MALBR	MICROALBUMIN, mg/G Creat	RES	N	mg/G Creat	14959-1

A O E

Type	List Codes	List Code Descriptions
TEXT		
TEXT		

Protein Total (27850)

Effective Date 12/1/2012

CPT(s): 84155

Expiration Date:

Billing No: 27850

Interface Code: TP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TP	PROTEIN, TOTAL	RES	N	gm/dL	2885-2

Transferrin (29000)

Effective Date 12/1/2012

CPT(s): 84466

Expiration Date:

Billing No: 29000

Interface Code: TRANS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRANS	TRANSFERRIN	RES	N	mg/dL	3034-6

Triglycerides (29050)

Effective Date 12/1/2012

CPT(s): 84478

Expiration Date:

Billing No: 29050

Interface Code: TRIG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRIG	TRIGLYCERIDES	RES	N	mg/dL	2571-8

Troponin I (29085)

Effective Date 12/1/2012

CPT(s): 84484

Expiration Date:

Billing No: 29085

Interface Code: TROP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TROP	TROPONIN I	RES	N	ng/mL	10839-9

Transfusion Reaction Investigation (55750)

Effective Date 12/1/2012

CPT(s): 87081, 87205

Expiration Date:

Billing No: 55750

Interface Code: TRXM

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			TEXT		
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		14924-5			
RPT	REPORT STATUS	RES	N					

TSH (Thyroid Stim Hormone) (29100)

Effective Date 12/1/2012

CPT(s): 84443

Expiration Date:

Billing No: 29100

Interface Code: TSH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TSH	TSH (Thyroid Stim Hormone)	RES	N	mIU/mL	3016-3

Urinalysis (w/ Microscopic) (50050)

Effective Date 12/1/2012

CPT(s): 81001

Expiration Date:

Billing No: 50050

Interface Code: UA May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCOL	COLOR, UR	RES	N		50553-7
UAPP	APPEARANCE, UR	RES	N		5767-9
USPG	SPECIFIC GRAVITY, UR	RES	N		53326-5
ULE	LEUK ESTERASE, UR	RES	N		60026-2
UPH	pH, UR	RES	N	Units	50560-2
UPROT	PROTEIN, UR	RES	N	mg/dL	50561-0
UGL	GLUCOSE, UR	RES	N	mg/dL	53328-1
UKET	KETONES, UR	RES	N	mg/dL	50557-8
UBILI	BILIRUBIN, UR	RES	N		53327-3
UBLD	BLOOD, UR	RES	N		57751-0
UNIT	NITRITE, UR	RES	N		50558-6
UWBC	WBC`S, UR	RES	N	/HPF	46702-7
URBC	RBC`S, UR	RES	N	/HPF	46419-8
HYLCA	HYALINE CAST, UR	RES	N	/LPF	33223-9
UBACT	BACTERIA, UR	RES	N	/HPF	33218-9
UEP	EPITHELIAL CELLS, UR	RES	N	/HPF	33219-7
SSALIC	SULFOSALICYLIC ACID, UR	PRFLX	N		53525-2
TRIK	TRICHOMONAS, UR	PRFLX	N		5813-1
UFFAT	URINE FREE FAT, UR	PRFLX	N		2272-3
OFB	OVAL FAT BODIES, UR	PRFLX	N		25158-7
USPRM	SPERM, UR	PRFLX	N		8248-7
RBCCA	RBC CAST, UR	PRFLX	N		5807-3
TPCR	TRIPLE PHOSPHATE CRYSTAL, UR	PRFLX	N		5814-9
WBCCA	WBC CAST, UR	PRFLX	N		5820-6
RTECA	RENAL TUBULAR EPI CAST, UR	PRFLX	N		30079-8
WAXCA	WAXY CAST, UR	PRFLX	N		5819-8
UNIDCR	UNIDENTIFIED CRYSTALS, UR	PRFLX	N		5783-6
BACTCA	BACTERIA CAST, UR	PRFLX	N		53128-5
FATCA	FATTY CAST, UR	PRFLX	N		5789-3
UOTH	OTHER FORMED ELEMENTS, UR	PRFLX	N		58442-5
UYST	YEAST, UR	PRFLX	N		5822-2
UAMOR	AMORPHOUS, UR	PRFLX	N		8246-1
DEBRIS	NONCELLULAR DEBRIS, UR	PRFLX	N		
CIND	URINE CULTURE IF INIDICATED	PRFLX	N		
CAOXCR	CALCIUM OXALATE CRYSTALS, UR	PRFLX	N		25148-8
NAUCR	SODIUM URATE CRYSTAL, UR	PRFLX	N		53129-3

GRCA	GRANULAR CAST, UR	PRFLX	N	5793-5
CAPCR	CALCIUM PHOSPHATE CRYSTAL, UR	PRFLX	N	25149-6
AMBCR	AMMONIUM BIURATE CRYSTAL, UR	PRFLX	N	25144-7
UMUC	MUCUS, UR	PRFLX	N	8247-9
UACCR	URIC ACID CRYSTALS, UR	PRFLX	N	46138-4
URBC	RBC'S, UR	PRFLX	N	46419-8
CACCR	CALCIUM CARBONATE CRYSTAL, UR	PRFLX	N	25147-0
UWBC	WBC'S, UR	PRFLX	N	46702-7
UCOM	COMMENTS, URINALYSIS	PRFLX	N	
UVOLU	URINE VOLUME	PRFLX	N	28009-9
URED	REDUCING SUBSTANCES, UR	PRFLX	N	32147-1
RTEP	RENAL TUBULAR EPI, UR	PRFLX	N	26052-1
CHOLCR	CHOLESTEROL CRYSTAL, UR	PRFLX	N	25153-8
HYPHAE	HYPHAE, UR	PRFLX	N	41861-6
BILCR	BILIRUBIN CRYSTAL, UR	PRFLX	N	25146-2
TYRCR	TYROSINE CRYSTAL, UR	PRFLX	N	53119-4
CYSCR	CYSTINE CRYSTAL, UR	PRFLX	N	25155-3
LEUCR	LEUCINE CRYSTAL, UR	PRFLX	N	25163-7
MICCOM	COMMENT FOR MICROSCOPIC, UR	PRFLX	N	

Uric Acid (29250)

Effective Date 12/1/2012

CPT(s): 84550

Expiration Date:

Billing No: 29250

Interface Code: UAC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UAC	URIC ACID	RES	N	mg/dL	3084-1

Culture, Acid Fast Mycobacteria Urine (52001)

Effective Date 12/1/2012

CPT(s): 87116, 87206

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 52001

Interface Code: UAFC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SDES	SPECIMEN DESCRIPTION	AOE	N		
SREQ	SPECIAL REQUESTS	AOE	N		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2
SREQ	SPECIAL REQUESTS	RES	N		8251-1
AF	ACID FAST STAIN	RES	N		11545-1
CULT	CULTURE	RES	N		543-9
RPT	REPORT STATUS	RES	N		

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	URINE	URINE
TEXT		

Alcohol Urine (Ethanol) (20350)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 20350

Interface Code: UALC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UALC	ALCOHOL URINE (Ethanol)	RES	N		42242-8

Amylase Urine Timed (20750)

Effective Date 12/1/2012

CPT(s): 82150

Expiration Date:

Billing No: 20750

Interface Code: UAMYL May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR2	COLLECTION PERIOD	AOE	Y			TEXT		
UV2	URINE VOLUME	AOE	Y			TEXT		
UAMYH	AMYLASE, TIMED URINE	RES	N	U/hr	1800-2			
UAMY	AMYLASE, URINE	RES	N	U/L	25311-2			

Amylase Urine Random (20700)

Effective Date 12/1/2012

CPT(s): 82150

Expiration Date:

Billing No: 20700

Interface Code: UAMYR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UAMYR	AMYLSE URINE RANDOM	RES	N	U/L	1799-6

Urinalysis Complete w/ Reflex Culture (50150)

Effective Date 9/13/2013

CPT(s): 81001

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 50150

Interface Code: UARC May Reflex URNC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCOL	COLOR, UR	RES	N		50553-7
UAPP	APPEARANCE, UR	RES	N		5767-9
USPG	SPECIFIC GRAVITY, UR	RES	N		53326-5
ULE	LEUK ESTERASE, UR	RES	N		60026-2
UPH	pH, UR	RES	N	Units	50560-2
UPROT	PROTEIN, UR	RES	N	mg/dL	50561-0
UGL	GLUCOSE, UR	RES	N	mg/dL	53328-1
UKET	KETONES, UR	RES	N	mg/dL	50557-8
UBILI	BILIRUBIN, UR	RES	N		53327-3
UBLD	BLOOD, UR	RES	N		57751-0
UNIT	NITRITE, UR	RES	N		50558-6
UWBC	WBC`S, UR	RES	N	/HPF	46702-7
URBC	RBC`S, UR	RES	N	/HPF	46419-8
HYLCA	HYALINE CAST, UR	RES	N	/LPF	33223-9
UBACT	BACTERIA, UR	RES	N	/HPF	33218-9
UEP	EPITHELIAL CELLS, UR	RES	N	/HPF	33219-7
TRIK	TRICHOMONAS, UR	PRFLX	N		5813-1
UFFAT	URINE FREE FAT, UR	PRFLX	N		2272-3
OFB	OVAL FAT BODIES, UR	PRFLX	N		25158-7
USPRM	SPERM, UR	PRFLX	N		8248-7
RBCCA	RBC CAST, UR	PRFLX	N		5807-3
TPCR	TRIPLE PHOSPHATE CRYSTAL, UR	PRFLX	N		5814-9
WBCCA	WBC CAST, UR	PRFLX	N		5820-6
RTECA	RENAL TUBULAR EPI CAST, UR	PRFLX	N		30079-8
WAXCA	WAXY CAST, UR	PRFLX	N		5819-8
UNIDCR	UNIDENTIFIED CRYSTALS, UR	PRFLX	N		5783-6
BACTCA	BACTERIA CAST, UR	PRFLX	N		53128-5
FATCA	FATTY CAST, UR	PRFLX	N		5789-3
UOTH	OTHER FORMED ELEMENTS, UR	PRFLX	N		58442-5
UYST	YEAST, UR	PRFLX	N		5822-2
UAMOR	AMORPHOUS, UR	PRFLX	N		8246-1
DEBRIS	NONCELLULAR DEBRIS, UR	PRFLX	N		
CIND	URINE CULTURE IF INIDICATED	PRFLX	N		
CAOXCR	CALCIUM OXALATE CRYSTALS, UR	PRFLX	N		25148-8
NAUCR	SODIUM URATE CRYSTAL, UR	PRFLX	N		53129-3
GRCA	GRANULAR CAST, UR	PRFLX	N		5793-5

CAPCR	CALCIUM PHOSPHATE CRYSTAL, UR	PRFLX	N	25149-6
AMBCR	AMMONIUM BIURATE CRYSTAL, UR	PRFLX	N	25144-7
UMUC	MUCUS, UR	PRFLX	N	8247-9
UACCR	URIC ACID CRYSTALS, UR	PRFLX	N	46138-4
CACCR	CALCIUM CARBONATE CRYSTAL, UR	PRFLX	N	25147-0
UCOM	COMMENTS, URINALYSIS	PRFLX	N	
UVOLU	URINE VOLUME	PRFLX	N	28009-9
URED	REDUCING SUBSTANCES, UR	PRFLX	N	32147-1
RTEP	RENAL TUBULAR EPI, UR	PRFLX	N	26052-1
CHOLCR	CHOLESTEROL CRYSTAL, UR	PRFLX	N	25153-8
HYPHAE	HYPHAE, UR	PRFLX	N	41861-6
BILCR	BILIRUBIN CRYSTAL, UR	PRFLX	N	25146-2
TYRCR	TYROSINE CRYSTAL, UR	PRFLX	N	53119-4
CYSCR	CYSTINE CRYSTAL, UR	PRFLX	N	25155-3
LEUCR	LEUCINE CRYSTAL,UR	PRFLX	N	25163-7
MICCOM	COMMENT FOR MICROSCOPIC UR	PRFLX	N	

Urea Nitrogen Urine Timed (29210)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84540

Billing No: 29210

Interface Code: UBUN May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR3	COLLECTION PERIOD	AOE	Y			TEXT		
UV3	URINE VOLUME	AOE	Y			TEXT		
UUREAN	UREA NITROGEN, URINE	RES	N	mg/dL	3095-7			
UNGM24	UREA NITROGEN, TIMED URINE	RES	N	gm/day	3096-5			

Calcium/Creatinine Ratio, Random Urine (21580)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 82340, 82570

Billing No: 21580

Interface Code: UCACRR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCAR	CALCIUM, RANDOM URINE	RES	N	mg/dL	17862-4
UCRR	CREATININE, RAND URINE	RES	N	mg/dL	2161-8
UCACR	CA/CR RATIO, RANDOM URINE	RES	N	Ratio	9321-1

Calcium Urine Timed (21500)

Effective Date 12/1/2012

CPT(s): 82340

Expiration Date:

Billing No: 21500

Interface Code: UCAD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR4	COLLECTION PERIOD	AOE	Y			TEXT		
UV4	URINE VOLUME	AOE	Y			TEXT		
UCA	CALCIUM, URINE	RES	N	mg/dL	18488-7			
UCADAY	CALCIUM, TIMED URINE	RES	N	mg/day	6874-2			

Calcium Urine Random (21560)

Effective Date 12/1/2012

CPT(s): 82340

Expiration Date:

Billing No: 21560

Interface Code: UCAR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCAR	CALCIUM URINE RANDOM	RES	N	mg/dL	17862-4

Chloride Urine Timed (22000)

Effective Date 12/1/2012

CPT(s): 82436

Expiration Date:

Billing No: 22000

Interface Code: UCLD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR5	COLLECTION PERIOD	AOE	Y			TEXT		
UV5	URINE VOLUME	AOE	Y			TEXT		
UCL	CHLORIDE, TIMED URINE	RES	N	mEq/day	35676-6			
UCLT	CHLORIDE, URINE	RES	N	mEq/L	21194-6			

Chloride Urine Random (21990)

Effective Date 12/1/2012

CPT(s): 82436

Expiration Date:

Billing No: 21990

Interface Code: UCLR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCLR	CHLORIDE URINE RANDOM	RES	N	mEq/L	2078-4

Creatinine Urine Timed (22800)

Effective Date 12/1/2012

CPT(s): 82570

Expiration Date:

Billing No: 22800

Interface Code: UCRDAY May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR6	COLLECTION PERIOD	AOE	Y			TEXT		
UV6	URINE VOLUME	AOE	Y			TEXT		
UCR	CREATININE, URINE	RES	N	mg/dL	2161-8			
UCRD	CREATININE, TIMED URINE	RES	N	mg/day	2162-6			

Creatinine Urine Random (22850)

Effective Date 12/1/2012

CPT(s): 82570

Expiration Date:

Billing No: 22850

Interface Code: UCRR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCRR	CREATININE URINE RANDOM	RES	N	mg/dL	2161-8

Urine Cytology

Effective Date 9/30/2015

CPT(s):

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 88112U

Interface Code: UCYT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
PMSUAS	URINE SOURCE	AOE	Y			SELECTLIST	VOID`CATH`CYSTO`WASH	VOIDED`CATHETER`CYSTOSCOPY`BLADDER WASHING
PMSSP	SURGICAL PROCEDURE	AOE	N			TEXT		
PMSCD	Clinical Diagnosis and History	AOE	Y			TEXT		
UCYT	URINE CYTOLOGY	RES	N		33716-2			

Glucose Quant. Urine Timed (24250)

Effective Date 12/1/2012

CPT(s): 82945

Expiration Date:

Billing No: 24250

Interface Code: UGLUD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR7	COLLECTION PERIOD	AOE	Y			TEXT		
UV7	URINE VOLUME	AOE	Y			TEXT		
UGLU	GLUCOSE, TIMED URINE	RES	N	mg/day	2351-5			
UGLUT	GLUCOSE, URINE	RES	N	mg/dL	21305-8			

Glucose Quant. Urine Random (24260)

Effective Date 12/1/2012

CPT(s): 82945

Expiration Date:

Billing No: 24260

Interface Code: UGLUR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UGLUR	GLUCOSE QUANT URINE RANDOM	RES	N	mg/dL	2350-7

Potassium Urine Timed (27360)

Effective Date 12/1/2012

CPT(s): 84133

Expiration Date:

Billing No: 27360

Interface Code: UKD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR8	COLLECTION PERIOD	AOE	Y			TEXT		
UV8	URINE VOLUME	AOE	Y			TEXT		
UK	POTASSIUM, TIMED URINE	RES	N	mEq/day	2829-0			
UKT	POTASSIUM, URINE	RES	N	mEq/L	21476-7			

Potassium Urine Random (27350)

Effective Date 12/1/2012

CPT(s): 84133

Expiration Date:

Billing No: 27350

Interface Code: UKR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UKR	POTASSIUM URINE RANDOM	RES	N	mEq/L	2828-2

Urinalysis w/Rfx to Microscopic (50250)

Effective Date 12/1/2012

CPT(s): 81003

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 50250

Interface Code: UMAC May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCOL	COLOR, UR	RES	N		50553-7
UAPP	APPEARANCE, UR	RES	N		5767-9
USPG	SPECIFIC GRAVITY, UR	RES	N		53326-5
ULE	LEUK ESTERASE, UR	RES	N		60026-2
UPH	pH, UR	RES	N	Units	50560-2
UPROT	PROTEIN, UR	RES	N	mg/dL	50561-0
UGL	GLUCOSE, UR	RES	N	mg/dL	53328-1
UKET	KETONES, UR	RES	N	mg/dL	50557-8
UBILI	BILIRUBIN, UR	RES	N		53327-3
UBLD	BLOOD, UR	RES	N		57751-0
UNIT	NITRITE, UR	RES	N		50558-6
HYLCA	HYALINE CAST, UR	RES	N	/LPF	33223-9
UBACT	BACTERIA, UR	RES	N	/HPF	33218-9
UEP	EPITHELIAL CELLS, UR	RES	N	/HPF	33219-7
SSALIC	SULFOSALICYLIC ACID, UR	PRFLX	N		53525-2
TRIK	TRICHOMONAS, UR	PRFLX	N		5813-1
UFFAT	URINE FREE FAT, UR	PRFLX	N		2272-3
OFB	OVAL FAT BODIES, UR	PRFLX	N		25158-7
USPRM	SPERM, UR	PRFLX	N		8248-7
RBCCA	RBC CAST, UR	PRFLX	N		5807-3
TPCR	TRIPLE PHOSPHATE CRYSTAL, UR	PRFLX	N		5814-9
WBCCA	WBC CAST, UR	PRFLX	N		5820-6
RTECA	RENAL TUBULAR EPI CAST, UR	PRFLX	N		30079-8
WAXCA	WAXY CAST, UR	PRFLX	N		5819-8
UNIDCR	UNIDENTIFIED CRYSTALS, UR	PRFLX	N		5783-6
BACTCA	BACTERIA CAST, UR	PRFLX	N		53128-5
FATCA	FATTY CAST, UR	PRFLX	N		5789-3
UOTH	OTHER FORMED ELEMENTS, UR	PRFLX	N		58442-5
UYST	YEAST, UR	PRFLX	N		5822-2
UAMOR	AMORPHOUS, UR	PRFLX	N		8246-1
DEBRIS	NONCELLULAR DEBRIS, UR	PRFLX	N		
CIND	URINE CULTURE IF INIDICATED	PRFLX	N		
CAOXCR	CALCIUM OXALATE CRYSTALS, UR	PRFLX	N		25148-8
NAUCR	SODIUM URATE CRYSTAL, UR	PRFLX	N		53129-3
GRCA	GRANULAR CAST, UR	PRFLX	N		5793-5
CAPCR	CALCIUM PHOSPHATE CRYSTAL, UR	PRFLX	N		25149-6

AMBCR	AMMONIUM BIURATE CRYSTAL, UR	PRFLX	N	25144-7
UMUC	MUCUS, UR	PRFLX	N	8247-9
UACCR	URIC ACID CRYSTALS, UR	PRFLX	N	46138-4
URBC	RBC'S, UR	PRFLX	N	46419-8
CACCR	CALCIUM CARBONATE CRYSTAL, UR	PRFLX	N	25147-0
UWBC	WBC'S, UR	PRFLX	N	46702-7
UCOM	COMMENTS, URINALYSIS	PRFLX	N	
UVOLU	URINE VOLUME	PRFLX	N	28009-9
URED	REDUCING SUBSTANCES, UR	PRFLX	N	32147-1
RTEP	RENAL TUBULAR EPI, UR	PRFLX	N	26052-1
CHOLCR	CHOLESTEROL CRYSTAL, UR	PRFLX	N	25153-8
HYPHAE	HYPHAE, UR	PRFLX	N	41861-6
BILCR	BILIRUBIN CRYSTAL, UR	PRFLX	N	25146-2
TYRCR	TYROSINE CRYSTAL, UR	PRFLX	N	53119-4
CYSCR	CYSTINE CRYSTAL, UR	PRFLX	N	25155-3
LEUCR	LEUCINE CRYSTAL, UR	PRFLX	N	25163-7
MICCOM	COMMENT FOR MICROSCOPIC	PRFLX	N	

Urinalysis (w/o Microscopic) (50200)

Effective Date 12/1/2012

CPT(s): 81003

Expiration Date:

Billing No: 50200

Interface Code: UMACO May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UCOL	COLOR, UR	RES	N		50553-7
UAPP	APPEARANCE, UR	RES	N		5767-9
USPG	SPECIFIC GRAVITY, UR	RES	N		53326-5
ULE	LEUK ESTERASE, UR	RES	N		60026-2
UPH	pH, UR	RES	N	Units	50560-2
UPROT	PROTEIN, UR	RES	N	mg/dL	50561-0
UGL	GLUCOSE, UR	RES	N	mg/dL	53328-1
UKET	KETONES, UR	RES	N	mg/dL	50557-8
UBILI	BILIRUBIN, UR	RES	N		53327-3
UBLD	BLOOD, UR	RES	N		57751-0
UNIT	NITRITE, UR	RES	N		50558-6
SSALIC	SULFOSALICYLIC ACID, UR	PRFLX	N		53525-2
UCOM	COMMENTS, URINALYSIS	PRFLX	N		
UVOLU	URINE VOLUME	PRFLX	N		28009-9
URED	REDUCING SUBSTANCES, UR	PRFLX	N		32147-1

Magnesium Urine Timed (26050)

Effective Date 12/1/2012

CPT(s): 83735

Expiration Date:

Billing No: 26050

Interface Code: UMGD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR1	COLLECTION PERIOD	AOE	Y			TEXT		
UV1	URINE VOLUME	AOE	Y			TEXT		
UMGT	MAGNESIUM, URINE	RES	N	mg/dL	19124-7			
UMG	MAGNESIUM, TIMED URINE	RES	N	mg/day	24447-5			

Magnesium Urine Random (25900)

Effective Date 12/1/2012

CPT(s): 83735

Expiration Date:

Billing No: 25900

Interface Code: UMGR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UMGR	MAGNESIUM URINE RANDOM	RES	N	mg/dL	19124-7

Urinalysis Microscopic Only (50100)

Effective Date 12/1/2012

CPT(s): 81015

Expiration Date:

Billing No: 50100

Interface Code: UMICO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UWBC	WBC`S, UR	RES	N	/HPF	46702-7
URBC	RBC`S, UR	RES	N	/HPF	46419-8
TRIK	TRICHOMONAS, UR	PRFLX	N		5813-1
UFFAT	URINE FREE FAT, UR	PRFLX	N		2272-3
OFB	OVAL FAT BODIES, UR	PRFLX	N		25158-7
USPRM	SPERM, UR	PRFLX	N		8248-7
HYLCA	HYALINE CAST, UR	RES	N	/LPF	33223-9
UBACT	BACTERIA, UR	RES	N	/HPF	33218-9
UEP	EPITHELIAL CELLS, UR	RES	N	/HPF	33219-7
RBCCA	RBC CAST, UR	PRFLX	N		5807-3
TPCR	TRIPLE PHOSPHATE CRYSTAL, UR	PRFLX	N		5814-9
WBCCA	WBC CAST, UR	PRFLX	N		5820-6
RTECA	RENAL TUBULAR EPI CAST, UR	PRFLX	N		30079-8
WAXCA	WAXY CAST, UR	PRFLX	N		5819-8
UNIDCR	UNIDENTIFIED CRYSTALS, UR	PRFLX	N		5783-6
BACTCA	BACTERIA CAST, UR	PRFLX	N		53128-5
FATCA	FATTY CAST, UR	PRFLX	N		5789-3
UOTH	OTHER FORMED ELEMENTS, UR	PRFLX	N		58442-5
UYST	YEAST, UR	PRFLX	N		5822-2
UAMOR	AMORPHOUS, UR	PRFLX	N		8246-1
DEBRIS	NONCELLULAR DEBRIS, UR	PRFLX	N		
CIND	URINE CULTURE IF INDICATED	PRFLX	N		
CAOXCR	CALCIUM OXALATE CRYSTALS, UR	PRFLX	N		25148-8
NAUCR	SODIUM URATE CRYSTAL, UR	PRFLX	N		53129-3
GRCA	GRANULAR CAST, UR	PRFLX	N		5793-5
CAPCR	CALCIUM PHOSPHATE CRYSTAL, UR	PRFLX	N		25149-6
AMBCR	AMMONIUM BIURATE CRYSTAL, UR	PRFLX	N		25144-7
UMUC	MUCUS, UR	PRFLX	N		8247-9
UACCR	URIC ACID CRYSTALS, UR	PRFLX	N		46138-4
URBC	RBC'S, UR	PRFLX	N		46419-8
CACCR	CALCIUM CARBONATE CRYSTAL, UR	PRFLX	N		25147-0
UWBC	WBC'S, UR	PRFLX	N		46702-7
RTEP	RENAL TUBULAR EPI, UR	PRFLX	N		26052-1
CHOLCR	CHOLESTEROL CRYSTAL, UR	PRFLX	N		25153-8
HYPHAE	HYPHAE, UR	PRFLX	N		41861-6
BILCR	BILIRUBIN CRYSTAL, UR	PRFLX	N		25146-2

TYRCR	TYROSINE CRYSTAL, UR	PRFLX	N		53119-4
CYSCR	CYSTINE CRYSTAL, UR	PRFLX	N		25155-3
LEUCR	LEUCINE CRYSTAL, UR	PRFLX	N		25163-7
MICCOM	COMMENT FOR MICROSCOPIC	PRFLX	N		

Sodium Urine Timed (28460)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84300

Billing No: 28460

Interface Code: UNAD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
UHR9	COLLECTION PERIOD	AOE	Y			TEXT		
UV9	URINE VOLUME	AOE	Y			TEXT		
UNA	SODIUM, TIMED URINE	RES	N	mEq/day	21527-7			
UNAT	SODIUM, URINE	RES	N	mEq/L	2955-3			

Sodium Urine Random (28450)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84300

Billing No: 28450

Interface Code: UNAR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UNAR	SODIUM URINE RANDOM	RES	N	mEq/L	2955-3

Osmolality Urine (26600)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 83935

Billing No: 26600

Interface Code: UOSMO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UOSM	OSMOLALITY URINE	RES	N	mOsm/kg	2695-5
USOSM	URINE/SERUM OSM	RES	N	Ratio	48149-9

Protein Electro Urine Timed w/ T. Protein (23200)

Effective Date 12/1/2012

CPT(s): 84156, 84166

Expiration Date:

Billing No: 23200

Interface Code: UPE May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UVOL	URINE VOLUME	AOE	N	mL		TEXT		
HRS	COLLECTION PERIOD	AOE	N	hrs		TEXT		
UVOL	URINE VOLUME	RES	N	mL	28009-9			
HRS	COLLECTION PERIOD	RES	N	hrs	13362-9			
UPROTX	PROTEIN, URINE	RES	N	mg/dL	2888-6			
UPROTN	PROTEIN, TIMED URINE	RES	N	mg/day	2889-4			
UALBP	ALBUMIN	RES	N	%	13992-3			
UA1P	ALPHA-1	RES	N	%	13990-7			
UA2P	ALPHA-2	RES	N	%	13993-1			
UBETAP	BETA	RES	N	%	13994-9			
UGAMP	GAMMA	RES	N	%	13995-6			
MCBND2	MONOCLONAL BAND, URINE	RES	N					
UPEINT	URINE ELEC. INTERPRETATION	RES	N		49299-1			

Protein Electro Urine Timed w/o T.Protein (27560)

Effective Date 12/1/2012

CPT(s): 84166

Expiration Date:

Billing No: 27560

Interface Code: UPEL May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UVOL	URINE VOLUME	AOE	Y			TEXT		
HRS	COLLECTION PERIOD	AOE	Y			TEXT		
PEUPRN	PROTEIN, TIMED URINE	RES	N	mg/day	2889-4			
UALBP	ALBUMIN	RES	N	%	13992-3			
UA1P	ALPHA-1	RES	N	%	13990-7			
UA2P	ALPHA-2	RES	N	%	13993-1			
UBETAP	BETA	RES	N	%	13994-9			
UGAMP	GAMMA	RES	N	%	13995-6			
MCBND3	MONOCLONAL BAND, URINE	RES	N					
UPEIN1	URINE ELEC INTERPRETATION	RES	N		49299-1			

Protein Electro Urine Random w/o T.Protein (27550)

Effective Date 12/1/2012

CPT(s): 84166

Expiration Date:

Billing No: 27550

Interface Code: UPELR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PEUPRR	PROTEIN, RANDOM URINE	RES	N	mg/dL	2888-6
UALBP	ALBUMIN	RES	N	%	13992-3
UA1P	ALPHA-1	RES	N	%	13990-7
UA2P	ALPHA-2	RES	N	%	13993-1
UBETAP	BETA	RES	N	%	13994-9
UGAMP	GAMMA	RES	N	%	13995-6
MCBND4	MONOCLONAL BAND, URINE	RES	N		
UPEIN2	URINE ELEC INTERPRETATION	RES	N		49299-1

Protein Electro Urine Random w/ T.Protein (23250)

Effective Date 12/1/2012

CPT(s): 84156, 84166

Expiration Date:

Billing No: 23250

Interface Code: UPER

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPROTR	PROTEIN, RANDOM URINE	RES	N	mg/dL	2888-6
UALBP	ALBUMIN	RES	N	%	13992-3
UA1P	ALPHA-1	RES	N	%	13990-7
UA2P	ALPHA-2	RES	N	%	13993-1
UBETAP	BETA	RES	N	%	13994-9
UGAMP	GAMMA	RES	N	%	13995-6
MCBND5	MONOCLONAL BAND, URINE	RES	N		
UPEIN3	URINE ELEC. INTERPRETATION	RES	N		49299-1

Protein Electro Urine Random w/ T.Protein w/ Reflex Ifix (23255)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84156, 84166

Additional CPTs will be billed when appropriate.

Billing No: 23255

Interface Code: UPERRX Reflex Immunofixation, Urine (URFIX) if monoclonal peak present

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPROTR	PROTEIN, RANDOM URINE	RES	N	mg/dL	2888-6
UALBP	ALBUMIN	RES	N	%	13992-3
UA1P	ALPHA-1	RES	N	%	13990-7
UA2P	ALPHA-2	RES	N	%	13993-1
UBETAP	BETA	RES	N	%	13994-9
UGAMP	GAMMA	RES	N	%	13995-6
MCBND8	MONOCLONAL BAND, URINE	RES	N		
REFLX6	URINE ELEC REFLEX COMMENT:	RES	N		
UPEIN4	URINE ELEC INTERPRETATION	RES	N		49299-1

Protein Electro Urine Timed w/T. Protein w/ Reflex Ifix (23205)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 84156, 84166

Additional CPTs will be billed when appropriate.

Billing No: 23205

Interface Code: UPETRX Reflex Immunofixation, Urine (URFIX) if monoclonal peak present.
May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UVOL	URINE VOLUME	AOE	N	mL	
HRS	COLLECTION PERIOD	AOE	N	hrs	
UVOL	URINE VOLUME	RES	N	mL	28009-9
HRS	COLLECTION PERIOD	RES	N	hrs	13362-9
UPROTX	PROTEIN, URINE	RES	N	mg/dL	2888-6
UPROTN	PROTEIN, TIMED URINE	RES	N	mg/day	2889-4
UALBP	ALBUMIN	RES	N	%	13992-3
UA1P	ALPHA-1	RES	N	%	13990-7
UA2P	ALPHA-2	RES	N	%	13993-1
UBETAP	BETA	RES	N	%	13994-9
UGAMP	GAMMA	RES	N	%	13995-6
MCBND7	MONOCLONAL BAND, URINE	RES	N		
REFLX3	URINE ELEC REFLEX COMMENT:	RES	N		
UPEIN5	URINE ELEC INTERPRETATION	RES	N		49299-1

---------- A O E ----------

Type	List Codes	List Code Descriptions
TEXT		
TEXT		

Phosphorus Urine Timed (27150)

Effective Date 12/1/2012

CPT(s): 84105

Expiration Date:

Billing No: 27150

Interface Code: UPHOSD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR10	COLLECTION PERIOD	AOE	Y			TEXT		
UV10	URINE VOLUME	AOE	Y			TEXT		
UPHOS	PHOSPHORUS, TIMED URINE	RES	N	mg/day	2779-7			
UPHOST	PHOSPHORUS, URINE	RES	N	mg/dL	2778-9			

Phosphorus Urine Random (27100)

Effective Date 12/1/2012

CPT(s): 84105

Expiration Date:

Billing No: 27100

Interface Code: UPHOSR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPHOSR	Phosphorus Urine Random	RES	N	mg/dL	2778-9

Protein/Creat Ratio, Timed Urine (27930)

Effective Date 12/1/2012

CPT(s): 84156, 82570

Expiration Date:

Billing No: 27930

Interface Code: UPRCR May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR11	COLLECTION PERIOD	AOE	Y			TEXT		
UV11	URINE VOLUME	AOE	Y			TEXT		
UPROTX	PROTEIN, URINE	RES	N	mg/dL	2888-6			
UCR	CREATININE, URINE	RES	N	mg/dL	2161-8			
UPCRA	PROT/CREAT RATIO, TIMED URINE	RES	N	Ratio	40486-3			

Protein/Creat Ratio,Random Urine (Spot) (27920)

Effective Date 12/1/2012

CPT(s): 84156, 82570

Expiration Date:

Billing No: 27920

Interface Code: UPRCRR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPROTR	PROTEIN, RANDOM URINE	RES	N	mg/dL	2888-6
UCRR	CREATININE, RAND URINE	RES	N	mg/dL	2161-8
UPCA	PROT/CREAT RATIO, URINE	RES	N	Ratio	2890-2

Pregnancy Test Urine (HCG Qual.) (24405)

Effective Date 12/1/2012

CPT(s): 81025

Expiration Date:

Billing No: 24405

Interface Code: UPREG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPREG	Pregnancy Test Urine (HCG Qual.)	RES	N		2106-3

Protein Urine Quant. Random (27910)

Effective Date 12/1/2012

CPT(s): 84156

Expiration Date:

Billing No: 27910

Interface Code: UPROTR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UPROTR	Protein Urine Quant. Random	RES	N	mg/dL	2888-6

Protein Urine Quant. Timed (27900)

Effective Date 12/1/2012

CPT(s): 84156

Expiration Date:

Billing No: 27900

Interface Code: UPRT May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR12	COLLECTION PERIOD	AOE	Y			TEXT		
UV12	URINE VOLUME	AOE	Y			TEXT		
UPROTN	PROTEIN, TIMED URINE	RES	N	mg/day	2889-4			
UPROTX	PROTEIN, URINE	RES	N	mg/dL	2888-6			

Immunofixation Urine (Qualitative) (25050)

Effective Date 12/1/2012

CPT(s): 86335

Expiration Date:

Billing No: 25050

Interface Code: URFIX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UIFIGG	IgG	RES	N		18302-0
UIFIGA	IgA	RES	N		18300-4
UIFIGM	IgM	RES	N		18304-6
UIFKAP	KAPPA	RES	N		40636-3
UIFLAM	LAMBDA	RES	N		40638-9
UIFINT	INTERPRETATION:	RES	N		49300-7

Culture, Urine (55800)

Effective Date 12/1/2012

CPT(s): 87086

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55800

Interface Code: URNC May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	URINE`URINEC	URINE`URINE CATHETERIZED
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CNT	COLONY COUNT	PRFLX	N		19091-8			
CULT	CULTURE	RES	N		630-4			
RPT	REPORT STATUS	RES	N					

Culture, Urine, OB (55801)

Effective Date 12/1/2012

CPT(s): 87086

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55801

Interface Code: URNCOB May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	URINE`URINEC	URINE`URINE CATHETERIZED
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CNT	COLONY COUNT	PRFLX	N		19091-8			
CULT	CULTURE	RES	N		630-4			
RPT	REPORT STATUS	RES	N					

Specific Gravity Urine (50280)

Effective Date 12/1/2012

CPT(s): 81002

Expiration Date:

Billing No: 50280

Interface Code: USPG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
USPG	SPECIFIC GRAVITY, URINE	RES	N		5810-7

Uric Acid Urine Timed (29360)

Effective Date 12/1/2012

CPT(s): 84560

Expiration Date:

Billing No: 29360

Interface Code: UUACD May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR13	COLLECTION PERIOD	AOE	Y			TEXT		
UV13	URINE VOLUME	AOE	Y			TEXT		
UUAC	URIC ACID, TIMED URINE	RES	N	mg/day	3087-4			
UUACT	URIC ACID, URINE	RES	N	mg/dL	3086-6			

Uric Acid Urine Random (29350)

Effective Date 12/1/2012

CPT(s): 84560

Expiration Date:

Billing No: 29350

Interface Code: UUACR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UUACR	URIC ACID URINE RANDOM	RES	N	mg/dL	3086-6

Urea Nitrogen Urine Random (29200)

Effective Date 12/1/2012

CPT(s): 84540

Expiration Date:

Billing No: 29200

Interface Code: UUNR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UUNR	UREA NITROGEN URINE RANDOM	RES	N	mg/dL	3095-7

Urea Urine Timed (29230)

Effective Date 12/1/2012

CPT(s): 84540

Expiration Date:

Billing No: 29230

Interface Code: UUREA May Reflex PV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
UHR14	COLLECTION PERIOD	AOE	Y			TEXT		
UV14	URINE VOLUME	AOE	Y			TEXT		
UREAD	UREA, TIMED URINE	RES	N	gm/day	3096-5			
UUREAN	UREA NITROGEN, URINE	RES	N	mg/dL	3095-7			

Valproic Acid (Depakene) (22950)

Effective Date 12/1/2012

CPT(s): 80164

Expiration Date:

Billing No: 22950

Interface Code: VALP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTVALP	DATE OF LAST DOSE	AOE	N			DATE		
TMVALP	TIME OF LAST DOSE	AOE	N			TEXT		
DSVALP	DOSAGE	AOE	N			TEXT		
VALPR	VALPROIC AC-DEPAKENE	RES	N	mg/L	4086-5			
DTVALP	DATE OF LAST DOSE	RES	N		29742-4			
TMVALP	TIME OF LAST DOSE	RES	N		29637-6			
DSVALP	DOSAGE	RES	N		18817-7			

Vancomycin 2 hr Post Dose (29510)

Effective Date 12/1/2012

CPT(s): 80202

Expiration Date:

Billing No: 29510

Interface Code: VAN2

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DSVAN2	DOSAGE	AOE	N			TEXT		
DTVAN2	DATE OF LAST DOSE	AOE	N			DATE		
TMVAN2	TIME OF LAST DOSE	AOE	N			TEXT		
DSVAN2	DOSAGE	RES	N		18817-7			
DTVAN2	DATE OF LAST DOSE	RES	N		29742-4			
TMVAN2	TIME OF LAST DOSE	RES	N		29637-6			
VANCO2	VANCOMYCIN	RES	N	mg/L	20578-1			

Vancomycin (29400)

Effective Date 12/1/2012

CPT(s): 80202

Expiration Date:

Billing No: 29400

Interface Code: VANK

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTVANK	DATE OF LAST DOSE	AOE	N			DATE		
TMVANK	TIME OF LAST DOSE	AOE	N			TEXT		
DSVANK	DOSAGE	AOE	N			TEXT		
VANCOK	VANCOMYCIN	RES	N	mg/L	20578-1			
DTVANK	DATE OF LAST DOSE	RES	N		29742-4			
TMVANK	TIME OF LAST DOSE	RES	N		29637-6			
DSVANK	DOSAGE	RES	N		18817-7			

Vancomycin Peak (29450)

Effective Date 12/1/2012

CPT(s): 80202

Expiration Date:

Billing No: 29450

Interface Code: VANP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTVANP	DATE OF LAST DOSE	AOE	N			DATE		
TMVANP	TIME OF LAST DOSE	AOE	N			TEXT		
DSVANP	DOSAGE	AOE	N			TEXT		
VANCOP	VANCOMYCIN	RES	N	mg/L	4090-7			
DTVANP	DATE OF LAST DOSE	RES	N		29742-4			
TMVANP	TIME OF LAST DOSE	RES	N		29637-6			
DSVANP	DOSAGE	RES	N		18817-7			

Vancomycin Trough (29500)

Effective Date 12/1/2012

CPT(s): 80202

Expiration Date:

Billing No: 29500

Interface Code: VANT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
DTVANT	DATE OF LAST DOSE	AOE	N			DATE		
TMVANT	TIME OF LAST DOSE	AOE	N			TEXT		
DSVANT	DOSAGE	AOE	N			TEXT		
VANCOT	VANCOMYCIN	RES	N	mg/L	4092-3			
DTVANT	DATE OF LAST DOSE	RES	N		29742-4			
TMVANT	TIME OF LAST DOSE	RES	N		29637-6			
DSVANT	DOSAGE	RES	N		18817-7			

WBC (42150)

Effective Date 12/1/2012

CPT(s): 85048

Expiration Date:

Billing No: 42150

Interface Code: WBCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WBC	WBC	RES	N	tho/cmm	6690-2

WBC w/Auto Differential (42160)

Effective Date 10/8/2013

CPT(s): 85048

Expiration Date:

Smear review or manual differential will be done if indicated

Billing No: 42160

Interface Code: WBCDF May Reflex additional result codes

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WBC	WBC	RES	N	tho/cmm	6690-2
DTYP	DIFF TYPE	RES	N		49024-3
BLSTP	BLAST, %	PRFLX	N	%	709-6
PROMP	PROMYELOCYTE, %	PRFLX	N	%	783-1
MYEP	MYELOCYTE, %	PRFLX	N	%	749-2
METAP	METAMYELOCYTE, %	PRFLX	N	%	740-1
BANDP	BAND NEUTROPHIL, %	PRFLX	N	%	764-1
SEGP	SEG NEUTROPHIL, %	PRFLX	N	%	769-0
LYMPP	LYMPHOCYTE, %	PRFLX	N	%	737-7
MONOP	MONOCYTE, %	PRFLX	N	%	744-3
EOSP	EOSINOPHIL, %	PRFLX	N	%	714-6
BASOP	BASOPHIL, %	PRFLX	N	%	707-0
BLSTAB	BLAST, ABS	PRFLX	N	tho/cmm	708-8
TOTANC	NEUTROPHIL TOTAL, ABS	PRFLX	N	tho/cmm	753-4
LYMPAB	LYMPHOCYTE, ABS	PRFLX	N	tho/cmm	732-8
MONOAB	MONOCYTE, ABS	PRFLX	N	tho/cmm	743-5
EOSAB	EOSINOPHIL, ABS	PRFLX	N	tho/cmm	712-0
BASOAB	BASOPHIL, ABS	PRFLX	N	tho/cmm	705-4
APIG	IM GRANS %, AUTO	PRFLX	N	%	71695-1
APNEUT	NEUTROPHIL %, AUTO	PRFLX	N	%	770-8
APLYMP	LYMPHOCYTE %, AUTO	PRFLX	N	%	736-9
APMONO	MONOCYTE %, AUTO	PRFLX	N	%	5905-5
APEOS	EOSINOPHIL %, AUTO	PRFLX	N	%	713-8
APBASO	BASOPHIL %, AUTO	PRFLX	N	%	706-2
ABIG	IM GRANS ABS, AUTO	PRFLX	N	tho/cmm	53115-2
ABNEUT	NEUTROPHIL ABS, AUTO	PRFLX	N	tho/cmm	751-8
ABLYMP	LYMPHOCYTE ABS, AUTO	PRFLX	N	tho/cmm	731-0

ABMONO	MONOCYTE ABS, AUTO	PRFLX	N	tho/cmm	742-7
ABEOS	EOSINOPHIL ABS, AUTO	PRFLX	N	tho/cmm	711-2
ABBASO	BASOPHIL ABS, AUTO	PRFLX	N	tho/cmm	704-7
MEG	MEGAKARYOCYTE	PRFLX	N	#/100 WBC	19252-6
RLYMP	REACTIVE LYMPHOCYTES	PRFLX	N	% of total lymphs	13046-8
NRBC	NRBC	PRFLX	N	#/100 WBC	771-6
SMREV	SMEAR REVIEW	PRFLX	N		
RBCM	RBC MORPHOLOGY	PRFLX	N		6742-1
HYPO	HYPOCHROMASIA	PRFLX	N		728-6
POLY	POLYCHROMASIA	PRFLX	N		10378-8
SPHER	SPHEROCYTES	PRFLX	N		802-9
TARG	TARGET CELLS	PRFLX	N		10381-2
STOM	STOMATOCYTES	PRFLX	N		10380-4
OVAL	OVALOCYTES	PRFLX	N		774-0
TEAR	TEAR DROPS	PRFLX	N		7791-7
FRAG	FRAGMENTED RBC's	PRFLX	N		51630-2
BURR	BURR CELLS	PRFLX	N		7790-9
ACAN	ACANTHOCYTES	PRFLX	N		7789-1
SICKL	SICKLE CELLS	PRFLX	N		801-1
HGBC	HEMOGLOBIN C CRYSTALS	PRFLX	N		48707-4
BSTIP	BASOPHILIC STIPPLING	PRFLX	N		703-9
HJ	HOWELL-JOLLY BODIES	PRFLX	N		7793-3
PAPP	PAPPENHEIMER BODIES	PRFLX	N		7795-8
MALAR	MALARIAL PARASITES	PRFLX	N		32700-7
ROUL	ROULEAUX	PRFLX	N		7797-4
AGGL	COLD AGGLUTINATION	PRFLX	N		32672-8
WBCM	WBC MORPHOLOGY	PRFLX	N		
TG	TOXIC GRANULATION	PRFLX	N		803-7
TV	TOXIC VACULATION	PRFLX	N		50672-5
DB	DOHLE BODIES	PRFLX	N		7792-5
HYPSG	HYPERSEGMENTATION	PRFLX	N		765-8
HYPOG	HYPOGRANULATION	PRFLX	N		40654-6
PLCLYM	PLASMACYTOID LYMPHOCYTES	PRFLX	N		
PLTE	PLATELET ESTIMATE	PRFLX	N		9317-9
PLTM	PLATELET MORPHOLOGY	PRFLX	N		48705-8
BZPLT	BIZARRE PLATELET	PRFLX	N		60455-3

AGPLT	AGRANULAR PLATELETS	PRFLX	N	33216-3
MCPLT	MACRO PLATELET	PRFLX	N	5908-9
MACCYT	MACROCYTOSIS	PRFLX	N	738-5
CLPLT	CLUMPED PLATELETS	PRFLX	N	7796-6
MICCYT	MICROCYTOSIS	PRFLX	N	741-9

WBC w/ Ordered Manual Differential (42110)

Effective Date 4/1/2014

CPT(s): 85048, 85007

Expiration Date:

Billing No: 42110

Interface Code: WBCODF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WBC	WBC	RES	N	tho/cmm	6690-2
DTYP	DIFF TYPE	RES	N		49024-3
BLSTP	BLAST, %	PRFLX	N	%	709-6
PROMP	PROMYELOCYTE, %	PRFLX	N	%	783-1
MYEP	MYELOCYTE, %	PRFLX	N	%	749-2
METAP	METAMYELOCYTE, %	PRFLX	N	%	740-1
BANDP	BAND NEUTROPHIL, %	PRFLX	N	%	764-1
SEGP	SEG NEUTROPHIL, %	PRFLX	N	%	769-0
LYMPP	LYMPHOCYTE, %	PRFLX	N	%	737-7
MONOP	MONOCYTE, %	PRFLX	N	%	744-3
EOSP	EOSINOPHIL, %	PRFLX	N	%	714-6
BASOP	BASOPHIL, %	PRFLX	N	%	707-0
BLSTAB	BLAST, ABS	PRFLX	N	tho/cmm	708-8
TOTANC	NEUTROPHIL TOTAL, ABS	PRFLX	N	tho/cmm	753-4
LYMPAB	LYMPHOCYTE, ABS	PRFLX	N	tho/cmm	732-8
MONOAB	MONOCYTE, ABS	PRFLX	N	tho/cmm	743-5
EOSAB	EOSINOPHIL, ABS	PRFLX	N	tho/cmm	712-0
BASOAB	BASOPHIL, ABS	PRFLX	N	tho/cmm	705-4
MEG	MEGAKARYOCYTE	PRFLX	N	#/100 WBC	19252-6
RLYMP	REACTIVE LYMPHOCYTES	PRFLX	N	% of total lymphs	13046-8
NRBC	NRBC	PRFLX	N	#/100 WBC	771-6
SMREV	SMEAR REVIEW	PRFLX	N		
RBCM	RBC MORPHOLOGY	PRFLX	N		6742-1
HYPO	HYPOCHROMASIA	PRFLX	N		728-6
POLY	POLYCHROMASIA	PRFLX	N		10378-8
SPHER	SPHEROCYTES	PRFLX	N		802-9
TARG	TARGET CELLS	PRFLX	N		10381-2

STOM	STOMATOCYTES	PRFLX	N	10380-4
OVAL	OVALOCYTES	PRFLX	N	774-0
TEAR	TEAR DROPS	PRFLX	N	7791-7
FRAG	FRAGMENTED RBC's	PRFLX	N	51630-2
BURR	BURR CELLS	PRFLX	N	7790-9
ACAN	ACANTHOCYTES	PRFLX	N	7789-1
SICKL	SICKLE CELLS	PRFLX	N	801-1
HGBC	HEMOGLOBIN C CRYSTALS	PRFLX	N	48707-4
BSTIP	BASOPHILIC STIPPLING	PRFLX	N	703-9
HJ	HOWELL-JOLLY BODIES	PRFLX	N	7793-3
PAPP	PAPPENHEIMER BODIES	PRFLX	N	7795-8
MALAR	MALARIAL PARASITES	PRFLX	N	32700-7
ROUL	ROULEAUX	PRFLX	N	7797-4
AGGL	COLD AGGLUTINATION	PRFLX	N	32672-8
WBCM	WBC MORPHOLOGY	PRFLX	N	
TG	TOXIC GRANULATION	PRFLX	N	803-7
TV	TOXIC VACULATION	PRFLX	N	50672-5
DB	DOHLE BODIES	PRFLX	N	7792-5
HYPSG	HYPERSEGMENTATION	PRFLX	N	765-8
HYPOG	HYPOGRANULATION	PRFLX	N	40654-6
PLCLYM	PLASMACYTOID LYMPHOCYTES	PRFLX	N	33834-3
PLTE	PLATELET ESTIMATE	PRFLX	N	9317-9
PLTM	PLATELET MORPHOLOGY	PRFLX	N	48705-8
BZPLT	BIZARRE PLATELET	PRFLX	N	60455-3
MCPLT	MACRO PLATELET	PRFLX	N	5908-9
CLPLT	CLUMPED PLATELETS	PRFLX	N	7796-6
AGPLT	AGRANULAR PLATELETS	PRFLX	N	33216-3
MACCYT	MACROCYTOSIS	PRFLX	N	738-5
MICCYT	MICROCYTOSIS	PRFLX	N	741-9

Culture, Wound (Aerobic/Anaerobic incl. Gram Stain) (55850)

Effective Date 12/1/2012

CPT(s): 87070, 87075, 87205

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55850

Interface Code: WDC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	ABD`ABSC`ADR`AMNF`ANAL`ANKL`AORT`APDX`ARM`ASP`ATR`AXI`AXIL`BACK`BARTC`BIOP`BLAD`BLU`BM`BOIL`BONE`BRN`BRST`BUTT`CAPDS`CHEEK`CHEST`COCCYX`COLO`COLS`CORS`DRNG`ELBOW`END`EYE`FACE`FING`FINGN`FOOT`GB`GRAF`GROIN`GROS`HAND`HEAD`HEP`HERNIA`HIP`ILE`ILEO`INCIS`IUD`JEJU`JP`JUG`KID`KNEE`LABIA`LEG`LIPP`LUMB`LUNG`LYMN`MAND`MEAT`MOUTH`MV`NECK`NEPH`OVARY`PELV`PERIN`PILC`PLAC`PROS`PUMP`RCF`RENA`SAC`SCROT`SEM`SHOL`SIN`SKBP`SPLN`STUMP`SUBM`SUMP`TI`TOE`TOEN`TON`TONGUE`TOOT`UMBL`URET`UT`WND`WNDR`WRIST	ABDOMEN`ABSCESS`ADRENAL`AMNIOTIC FLUID`ANAL`ANKLE`AORTA`APPENDIX`ARM`ASPIRATE`ATRIUM`AXILLA`AXILLARY`BACK`BARTOLIN CYST`BIOPSY`BLADDER`BLOOD UNITS`BONE MARROW`BOIL`BONE`BRAIN`BREAST`BUTTOCKS`CAPD SITE`CHEEK`CHEST`COCCYX`COLOSTOMY DRAINAGE`COLOSTOMY SITE`CORNEAL SCRAPINGS`DRAINAGE`ELBOW`ENDOMETRIUM`EYE`FACE`FINGER`FINGERNAIL`FOOT`GALLBLADDER`GRAFT SITE`GROIN`GROSHONG SITE`HAND`HEAD`HEPATIC`HERNIA`HIP`ILEOSTOMY`ILEOSTOMY DRAINAGE`INCISION`INTRAUTERINE DEVICE`JEJUNAL`JACKSON PRATT`JUGULAR`KIDNEY`KNEE`LABIA`LEG`LIP`LUMBAR`LUNG`LYMPH NODE`MANDIBLE`MEATUS`MOUTH`MITRAL VALVE`NECK`NEPHROSTOMY`OVARY`PELVIC/PELVIS`PERINEUM`PILONIDAL CYST`PLACENTA`PROSTATE`PUMP SPECIMEN`RENAL CYST FLUID`RENAL `UTERINE CUL/DE/SAC FLUID`SCROTUM`SEMEN`SHOULDER`SINUS`SKIN BIOPSY`SPLEEN`STUMP`SUBMENTAL AREA`SUMP DRAINAGE`TISSUE`TOE`TOENAIL`TONSIL`TONGUE`TOOTH`UMBILICUS`URETH`UTERINE CUL/DE/SAC FLUID`WOUND`WOUND DRAINAGE`WRIST
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
GS	GRAM STAIN	RES	N		664-3			
CULT	CULTURE	RES	N		21020-3			
RPT	REPORT STATUS	RES	N					

CYP2C19 Genotype, B (Mayo 2C19B) (92679)

Effective Date 9/9/2014

CPT(s): 81225

Expiration Date:

Billing No: 92679

Interface Code: X2C19B

Result/AOE Code	Description	Type	Suppress	Units	LOINC
2C19B1	CYP2C19 PHENOTYPE	RES	N		IP
2C19B2	CYP2C19 STAR ALLELES	RES	N		IP
2C19B3	CYP2C19 INTERPRETATION	RES	N		IP
2C19B4	CYP2C19 REVIEWED BY	RES	N		IP

CYP2D6 Genotype Cascade (Mayo 2D6CB) (90477)

Effective Date 1/2/2014

CPT(s): 81226

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90477

Interface Code: X2D6CB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
2D6CB1	CYP2D6 PHENOTYPE	RES	N		
2D6CB2	CYP2D6 STAR ALLELES	RES	N		
2D6CB3	CYP2D6 INTERPRETATION	RES	N		
2D6CB4	CYP2D6 REVIEWED BY	RES	N		

Alpha-1-Antitrypsin Proteotype S/Z by LC-MS/MS (Mayo A1ALC) (91139)

Effective Date 8/2/2015

CPT(s): 82103, 82542

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 91139

Interface Code: XA1ALC May reflex XA1APR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
A1ALC1	A1AT PROTEOTYPE S/Z, LC-MS/MS	RES	N		IP
8166B	ALPHA 1 ANTITRYPSIN	RES	N	mg/dL	6771-0

Amino Acid, Quant, Plasma (Mayo AAQP) (90200)

CPT(s): 82139

Effective Date 12/1/2012
Expiration Date:

Billing No: 90200

Interface Code: XAAQP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AAQP1	PHOSPHOSERINE	RES	N	nmol/mL	20654-0
AAQP2	PHOSPHOETHANOLAMINE	RES	N	nmol/mL	26612-2
9265B	TAURINE	RES	N	nmol/mL	20657-3
9265E	ASPARAGINE	RES	N	nmol/mL	20638-3
9265D	SERINE	RES	N	nmol/mL	20656-5
AAQP3	HYDROXYPROLINE	RES	N	nmol/mL	20647-4
9265I	GLYCINE	RES	N	nmol/mL	20644-1
9265G	GLUTAMINE	RES	N	nmol/mL	20643-3
AAQP4	ASPARTIC ACID	RES	N	nmol/mL	20639-1
AAQP5	ETHANOLAMINE	RES	N	nmol/mL	26608-0
9265W	HISTIDINE	RES	N	nmol/mL	20645-8
9265C	THREONINE	RES	N	nmol/mL	20658-1
9265K	CITRULLINE	RES	N	nmol/mL	20640-9
AAQP6	SARCOSINE	RES	N	nmol/mL	26613-0
9265T	BETA-ALANINE	RES	N	nmol/mL	26604-9
9265J	ALANINE	RES	N	nmol/mL	20636-7
9265F	GLUTAMIC ACID	RES	N	nmol/mL	20642-5
AAQP7	1-METHYLHISTIDINE	RES	N	nmol/mL	20633-4
AAQP8	3-METHYLHISTIDINE	RES	N	nmol/mL	20635-9
9265Z	ARGININOSUCCINIC ACID	RES	N	nmol/mL	IP

AAQP9	CARNOSINE	RES	N	nmol/mL	26606-4
AAQP10	ANSERINE	RES	N	nmol/mL	26599-1
AAQP11	HOMOCITRULLINE	RES	N	nmol/mL	55876-7
9265X	ARGININE	RES	N	nmol/mL	20637-5
AAQP12	ALPHA-AMINOADIPIC ACID	RES	N	nmol/mL	26600-7
AAQP13	GAMMA-AMINO-N-BUTYRIC ACID	RES	N	nmol/mL	26609-8
AAQP14	BETA-AMINOISOBUTYRIC ACID	RES	N	nmol/mL	26605-6
9265L	A-AMINO-N-BUTYRIC ACID	RES	N	nmol/mL	20634-2
AAQP15	HYDROXYLYSINE	RES	N	nmol/mL	26610-6
9265H	PROLINE	RES	N	nmol/mL	20655-7
9265U	ORNITHINE	RES	N	nmol/mL	20652-4
AAQP16	CYSTATHIONINE	RES	N	nmol/mL	26607-2
9265N	CYSTINE	RES	N	nmol/mL	22672-0
9265V	LYSINE	RES	N	nmol/mL	20650-8
9265O	METHIONINE	RES	N	nmol/mL	20651-6
9265M	VALINE	RES	N	nmol/mL	20661-5
9265R	TYROSINE	RES	N	nmol/mL	20660-7
9265P	ISOLEUCINE	RES	N	nmol/mL	20648-2
9265Q	LEUCINE	RES	N	nmol/mL	20649-0
9265S	PHENYLALANINE	RES	N	nmol/mL	14875-9
AAQP17	TRYPTOPHAN	RES	N	nmol/mL	20659-9
9265AA	ALLO-ISOLEUCINE	RES	N	nmol/mL	22670-4
9265Y	INTERPRETATION (AAQP)	RES	N		49247-0

Beta 2 GP1 Ab, IgA (Mayo AB2GP) (99196)

Effective Date 8/12/2014

CPT(s): 86146

Expiration Date:

Billing No: 99196

Interface Code: XAB2GP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86180A	BETA 2 GP1 AB, IgA	RES	N	U/mL	44447-1

ADAMTS13 Activity and Inhibitor Profile (Mayo ADM13) (93175)

Effective Date 1/5/2016

CPT(s): 85397

Expiration Date:

Billing No: 93175

Interface Code: XADM13 May Reflex XADMIS or XADMBU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADM131	ADAMTS13 Activity Assay	RES	N		IP
ADM132	ADAMTS13 Interpretation	RES	N		69049-5

dsDNA Ab with Reflex IgG (Mayo ADNAR) (93669)

Effective Date 5/29/2015

CPT(s): 86225

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93669

Interface Code: XADNAR Orderable and Reflex for M83631, May Reflex XCRITH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADNAR1	DSDNA AB WITH REFLEX IGG	RES	N	IU/mL	IP

Alpha Fetoprotein, Amniotic (Mayo AFPA) (90180)

Effective Date 2/15/2013

CPT(s): 82106

Expiration Date:

Billing No: 90180

Interface Code: XAFPA May Reflex M9287

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MDRPN1	PHYSICIAN PHONE NUMBER	AOE	Y			TEXT		
MDAT15	EDD BY U/S SCAN	AOE	Y			TEXT		
9950AA	COLLECTION DATE	RES	N		33882-2			
9950AC	EDD by U/S SCAN	RES	N		11781-2			
9950AD	LAST MENSTRUAL PERIOD (LMP)	RES	N		8665-2			
9950AE	EDD by LMP	RES	N		11779-6			
9950AF	GA AT COLLECTION by SCAN	RES	N	wk,d	11888-5			
9950AG	GA AT COLLECTION by DATE	RES	N	wk,d	11885-1			
9950AH	GA USED	RES	N		21299-3			
9950A	ALPHA-FETOPROTEIN, AF	RES	N		43798-8			
9950AI	RESULTS (AFP/AF)	RES	N		43798-8			
9950AJ	INTERPRETATION (AFP/AF)	RES	N		59462-2			
9950AK	ADD'L COMMENTS (AFP/AF)	RES	N		55107-7			
9950AL	FOLLOW UP (AFP/AF)	RES	N					
9950AM	GENERAL TEST INFO (AFP/AF)	RES	N					

Aminolevulinic Acid, Urine (Mayo ALAUR) (97580)

Effective Date 12/1/2012

CPT(s): 82135

Expiration Date:

Billing No: 97580

Interface Code: XALAUR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALAUR1	AMINOLEVULINIC ACID (ALA)	RES	N		34284-0
ALAUR2	INTERPRETATION (ALA)	RES	N		59462-2
ALAUR3	REVIEWED BY:	RES	N		

Autoimmune Liver Disease Panel (Mayo ALDP) (90275)

Effective Date 6/21/2013

CPT(s): 83516, 86038, 86255

Expiration Date:

Billing No: 90275

Interface Code: XALDP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8176A	MITOCHONDRIAL AB, M2	RES	N	U	49781-8
6284A	ANTI-SMOOTH MUSCLE AB	RES	N		26971-2
9026A	ANTINUCLEAR AB (ANA)	RES	N	U	5047-6

Almond, IgE (Mayo ALM) (99156)

Effective Date 10/22/2013

CPT(s): 86003

Expiration Date:

Billing No: 99156

Interface Code: XALM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ALM1	ALMOND, IgE	RES	N	kU/L	6019-4

Alternaria Tenuis, IgE (Mayo ALTN) (99417)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99417

Interface Code: XALTN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2

Antimullerian Hormone (Mayo AMH) (91720)

Effective Date 4/15/2014

CPT(s): 83520

Expiration Date:

Billing No: 91720

Interface Code: XAMH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMH1	ANTIMULLERIAN HORMONE	RES	N	mcg/mL	38476-8

Amphetamine, Confirm, Meconium (Mayo AMPHM) (93052)

Effective Date 1/1/2015

CPT(s): 80324, 80359

Expiration Date:

Billing No: 93052

Interface Code: XAMPHM Orderable and Reflex for XDASM4, XDASM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMPHM1	AMPHETAMINE	RES	N	ng/g	43934-9
AMPHM2	METHAMPHETAMINE	RES	N	ng/g	27289-8
AMPHM3	3,4-METHYLENEDIOXYAMPH.	RES	N	ng/g	27244-3
AMPHM4	3,4-METHYLENE-DIOXYETHYLAMPH.	RES	N	ng/g	27080-1
AMPHM5	3,4-METHYLENE-DIOXY-METHAMPH.	RES	N	ng/g	69025-5
AMPHM6	INTERPRETATION	RES	N		69050-3
AMPHM7	CHAIN OF CUSTODY	RES	N		

Antinuclear AB, HEp-2 Substrate (Mayo ANAH2) (93730)

Effective Date 6/25/2013

CPT(s): 86038

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93730

Interface Code: XANAH2 May Reflex XANAB

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
ANAH21	ANA, HEP-2 SUBSTRATE	RES	N		8061-4

Alpha-Subunit Pituitary Tumor Marker (Mayo APGH) (99568)

Effective Date 6/4/2015

CPT(s): 82397

Expiration Date:

Billing No: 99568

Interface Code: XAPGH

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
APGH1	ALPHA SUBUNIT PITUITARY TUM MKR	RES	N	ng/mL	14170-5

Apolipoprotein A1 and B (Mayo APLAB) (98990)

Effective Date 5/29/2015

CPT(s): 82172 x 2

Expiration Date:

Billing No: 98990

Interface Code: XAPLAB

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
APLA11	APOLIPOPROTEIN A1	RES	N	mg/dL	1869-7
APLB1	APOLIPOPROTEIN B	RES	N	mg/dL	1884-6

Apolipoprotein B (Mayo APLB) (96090)

Effective Date 5/29/2015

CPT(s): 82172

Expiration Date:

Billing No: 96090

Interface Code: XAPLB

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
APLB1	APOLIPOPROTEIN B	RES	N	mg/dL	1884-6

Apple, IgE (Mayo APPL) (99856)

Effective Date 8/12/2015

CPT(s): 86003

Expiration Date:

Billing No: 99856

Interface Code: XAPPL

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
APPL1	APPLE, IgE	RES	N	kU/L	6021-0

White Ash, IgE (Mayo ASHW) (91840)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 91840

Interface Code: XASHW

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
ASHW1	WHITE ASH, IgE	RES	N	kU/L	6278-6

Aspergillus Fumigatus, IgE (Mayo ASP) (97730)

Effective Date 4/15/2014

CPT(s): 86003

Expiration Date:

Billing No: 97730

Interface Code: XASP

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
3033B	ASPERGILLUS FUMIGATUS, IgE	RES	N		6025-1

Aspergillus Antigen (Mayo ASPAG) (96740)

Effective Date 6/21/2013

CPT(s): 87305

Expiration Date:

Billing No: 96740

Interface Code: XASPAG

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
ASPAG1	ASPERGILLUS AG	RES	N	Index	44357-2

Aspergillus Niger, IgE (Mayo ASPG) (92504)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 92504

Interface Code: XASPG

Result/AOE Code	Result/AOE Description	Type	Suppress	Units	LOINC
ASPG1	ASPERGILLUS NIGER, IgE	RES	N	kU/L	6830-4

Alpha-Globin Gene Analysis (Mayo ATHAL) (99049)

Effective Date 8/2/2015

CPT(s): 81257

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99049

Interface Code: XATHAL May reflex XCULAF, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ATHAL1	ATHAL RESULT SUMMARY	RES	N		IP
ATHAL2	ATHAL RESULT	RES	N		IP
ATHAL3	ATHAL INTERPRETATION	RES	N		IP
ATHAL4	ATHAL ADDITIONAL INFORMATION	RES	N		8251-1
ATHAL5	ATHAL SPECIMEN	RES	N		NA
ATHAL6	ATHAL SOURCE	RES	N		31208-2
ATHAL7	ATHAL METHOD	RES	N		49549-9
ATHAL8	ATHAL RELEASED BY	RES	N		NA

Beta-2 Glycoprotein 1 AB, IgG, IgM (Mayo B2GMG) (90915)

Effective Date 7/9/2014

CPT(s): 86146 x 2

Expiration Date:

Billing No: 90915

Interface Code: XB2GMG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
86182A	BETA 2 GP1 AB, IgG	RES	N	U/mL	44448-9
86181A	BETA 2 GP1 AB, IgM	RES	N	U/mL	44449-7

BCR/ABL1, RNA Qual, Diagnostic (Mayo BADX) (90151)

Effective Date 5/20/2016

CPT(s): 81206, 81207, 81208

Expiration Date:

Billing No: 90151

Interface Code: XBADX

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT1	SPECIMEN TYPE	AOE	N			Text		
BADX1	BADX SPECIMEN TYPE	RES	N		66746-9			
89006H	BADX FINAL DIAGNOSIS	RES	N		34574-4			
BADX3	DIAGNOSTIC BCR/ABL1 RESULT	RES	N		IP			

Banana, IgE (Mayo BANA) (99514)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99514

Interface Code: XBANA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BANA1	BANANA, IgE	RES	N	kU/L	6035-0

Beta-Carotene (Mayo BCARO) (96270)

Effective Date 6/4/2013

CPT(s): 82380

Expiration Date:

Billing No: 96270

Interface Code: XBCARO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BCARO1	BETA-CAROTENE	RES	N	mcg/dL	2053-7

BCR/ABL p210, Quant Monitor (Mayo BCRAB) (92634)

Effective Date 4/29/2015

CPT(s): 81206

Expiration Date:

Billing No: 92634

Interface Code: XBCRAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT2	BCRAB SPECIMEN TYPE	AOE	N			TEXT		
BCRAB1	BCRAB SPECIMEN TYPE	RES	N		66749-9			
89007H	BCRAB FINAL DIAGNOSIS	RES	N		34574-4			

Beef, IgE (Mayo BEEF) (99810)

Effective Date 8/12/2015

CPT(s): 86003

Expiration Date:

Billing No: 99810

Interface Code: XBEEF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BEEF1	BEEF, IgE	RES	N	kU/L	6039-2

Beta-HCG, Quantitative (Mayo BHCG) (92439)

Effective Date 12/1/2012

CPT(s): 84702

Expiration Date:

Billing No: 92439

Interface Code: XBHCG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BHCG1	BETA-HCG, QUANTITATIVE	RES	N	IU/L	21198-7

Beta-Hydroxybutyrate (Mayo BHYD) (96330)

Effective Date 12/5/2014

CPT(s): 82010

Expiration Date:

Billing No: 96330

Interface Code: XBHYD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BHYD1	BETA-HYDROXYBUTYRATE, S	RES	N	mmol/L	6873-4

Blastomyces Antibody (Mayo BLAST) (90869)

Effective Date 5/6/2014

CPT(s): 86612

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90869

Interface Code: XBLAST May reflex XSBL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BLAST1	BLASTOMYCES AB	RES	N		

Walnut-Food, IgE (Mayo BLW) (99157)

Effective Date 10/22/2013

CPT(s): 86003

Expiration Date:

Billing No: 99157

Interface Code: XBLW

Result/AOE Code	Description	Type	Suppress	Units	LOINC
30342B	WALNUT-FOOD, IgE	RES	N	kU/L	6273-7

Bordetella pertussis Antibody IgG (Mayo BORDG) (99907)

Effective Date 5/24/2016

CPT(s): 86615 x 2

Expiration Date:

Billing No: 99907

Interface Code: XBORDG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BORDG1	B. PERTUSSIS IgG	RES	N		29659-0
BORDG2	B. PERTUSSIS VALUE	RES	N	IU/mL	42330-1

Bordetella pertussis-Parapertussis (Mayo BPRP) (90598)

Effective Date 11/25/2014

CPT(s): 87798 x 2

Expiration Date:

Billing No: 90598

Interface Code: XBPRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSOR46	SPECIMEN SOURCE	AOE	Y		
80910A	SPECIMEN SOURCE	RES	N		31208-2
BPRP1	BORDETELLA PERTUSSIS PCR	RES	N		43913-3
BPRP2	BORD. PARAPERTUSSIS PCR	RES	N		42588-4

A O E

Type	List Codes	List Code Descriptions
SELECTLIST	NASP`NPASP	Nasopharyngeal Swab`Nasopharyngeal Aspirate

Brazil Nut, IgE (Mayo BRAZ) (99158)

Effective Date 12/5/2014

CPT(s): 86003

Expiration Date:

Billing No: 99158

Interface Code: XBRAZ

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BRAZ1	BRAZIL NUT, IgE	RES	N	kU/L	6050-9

Baker's Yeast, IgE (Mayo BYST) (99522)

Effective Date 11/17/2015

CPT(s): 86003

Expiration Date:

Billing No: 99522

Interface Code: XBYST

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BYST1	BAKERS YEAST, IGE	RES	N	kU/L	6287-7

Caffeine (Mayo CAFN) (94480)

Effective Date 6/26/2015

CPT(s): 80155

Expiration Date:

Billing No: 94480

Interface Code: XCAFN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CAFN1	CAFFEINE	RES	N	mcg/mL	IP

Cold Agglutinin Titer (Mayo CAGG) (92438)

Effective Date 12/1/2012

CPT(s): 86156, 86157

Expiration Date:

Billing No: 92438

Interface Code: XCAGG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CAGG1	SCREEN, COLD AGGLUTININ	RES	N		32672-8
CAGG2	TITER, COLD AGGLUTININ	RES	N	titer	14658-9

Carbamazepine, Total + Free, Serum (Mayo CARFT) (94510)

Effective Date 6/26/2015

CPT(s): 80156, 80157

Expiration Date:

Billing No: 94510

Interface Code: XCARFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CARFT1	CARBAMAZEPINE, TOTAL	RES	N	mcg/mL	3433-0
CARFT2	CARBAMAZEPINE, FREE	RES	N	mcg/mL	3432-2

Carnitine (Mayo CARNS) (91841)

Effective Date 9/30/2015

CPT(s): 82379

Expiration Date:

Billing No: 91841

Interface Code: XCARNS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CARNS1	CARNITINE TOTAL	RES	N	nmol/mL	14288-5
CARNS2	CARNITINE FREE (FC)	RES	N	nmol/mL	14286-9
CARNS3	ACYLCARNITINE (AC)	RES	N	nmol/mL	14282-8
CARNS4	AC/FC RATIO	RES	N		30193-7
CARNS5	CARNS INTERPRETATION	RES	N		59462-2

Cashew, IgE (Mayo CASH) (99748)

Effective Date 10/22/2013

CPT(s): 86003

Expiration Date:

Billing No: 99748

Interface Code: XCASH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CASH1	CASHEW, IgE	RES	N	kU/L	6718-1

Cat Epithelium, IgE (Mayo CAT) (98440)

Effective Date 2/7/2013

CPT(s): 86003

Expiration Date:

Billing No: 98440

Interface Code: XCAT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8

Coconut, IgE (Mayo CCNT) (99948)

Effective Date 4/29/2015

CPT(s): 86003

Expiration Date:

Billing No: 99948

Interface Code: XCCNT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CCNT1	COCONUT, IgE	RES	N	kU/L	6081-4

CD20 B Cells (Mayo CD20B) (90135)

Effective Date 6/23/2015

CPT(s): 86355, 86356

Expiration Date:

Billing No: 90135

Interface Code: XCD20B

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CD20B1	CD45 ABSOLUTE	RES	N	thou/mcL	27071-0
CD20B2	%CD19 B-CELLS	RES	N	%	8117-4
CD20B3	%CD20 B-CELLS	RES	N	%	8119-0
CD20B4	CD19 ABSOLUTE	RES	N	cells/mcL	8116-6
CD20B5	CD20 ABSOLUTE	RES	N	cells/mcL	9558-8
CD20B6	CD20B COMMENT	RES	N		48767-8

Cadmium Occupational Monitoring, Urine (Mayo CDOM) (91974)

Effective Date 12/1/2012

CPT(s): 82300

Expiration Date:

Billing No: 91974

Interface Code: XCDOM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CDOM1	CADMIUM CONCENTRATION	RES	N	mcg/L	5611-9
CDOM2	CADMIUM/CREATININE RATIO	RES	N	mcg/g	13471-8
CDOM3	CREATININE CONC	RES	N	mg/dL	35674-1

Cadmium Occupational Monitoring, Blood (Mayo CDOMB) (90179)

Effective Date 12/1/2012

CPT(s): 82300

Expiration Date:

Billing No: 90179

Interface Code: XCDOMB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89539A	CADMIUM OCCUP MONITOR, BLOOD	RES	N	mcg/L	5609-3

Celiac Disease Serology Cascade (Mayo CDSP) (92924)

Effective Date 12/1/2012

CPT(s): 82784

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 92924

Interface Code: XCDSP May Reflex M9360, M89029, M83660, M89030, M82587

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CDSP1	IMMUNOGLOBULIN A	RES	N	mg/dL	2458-8
CDSP2	CELIAC DISEASE INTERPRETATION	RES	N		

Mountain Cedar, IgE (Mayo CED) (99979)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99979

Interface Code: XCED

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CED1	MOUNTAIN CEDAR, IgE	RES	N	kU/L	6178-8

Celiac Associated HLA-DQ Typing (Mayo CELI) (90268)

Effective Date 10/14/2014

CPT(s): 81376 x 2

Expiration Date:

Billing No: 90268

Interface Code: XCELI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CELI1	DQ ALPHA 1	RES	N		44728-4
CELI2	DQ BETA 1	RES	N		43291-4
CELI3	CELIAC GENE PAIRS PRESENT?	RES	N		IP
CELI4	CELI INTERPRETATION	RES	N		59465-5

Cystic Fibrosis 106 Mutation Panel (Mayo CFP) (92931)

Effective Date 8/2/2015

CPT(s): 81220

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 92931

Interface Code: XCFP May reflex XCULFB, XCULAF, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CFP1	CFP RESULT SUMMARY	RES	N		IP
CFP2	CFP RESULT	RES	N		IP
CFP3	CFP INTERPRETATION	RES	N		IP
CFP4	CFP ADDITIONAL INFORMATION	RES	N		8251-1
CFP5	CFP SPECIMEN	RES	N		NA
CFP6	CFP SOURCE	RES	N		31208-2
CFP7	CFP METHOD	RES	N		49549-9
CFP8	CFP RELEASED BY	RES	N		NA

Chicken, IgE (Mayo CHIC) (99885)

Effective Date 1/12/2016

CPT(s): 86003

Expiration Date:

Billing No: 99885

Interface Code: XCHIC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CHIC1	CHICKEN, IgE	RES	N	kU/L	40879-9

CK Isoenzyme w/ Reflex (Mayo CKELR) (90226)

Effective Date 4/16/2013

CPT(s): 82550

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90226

Interface Code: XCKELR May Reflex XCKE (performed if Total CK >99 U/L)

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80906A	CREATINE KINASE (CK), S	RES	N	U/L	2157-6
CKELR1	CK ISOENZYME ELECTRO SPECIMEN ONLY	RES	N	%	

Cladosporium, IgE (Mayo CLAD) (99413)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99413

Interface Code: XCLAD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720G	CLADOSPORIUM, IgE	RES	N	kU/L	53760-5

CMV DNA Detection and Quant (Mayo CMVQU) (90369)

Effective Date 6/11/2013

CPT(s): 87497

Expiration Date:

Billing No: 90369

Interface Code: XCMVQU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CMVQU1	CMV DNA DETECTION - QUANT	RES	N	IU/mL	72494-8

Cocaine, Confirm, Meconium (Mayo COKEM) (93053)

Effective Date 1/1/2015

CPT(s): 80353

Expiration Date:

Billing No: 93053

Interface Code: XCOKEM Orderable and Reflex for XDASM4, XDASM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COKEM1	COCAINE	RES	N	ng/g	26956-3
COKEM2	BENZOYLECGONINE	RES	N	ng/g	27026-4
COKEM3	COCAETHYLENE	RES	N	ng/g	26815-1
COKEM4	M-HYDROXYBENZOYLECGONINE	RES	N	ng/g	69012-3
COKEM5	INTERPRETATION	RES	N		69050-3
COKEM6	CHAIN OF CUSTODY	RES	N		

Corn-Food, IgE (Mayo CORN) (97970)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 97970

Interface Code: XCORN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
30342A	CORN-FOOD, IgE	RES	N	kU/L	6087-1

Cobalt (Mayo COS) (92611)

Effective Date 4/29/2015

CPT(s): 83018

Expiration Date:

Billing No: 92611

Interface Code: XCOS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COS1	COBALT	RES	N	ng/mL	5627-5

Coccidioides Ab w/Reflex (Mayo COXIS) (90867)

Effective Date 5/6/2014

CPT(s): 86635

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90867

Interface Code: XCOXIS May Reflex XRSCOC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COXIS1	COCCIDIOIDES AB SCREEN	RES	N		

Chromium, Serum (Mayo CRS) (98140)

Effective Date 12/5/2014

CPT(s): 82495

Expiration Date:

Billing No: 98140

Interface Code: XCRS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CRS1	CHROMIUM, SERUM	RES	N	ng/mL	5622-6

Cryoglobulin (Mayo CRY_S) (92442)

Effective Date 4/29/2015

CPT(s): 82595

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 92442

Interface Code: XCRYS May Reflex M28265

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9052B	CRYOGLOBULIN, S	RES	N	%ppt	15174-6

Circulating Tumor Cells (CTC) for Breast Cancer (Mayo CTCBC) (99973

Effective Date 8/2/2015

CPT(s): 86152, 86153

Expiration Date:

Billing No: 99973

Interface Code: XCTCBC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTCBC1	CTCBC RESULT SUMMARY	RES	N		IP
CTCBC2	CTCBC RESULT	RES	N		IP
CTCBC3	CTCBC INTERPRETATION	RES	N		IP
CTCBC4	CTCBC REASON FOR REFERRAL	RES	N		42349-1
CTCBC5	CTCBC SPECIMEN	RES	N		NA
CTCBC6	CTCBC RELEASED BY	RES	N		NA

Circulating Tumor Cells (CTC) for Prostate Cancer (Mayo CTCPC) (93367)

Effective Date 8/2/2015

CPT(s): 86152, 86153

Expiration Date:

Billing No: 93367

Interface Code: XCTCPC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTCPC1	CTCPC RESULT SUMMARY	RES	N		IP
CTCPC2	CTCPC RESULT	RES	N		IP
CTCPC3	CTCPC INTERPRETATION	RES	N		IP
CTCPC4	CTCPC REASON FOR REFERRAL	RES	N		42349-1
CTCPC5	CTCPC SPECIMEN	RES	N		NA
CTCPC6	CTCPC RELEASED BY	RES	N		NA

Cottonwood, IgE (Mayo CTWD) (99416)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99416

Interface Code: XCTWD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720L	COTTONWOOD, IgE	RES	N	kU/L	6090-5

Beta-Crosslaps (B-CTx) (Mayo CTX) (90666)

Effective Date 12/1/2012

CPT(s): 82523

Expiration Date:

Billing No: 90666

Interface Code: XCTX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTX1	BETA-CROSSLAPS (B-CTx)	RES	N	pg/mL	41171-0

Copper, 24 Hr, Urine (Mayo CUU) (97440)

Effective Date 4/15/2014

CPT(s): 82525

Expiration Date:

Billing No: 97440

Interface Code: XCUU

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MDUR27	COLLECTION DURATION	AOE	Y			TEXT		
MVOL24	URINE VOLUME	AOE	Y			TEXT		
CUU1	COPPER, 24 HOUR, URINE	RES	N	mcg/spec	5633-3			
CUU2	COLLECTION DURATION	RES	N		13362-9			
CUU3	URINE VOLUME	RES	N		28009-9			
CUU4	Cu CONCENTRATION	RES	N	mcg/L	21219-1			

Cyclosporine, Blood (Mayo CYSPR) (90920)

Effective Date 7/2/2013

CPT(s): 80158

Expiration Date:

Billing No: 90920

Interface Code: XCYSPR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CYSPR1	CYCLOSPORINE	RES	N	ng/mL	3520-4

Drugs of Abuse, Meconium 4 (Mayo DASM4) (90241)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 90241

Interface Code: XDASM4 May Reflex XAMPHM, XCOKEM, XOPATM, XTHCM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DASM41	AMPHETAMINE	RES	N		26895-3
DASM42	METHAMPHETAMINE	RES	N		27289-8
DASM43	COCAINE	RES	N		26956-3
DASM44	OPIATE	RES	N		26744-3
DASM45	TETRAHYDROCANNABINOL	RES	N		
DASM46	CHAIN OF CUSTODY	RES	N		

Drugs of Abuse, Meconium 5 (Mayo DASM5) (91490)

Effective Date 1/1/2015

CPT(s): 80301

Expiration Date:

Billing No: 91490

Interface Code: XDASM5 May Reflex XAMPHM, XCOKEM, XOPATM, XTHCM, XPCPMC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DASM51	AMPHETAMINE	RES	N		26895-3
DASM52	METHAMPHETAMINE	RES	N		27289-8
DASM53	COCAINE	RES	N		26956-3
DASM54	OPIATE	RES	N		26744-3
DASM55	PHENCYCLIDINE	RES	N		26829-2
DASM56	TETRAHYDROCANNABINOL	RES	N		
DASM57	CHAIN OF CUSTODY	RES	N		

Dengue Virus Ab IgG and IgM (Mayo DENGM) (98540)

Effective Date 1/22/2015

CPT(s): 86790 x 2

Expiration Date:

Billing No: 98540

Interface Code: XDENGM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DENGM1	DENGUE VIRUS AB IgG	RES	N		IP
DENGM2	DENGUE VIRUS AB IgM	RES	N		IP
DENGM3	DENGUE VIRUS INTERPRETATION	RES	N		IP

House Dust Mites/D.F., IgE (Mayo DF) (99206)

Effective Date 2/7/2013

CPT(s): 86003

Expiration Date:

Billing No: 99206

Interface Code: XDF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4

DHR Flow Cytometric PMA Test (Mayo DHRP) (91084)

Effective Date 11/14/2014

CPT(s): 82657, 88184

Expiration Date:

Billing No: 91084

Interface Code: XDHRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DHRP1	ABSOLUTE NEUTROPHIL COUNT	RES	N	cells/mcL	IP
DHRP2	% PMA ox-DHR+	RES	N	%	IP
DHRP3	MFI PMA ox-DHR+	RES	N	MFI	IP
DHRP4	CONTROL ABSOLUTE NEUTROPHIL CT	RES	N	cells/mcL	IP
DHRP5	CONTROL % PMA ox-DHR+	RES	N	%	IP
DHRP6	CONTROL MFI PMA ox-DHR+	RES	N	MFI	IP
DHRP7	DHRP INTERPRETATION	RES	N		IP

Diptheria Toxoid IgG AB (Mayo DIPGS) (95260)

Effective Date 6/23/2015

CPT(s): 86317

Expiration Date:

Billing No: 95260

Interface Code: XDIPGS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DIPGS1	DIPTHERIA IgG AB	RES	N		IP
DIPGS2	DIPTHERIA IgG VALUE	RES	N	IU/mL	IP

Methadone Screen w/ Confirmation (Mayo DMETH) (90430)

Effective Date 1/1/2015

CPT(s): 80301

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90430

Interface Code: XDMETH May Reflex XMSMT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DMETH1	METHADONE	RES	N	ng/mL	3774-7

Dog Dander, IgE (Mayo DOGD) (92538)

Effective Date 2/7/2013

CPT(s): 86003

Expiration Date:

Billing No: 92538

Interface Code: XDOGD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720C	DOG DANDER, IgE	RES	N	kU/L	6098-8

House Dust Mites/D.P., IgE (Mayo DP) (99205)

Effective Date 2/7/2013

CPT(s): 86003

Expiration Date:

Billing No: 99205

Interface Code: XDP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
3033A	HOUSE DUST MITES/D.P., IgE	RES	N	kU/L	6096-2

Diptheria / Tetanus AB Panel (Mayo DTABS) (96290)

Effective Date 6/23/2015

CPT(s): 86317 x 2

Expiration Date:

Billing No: 96290

Interface Code: XDTABS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DIPGS1	DIPTHERIA IgG AB	RES	N		IP
DIPGS2	DIPTHERIA IgG VALUE	RES	N	IU/mL	IP
TTIGS1	TETANUS IgG AB	RES	N		IP
TTIGS2	TETANUS IgG VALUE	RES	N	IU/mL	IP

Hepatitis Be Antigen (Mayo EAG) (96230)

Effective Date 10/14/2014

CPT(s): 87350

Expiration Date:

Billing No: 96230

Interface Code: XEAG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8311A	HEPATITIS Be AG	RES	N		13954-3

EBV (Epstein-Barr Virus) IgG AB to Early Antigen (Mayo EBVE) (91100)

Effective Date 1/16/2013

CPT(s): 86663

Expiration Date:

Billing No: 91100

Interface Code: XEBVE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EBVE1	EBV EA IgG AB	RES	N		22295-0

Echovirus Ab Panel (Mayo ECHO) (96910)

Effective Date 6/24/2013

CPT(s): 86658 x 5

Expiration Date:

Billing No: 96910

Interface Code: XECHO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ECHO1	ECHOVIRUS 4 AB	RES	N		
ECHO2	ECHOVIRUS 7 AB	RES	N		
ECHO3	ECHOVIRUS 9 AB	RES	N		
ECHO4	ECHOVIRUS 11 AB	RES	N		
ECHO5	ECHOVIRUS 30 AB	RES	N		

Ehrlichia chaffeensis Ab, IgG (Mayo EHRC) (99635)

Effective Date 9/30/2015

CPT(s): 86666

Expiration Date:

Billing No: 99635

Interface Code: XEHRC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81480B	EHRLICHIA CHAFFEENSIS (HME) AB, IgG	RES	N	titer	47405-6

Elm, IgE (Mayo ELM) (99977)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99977

Interface Code: XELM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720K	ELM, IgE	RES	N	kU/L	6109-3

Ethosuximide (Zarontin) (Mayo ETHSX) (91190)

Effective Date 6/26/2015

CPT(s): 80168

Expiration Date:

Billing No: 91190

Interface Code: XETHSX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ETHSX1	ETHOSUXIMIDE	RES	N	mcg/mL	IP

Everolimus, Blood (Mayo EVROL) (91245)

Effective Date 4/1/2015

CPT(s): 80169

Expiration Date:

Billing No: 91245

Interface Code: XEVROL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EVROL1	EVEROLIMUS,B	RES	N	ng/mL	50544-6

Adalimumab and Anti-Adalimumab Ab (Mayo FAAAB) (93522)

Effective Date 9/30/2015

CPT(s): 82397, 80299

Expiration Date:

Billing No: 93522

Interface Code: XFAAAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAAAB1	ADALIMUMAB DRUG LEVEL	RES	N	ug/mL	74417-3
FAAAB2	ANTI-ADALIMUMAB ANTIBODY	RES	N	ug/mL	74116-5

F-Actin Antibody, IgG (Mayo FACT) (90432)

Effective Date 4/29/2015

CPT(s): 83516

Expiration Date:

Billing No: 90432

Interface Code: XFACT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FACT01	F-ACTIN ANTIBODY IgG	RES	N	U	IP

Adenosine Deaminase, Pleural Fluid (Mayo FADPL) (99240)

Effective Date 7/14/2015

CPT(s): 84311

Expiration Date:

Billing No: 99240

Interface Code: XFADPL

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR65	FADPL SPECIMEN SOURCE	AOE	Y			TEXT		
FADPL1	FADPL SPECIMEN SOURCE	RES	N		IP			
FADPL2	ADENOSINE DEAMINASE PLEURAL	RES	N	U/L	35704-6			

Anti-IgE Receptor AB (Mayo FAIRA) (99801)

Effective Date 1/11/2016

CPT(s): 88184, 88185 x 2

Expiration Date:

Billing No: 99801

Interface Code: XFAIRA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAIRA1	CIU ASSOCIATED BASOPHIL ACTIVATION	RES	N		IP
FAIRA2	ANTI-IGE RECEPTOR AB COMMENT	RES	N		IP

Alprazolam (Xanax) (Mayo FALPX) (99229)

Effective Date 5/9/2016

CPT(s): 80346

Expiration Date:

Billing No: 99229

Interface Code: XFALPX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FALPX1	ALPRAZOLAM (XANAX)	RES	N		IP

Fatty Acid Profile (Mayo FAPCP) (92506)

Effective Date 11/2/2015

CPT(s): 82542

Expiration Date:

Billing No: 92506

Interface Code: XFAPCP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAPC1	OCTANOIC ACID C8:0	RES	N	nmol/mL	35145-2
FAPC2	DECENOIC ACID C10:1	RES	N	nmol/mL	35147-8
FAPC3	DECANOIC ACID C10:0	RES	N	nmol/mL	35146-0
FAPC4	LAUROLEIC ACID C12:1	RES	N	nmol/mL	35151-0
FAPC5	LAURIC ACID C12:0	RES	N	nmol/mL	35150-2
FAPC6	TETRADECADIENOIC ACID C14:2	RES	N	nmol/mL	35148-6
FAPC7	MYRISTOLEIC ACID C14:1	RES	N	nmol/mL	35158-5
FAPC8	MYRISTIC ACID C14:0	RES	N	nmol/mL	35157-7
FAPC9	HEXADECADIENOIC ACID C16:2	RES	N	nmol/mL	35154-4
FAPC10	HEXADECENOIC ACID C16:1w9	RES	N	nmol/mL	35155-1
FAPC11	PALMITOLEIC ACID C16:1w7	RES	N	nmol/mL	35162-7
FAPC12	PALMITIC ACID C16:0	RES	N	nmol/mL	35161-9
FAPC13	g-LINOLENIC ACID C18:3w6	RES	N	nmol/mL	35163-5
FAPC14	a-LINOLENIC ACID C18:3w3	RES	N	nmol/mL	35164-3
FAPC15	LINOLEIC ACID C18:2w6	RES	N	nmol/mL	35165-0
FAPC16	OLEIC ACID C18:1w9	RES	N	nmol/mL	35166-8
FAPC17	VACCENIC ACID C18:1w7	RES	N	nmol/mL	35167-6
FAPC18	STEARIC ACID C18:0	RES	N	nmol/mL	35149-4
FAPC19	EPA C20:5w3	RES	N	nmol/mL	35173-4
FAPC20	ARACHIDONIC ACID C20:4w6	RES	N	nmol/mL	35168-4

FAPC21	MEAD ACID C20:3w9	RES	N	nmol/mL	35172-6
FAPC22	h-g-LINOLENIC ACID C20:3w6	RES	N	nmol/mL	35171-8
FAPC23	ARACHIDIC ACID C20:0	RES	N	nmol/mL	35169-2
FAPC24	DHA C22:6w3	RES	N	nmol/mL	35174-2
FAPC25	DPA C22:5w6	RES	N	nmol/mL	35181-7
FAPC26	DPA C22:5w3	RES	N	nmol/mL	35180-9
FAPC27	DTA C22:4w6	RES	N	nmol/mL	35182-5
FAPC28	DOCOSENOIC ACID C22:1	RES	N	nmol/mL	35160-1
FAPC29	DOCOSANOIC ACID C22:0	RES	N	nmol/mL	IP
FAPC30	NERVONIC ACID C24:1w9	RES	N	nmol/mL	35170-0
FAPC31	TETRACOSANOIC ACID C24:0	RES	N	nmol/mL	30195-2
FAPC32	HEXACOSENOIC ACID C26:1	RES	N	nmol/mL	33036-5
FAPC33	HEXACOSANOIC ACID C26:0	RES	N	nmol/mL	30197-8
FAPC34	PRISTANIC ACID C15:0(CH3)4	RES	N	nmol/mL	22761-1
FAPC35	PHYTANIC ACID C16:0(CH3)4	RES	N	nmol/mL	22671-2
FAPC36	TRIENE TETRAENE RATIO	RES	N		35411-8
FAPC37	TOTAL SATURATED	RES	N	mmol/L	35175-9
FAPC38	TOTAL MONOUNSATURATED	RES	N	mmol/L	35176-7
FAPC39	TOTAL POLYUNSATURATED	RES	N	mmol/L	35177-5
FAPC40	TOTAL w3	RES	N	mmol/L	35178-3
FAPC41	TOTAL w6	RES	N	mmol/L	35179-1
FAPC42	TOTAL FATTY ACIDS	RES	N	mmol/L	24461-6
FAPC43	FATTY ACID INTERPRETATION	RES	N		59462-2

Thiopurine Methyltransferase (Mayo FATPM)

Effective Date 1/5/2016

CPT(s): 82657

Expiration Date:

Billing No: 91124

Interface Code: XFATPM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FATPM1	Thiopurine Methyltransferase	RES	N		53819-9

Thermoactinomyces vulgaris IgG Ab (Mayo FAVGA) (91004)

Effective Date 12/24/2014

CPT(s): 86331

Expiration Date:

Billing No: 91004

Interface Code: XFAVGA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FAVGA1	THERMOACTINOMYCES VULGARIS IgG	RES	N		IP

MVista Blastomyces Quant Antigen (Mayo FBLAS) (99175)

Effective Date 1/14/2015

CPT(s): 87449

Expiration Date:

Billing No: 99175

Interface Code: XFBLAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT6	SPECIMEN TYPE:	AOE	Y			TEXT		
FBLAS1	SPECIMEN TYPE:	RES	N		IP			
FBLAS2	RESULT:	RES	N		IP			
FBLAS3	INTERPRETATION:	RES	N		IP			

Bordetella pertussis AB IgA, IgG w/ reflex to Immunoblot (Mayo FBPAG) (91458)

Effective Date 12/5/2014

CPT(s): 86615 x 2

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 91458

Interface Code: XFBPAG May Reflex XFBAAI, XFBAGI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FBPAG1	B. PERTUSSIS AB, IgG	RES	N	U/mL	42330-1
FBPAG2	B. PERTUSSIS AB, IgA	RES	N	U/mL	42328-5

Chlamydophila pneumoniae DNA (Mayo FCPD) (91701)

Effective Date 6/4/2013

CPT(s): 87486

Expiration Date:

Billing No: 91701

Interface Code: XFCPD

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MSOR60	SOURCE	AOE	Y			TEXT		
FCPD1	SOURCE	RES	N					
FCPD2	CHLAMYDOPHILA PNEUMONIAE	RES	N					

CU Index (Mayo FCUIX) (92838)

Effective Date 4/23/2013

CPT(s): 86352

Expiration Date:

Billing No: 92838

Interface Code: XFCUIX

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FCUIX1	CU INDEX	RES	N		

Filaria IgG4 Ab Elisa (Mayo FFAG4) (99526)

Effective Date 6/25/2014

CPT(s): 86682

Expiration Date:

Billing No: 99526

Interface Code: XFFAG4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FFAG41	FILARIA IgG4 ANTIBODY	RES	N		14208-3

Trofile DNA Phenotypic Corecept Tro (Mayo FFTRO) (90703)

Effective Date 6/24/2013

CPT(s): 87999

Expiration Date:

Billing No: 90703

Interface Code: XFFTRO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FFTRO1	TROPOTYPE RESULT	RES	N		53923-9
FFTRO2	INTERPRETATION (FFTRO)	RES	N		

Trofile Co-Receptor Tropism Assay (Mayo FFTRP) (99949)

Effective Date 7/26/2013

CPT(s): 87999

Expiration Date:

Billing No: 99949

Interface Code: XFFTRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
LOAD2	MOST RECENT VIRAL LOAD	AOE	Y			TEXT		
LOADT2	VIRAL LOAD COLLECTED DATE	AOE	Y			TEXT		
FFTRP3	TROPOTYPE RESULT	RES	N		57182-8			
FFTRP4	NOTE:	RES	N					
FFTRP5	ACT.-CCR5 ANTAG ANTICIPATED?	RES	N					

Tiagabine (Gabitril) (Mayo FGTIA) (95760)

Effective Date 4/1/2016

CPT(s): 80199

Expiration Date:

Billing No: 95760

Interface Code: XFGTIA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FGTIA1	TIAGABINE	RES	N		21565-7

Hepatitis B Virus Genotype (Mayo FHBG) (90298)

Effective Date 6/24/2013

CPT(s): 87912

Expiration Date:

Billing No: 90298

Interface Code: XFHBG

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
HBVL	HBV VIRAL LOAD	AOE	Y			TEXT		
HBVLD	HBV VIRAL LOAD DATE	AOE	Y			DATE		
FHBG1	HBV VIRAL LOAD	RES	N					
FHBG2	HBV VIRAL LOAD DATE	RES	N					
FHBG3	HEPATITIS B GENOTYPE	RES	N					
FHBG4	HBV SURFACE AG MUTATIONS	RES	N					
FHBG5	HBV RT POLYMERASE MUTATIONS	RES	N					

Hepatitis D Antibody, Total (Mayo FHEPD) (93242)

Effective Date 6/24/2013

CPT(s): 86692

Expiration Date:

Billing No: 93242

Interface Code: XFHEPD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FHEPD1	HDV AB	RES	N		

HIV-2 DNA/RNA Qual, RT-PCR (Mayo FHV2Q) (99696)

Effective Date 9/9/2014

CPT(s): 87538

Expiration Date:

Billing No: 99696

Interface Code: XFHV2Q

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FHV2Q1	HIV-2 DNA/RNA QUAL RT-PCR	RES	N		IP

Interleukin-6 (IL-6) (Mayo FIL6S) (92616)

Effective Date 4/23/2013

CPT(s): 83520

Expiration Date:

Billing No: 92616

Interface Code: XFIL6S

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FIL6S1	IL-6	RES	N		

Lactoferrin, Fecal By Elisa (Mayo FLACF) (90826)

Effective Date 8/12/2014

CPT(s): 83630

Expiration Date:

Billing No: 90826

Interface Code: XFLACF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FLACF1	LACTOFERRIN FECAL BY ELISA	RES	N		40703-1

Leptospira Antibody IgM (Mayo FLEPM) (98940)

Effective Date 1/11/2016

CPT(s): 86720

Expiration Date:

Billing No: 98940

Interface Code: XFLEPM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FLEPM1	LEPTOSPIRA IgM	RES	N		23202-5

Liver Fibrosis, FibroTest (Mayo FLFFT) (99888)

Effective Date 9/30/2015

CPT(s): 82172, 82247, 82977, 83010, 83883, 84460

Expiration Date:

Billing No: 99888

Interface Code: XFLFFT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FLFFT1	FIBROSIS SCORE	RES	N		48795-9
FLFFT2	FIBROSIS STAGE	RES	N		48794-2
FLFFT3	FIBROSIS INTERPRETATION	RES	N		IP
FLFFT4	NECROINFLAMMAT ACT SCORE	RES	N		48792-6
FLFFT5	NECROINFLAMMAT ACT GRADE	RES	N		48793-4
FLFFT6	NECROINFLAMMAT INTERP	RES	N		IP
FLFFT7	FLFFT ALPHA 2 MACROGLOBULIN	RES	N	mg/dL	1835-8
FLFFT8	FLFFT HAPTOGLOBIN	RES	N	mg/dL	4542-7
FLFFT9	FLFFT APOLIPOPROTEIN A1	RES	N	mg/dL	1869-7
FLFF10	FLFFT TOTAL BILIRUBIN	RES	N	mg/dL	1975-2
FLFF11	FLFFT GGT	RES	N	IU/L	2324-2
FLFF12	FLFFT ALT	RES	N	IU/L	1742-6
FLFF13	FLFFT REFERENCE ID	RES	N		IP
FLFF14	FLFFT FOOTNOTE	RES	N		IP

Magnesium, RBC (Mayo FMAGR) (92958)

Effective Date 3/2/2015

CPT(s): 83735

Expiration Date:

Billing No: 92958

Interface Code: XFMAGR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMAGR1	MAGNESIUM, RBC	RES	N	mg/dL	26746-8

Melatonin (Mayo FMELT) (92681)

Effective Date 4/1/2015

CPT(s): 83519

Expiration Date:

Billing No: 92681

Interface Code: XFMELT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMELT1	MELATONIN	RES	N	pg/mL	11055-1

MAG Antibody w/ Reflex to MAG-SGPG/EIA (Mayo FMGA) (90096)

Effective Date 11/17/2015

CPT(s): 84181

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90096

Interface Code: XFMGA May Reflex XFMGS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMGA1	MAG AB IgM, WESTERN BLOT	RES	N		31023-5

MyoMarker Panel 3 (Mayo FMP3) (93542)

Effective Date 4/29/2015

CPT(s): 83516 x 9, 86235 x 4, 83520 x 3

Expiration Date:

Billing No: 93542

Interface Code: XFMP3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMP31	ANTI-JO-1 AB	RES	N	Units	35333-4
FMP32	PL-7	RES	N		33772-5
FMP33	PL-12	RES	N		33771-7
FMP34	EJ	RES	N		45149-2
FMP35	OJ	RES	N		45152-6
FMP36	SRP	RES	N		33921-8
FMP37	MI-2	RES	N		18485-3
FMP38	TIF1 GAMMA (P155/140)	RES	N	Units	IP
FMP39	MDA-5 (P140)	RES	N	Units	IP
FMP310	NXP-2 (P140)	RES	N	Units	IP
FMP311	ANTI-PM/Scl AB	RES	N	Units	IP
FMP312	FIBRILLARIN (U3 RNP)	RES	N		IP
FMP313	U2 snRNP	RES	N		IP
FMP314	ANTI-U1-RNP AB	RES	N	Units	14030-1
FMP315	KU	RES	N		18484-6
FMP316	ANTI-SS-A 52 kD AB, IgG	RES	N	Units	IP

Mvista Coccidioides Ag (Mayo FMVCO) (90323)

Effective Date 8/12/2014

CPT(s): 87449

Expiration Date:

Billing No: 90323

Interface Code: XFMVCO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMVCO1	MVISTA COCCIDIOIDES AG	RES	N	ng/mL	IP
FMVCO2	COCCIDIOIDES INTERPRETATION	RES	N		IP

MyoMarker Panel 2 (Mayo FMYOP) (90658)

Effective Date 5/5/2015

CPT(s): 83516 x 9, 86235

Expiration Date:

Billing No: 90658

Interface Code: XFMYOP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMYO10	U2 SN RNP	RES	N		IP
FMYOP1	ANTI-JO-1 AB	RES	N		IP
FMYOP2	MI-2	RES	N		IP
FMYOP3	PL-7	RES	N		IP
FMYOP4	PL-12	RES	N		IP
FMYOP5	EJ	RES	N		IP
FMYOP6	OJ	RES	N		IP
FMYOP7	SRP	RES	N		IP
FMYOP8	KU	RES	N		IP
FMYOP9	ANTI-PM/SCL AB	RES	N		IP

Niacin (Vitamin B3) (Mayo FNIAC) (97020)

Effective Date 1/12/2016

CPT(s): 84591

Expiration Date:

Billing No: 97020

Interface Code: XFNIAC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FNIAC1	NIACIN	RES	N	ug/mL	34342-6

Food-Nut Panel 2 (Mayo FOOD1) (98050)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 98050

Interface Code: XFOOD1

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FOOD1	FOOD-NUT PANEL 2	RES	N	kU/L	46707-6

Food-Nut Panel 1 (Mayo FOOD8) (99325)

Effective Date 2/7/2013

CPT(s): 86003

Expiration Date:

Billing No: 99325

Interface Code: XFOOD8

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FOOD8	FOOD-NUT PANEL 1	RES	N	kU/L	46708-4

Pancreatic Elastase, Stool (Mayo FPANC) (99992)

Effective Date 10/22/2013

CPT(s): 82656

Expiration Date:

Billing No: 99992

Interface Code: XFPANC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FPANC1	PATIENT VALUE (FPANC):	RES	N	ug E/g stool	
FPANC2	INTERPRETATION (FPANC):	RES	N		

Phenosense GT (Mayo FPGT) (92925)

Effective Date 7/26/2013

CPT(s): 87900, 87901, 87903, 87904 x 11

Expiration Date:

Billing No: 92925

Interface Code: XFPGT

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
LOAD1	MOST RECENT VIRAL LOAD	AOE	Y			TEXT		
LOADT1	VIRAL LOAD COLLECTED DATE	AOE	Y			TEXT		
FPGT3	PHENOSENSE GT	RES	N					

PSA, Ultrasensitive (Mayo FPSAS) (90634)

Effective Date 6/30/2015

CPT(s): 84153

Expiration Date:

Billing No: 90634

Interface Code: XFPSAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FPSAS1	PSA, ULTRASENSITIVE	RES	N		35741-8

Rabies RFFIT Endpoint, S (Mayo FRFIT) (99291)

Effective Date 10/14/2014

CPT(s): 86382

Expiration Date:

Billing No: 99291

Interface Code: XFRFIT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FRFIT1	RABIES TITER RESPONSE	RES	N	IU/mL	6524-3

Risperidone and 9-Hydroxyrisperidone (Mayo FRISP) (99592)

Effective Date 1/12/2016

CPT(s): 80342

Expiration Date:

Billing No: 99592

Interface Code: XFRISP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FRISP1	RISPERIDONE (RISPERDAL)	RES	N		9393-0
FRISP2	9-HYDROXYRISPERIDONE	RES	N		9383-1
FRISP3	FRISP COMBINED TOTAL	RES	N		9394-8

Free Thyroxine Index (FTI) (Mayo FRTUP) (94790)

Effective Date 12/17/2014

CPT(s): 84479, 84436

Expiration Date:

Billing No: 94790

Interface Code: XFRTUP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FRTUP1	THYROXINE BINDING CAPACITY	RES	N	TBI	IP
80315A	THYROXINE, TOTAL	RES	N	mcg/dL	3026-2
80315C	FREE THYROXINE INDEX	RES	N	mcg/dL	32215-6

Tysabri Natalizumab Immunogenicity (Mayo FSABI) (99830)

Effective Date 11/4/2014

CPT(s): 83516

Expiration Date:

Billing No: 99830

Interface Code: XFSABI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FSABI1	TYSABRI/NATALIZUMAB IMMGEN	RES	N		49598-6

Sulfatide Autoantibody Test (Mayo FSULF) (96850)

Effective Date 11/17/2015

CPT(s): 83520x2

Expiration Date:

Billing No: 96850

Interface Code: XFSULF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FSULF1	SULFATIDE ELISA IgG TITER	RES	N		IP
FSULF2	SULFATIDE IgG SPECIFICITY	RES	N		IP
FSULF3	SULFATIDE ELISA IgM TITER	RES	N		IP
FSULF4	SULFATIDE IgM SPECIFICITY	RES	N		IP
FSULF5	FSULF INTERPRETIVE CRITERIA	RES	N		IP

Fungitell Serum (Mayo FUNGS) (92527)

Effective Date 6/25/2014

CPT(s): 87449

Expiration Date:

Billing No: 92527

Interface Code: XFUNGS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FUNGS1	FUNGITELL SERUM	RES	N		

Fragile X Syndrome (Mayo FXS) (91280)

Effective Date 8/2/2015

CPT(s): 81243

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 91280

Interface Code: XFXS May reflex XFXFU, XCULAF, XCULFB, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FXS1	FXS RESULT SUMMARY	RES	N		IP
FXS2	FXS RESULT	RES	N		IP
FXS3	FXS INTERPRETATION	RES	N		IP
FXS4	FXS REASON FOR REFERRAL	RES	N		42349-1
FXS5	FXS SPECIMEN	RES	N		NA
FXS6	FXS SOURCE	RES	N		31208-2
FXS7	FXS METHOD	RES	N		49549-9
FXS8	FXS RELEASED BY	RES	N		NA

Gluten, IgE (Mayo GLT)) (99521)

Effective Date 11/17/2015

CPT(s): 86003

Expiration Date:

Billing No: 99521

Interface Code: XGLT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GLT1	GLUTEN,IGE	RES	N	kU/L	6125-9

Ganglioside AB Panel, S (Mayo GM1B) (99176)

Effective Date 11/3/2015

CPT(s): 83520x6

Expiration Date:

Billing No: 99176

Interface Code: XGM1B

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GM1B1	IgG MONOS GM1	RES	N		45169-0
GM1B2	IgM MONOS GM1	RES	N		44750-8
GM1B3	IgG ASIALO GM1	RES	N		44738-3
GM1B4	IgM ASIALO GM1	RES	N		30200-0
GM1B5	IgG DISIALO GD1b	RES	N		43601-4
GM1B6	IgM DISIALO GD1b	RES	N		43600-6
GM1B7	GM1B COMMENT	RES	N		48767-8

Giardia Lamblia AB, IFA (Mayo GRAB) (91732)

Effective Date 12/1/2012

CPT(s): 86674

Expiration Date:

Billing No: 91732

Interface Code: XGRAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GRAB1	GIARDIA LAMBLIA AB, IFA	RES	N		

Hemoglobin F, (Mayo HBF) (99767)

Effective Date 4/15/2014

CPT(s): 83021

Expiration Date:

Billing No: 99767

Interface Code: XHBF Orderable and Reflex for M8270

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HBF1	HEMOGLOBIN F	RES	N	%	42246-9
HBF2	COMMENT:	RES	N		48767-8

Hepatitis C Virus Genotype (Mayo HCVG) (91973)

Effective Date 12/1/2012

CPT(s): 87902

Expiration Date:

Billing No: 91973

Interface Code: XHCVG Mayo reflex XHCVGR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81618A	HCV GENOTYPE	RES	N		32286-7

Homocysteine, Total, Serum (Mayo HCYSS) (91091)

Effective Date 12/5/2014

CPT(s): 83090

Expiration Date:

Billing No: 91091

Interface Code: XHCYSS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCYSS1	HOMOCYSTEINE, TOTAL, SERUM	RES	N	mcmol/L	IP

Hepatitis Be Antibody (Mayo HEAB) (96240)

Effective Date 10/14/2014

CPT(s): 86707

Expiration Date:

Billing No: 96240

Interface Code: XHEAB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8311B	HEPATITIS Be AB	RES	N		13953-5

Hemochromatosis HFE Gene Analysis (Mayo HFE) (91760)

Effective Date 8/2/2015

CPT(s): 81256

Expiration Date:

Billing No: 91760

Interface Code: XHFE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HFE1	HFE RESULT SUMMARY	RES	N		IP
HFE2	HFE RESULT	RES	N		IP
HFE3	HFE INTERPRETATION	RES	N		IP
HFE4	HFE SPECIMEN	RES	N		NA
HFE5	HFE SOURCE	RES	N		31208-2
HFE6	HFE METHOD	RES	N		49549-9
HFE7	HFE RELEASED BY	RES	N		NA

Histoplasma/Blasto Antibody Panel (Mayo HIBLS) (90870)

Effective Date 5/6/2014

CPT(s): 86698, 86612

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 90870

Interface Code: XHIBLS May Reflex M26692

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83853A	HISTOPLASMA AB SCREEN	RES	N		44522-1
BLAST1	BLASTOMYCES AB	RES	N		

HIV-2 Ab Confirmation (Mayo HIV2L) (93192)

Effective Date 3/1/2013

CPT(s): 86689

Expiration Date:

Billing No: 93192

Interface Code: XHIV2L Orderable and Reflex for M86702, NHIV12, NOBPNH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIV2L1	HIV-2 AB CONFIRMATION	RES	N		7919-4

HIV-1 RNA Detection and Quantification (Mayo HIVDQ) (99896)

Effective Date 6/26/2015

CPT(s): 87536

Expiration Date:

Billing No: 99896

Interface Code: XHIVDQ

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIVDQ1	HIV-1 RNA DETECT/QUANT	RES	N	copies/mL	20447-9

HIV-1 Genotypic PR-RT Resistance (Mayo HIVPR) (91116)

Effective Date 6/26/2015

CPT(s): 87901

Expiration Date:

Billing No: 91116

Interface Code: XHIVPR Orderable and Reflex for XHIVQG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIVPR1	HIV-1 GENOTYPIC PR-RT DRUG	RES	N		34700-5
HIVPR2	NUCLEOS(T)IDE RT MUTATIONS	RES	N		45175-7
82340H	ABACAVIR	RES	N		30287-7
82340D	DIDANOSINE	RES	N		30284-4
HIVPR3	EMTRICITABINE	RES	N		41402-9
HIVPR4	LAMIVUDINE	RES	N		30283-6
82340G	STAVUDINE	RES	N		30286-9
82340I	TENOFOVIR	RES	N		41396-3
82340C	ZIDOVUDINE	RES	N		30282-8
HIVPR5	NONNUCLEOSIDE RT MUTATIONS	RES	N		45176-5
82340R	EFAVIRENZ	RES	N		30291-9
8234AP	ETRAVIRINE	RES	N		52749-9
82340P	NEVIRAPINE	RES	N		30289-3
8234AS	RILPIVIRINE	RES	N		68463-9
82340S	PROTEASE MUTATIONS	RES	N		33630-5
8234AL	ATAZANAVIR W/ RITONAVIR	RES	N		49618-2
8234AO	DARUNAVIR w/ RITONAVIR	RES	N		49630-7
8234AK	FOSAMPRENAVIR w/ RITONAVIR	RES	N		51409-1
8234AN	INDINAVIR w/ RITONAVIR	RES	N		49619-0
82340Y	LOPINAVIR w/ RITONAVIR	RES	N		42000-0
82340W	NELFINAVIR	RES	N		30294-3
8234AI	SAQUINAVIR w/ RITONAVIR	RES	N		49621-6
8234AM	TIPRANAVIR w/ RITONAVIR	RES	N		49622-4

HIV-1 RNA Qn w/rflx Genotypic Drug (Mayo HIVQG) (98480)

Effective Date 6/26/2015

CPT(s): 87536

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 98480

Interface Code: XHIVQG May Reflex XHIVPR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIVQG1	HIV-1 RNA DETECT/QUANT	RES	N	copies/mL	IP

Heavy Metal Screen w/ Demographics (MAYO HMDB) (93600)

Effective Date 5/23/2016

CPT(s): 82175, 82300, 83655, 83825

Expiration Date:

Billing No: 93600

Interface Code: XHMDB

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MVECP6	VENOUS/CAPILLARY	AOE	Y			SELECTLIST	V`C	VENOUS`CAPILLARY
MPTAD6	PATIENT STREET ADDRESS	AOE	Y			TEXT		
MPTCI6	PATIENT CITY	AOE	Y			TEXT		
MPTST6	PATIENT STATE	AOE	Y			TEXT		
MPTZI6	PATIENT ZIP CODE	AOE	Y			TEXT		
MPTCN6	PATIENT COUNTY	AOE	Y			TEXT		
MPTPH6	PATIENT HOME PHONE	AOE	Y			TEXT		
MPTRA6	PATIENT RACE	AOE	Y			TEXT		
MPTET6	PATIENT ETHNICITY	AOE	Y			TEXT		
MPTOC6	PATIENT OCCUPATION	AOE	Y			TEXT		
MPTEM6	PATIENT EMPLOYER	AOE	Y			TEXT		
MGDFN6	GUARDIAN FIRST NAME	AOE	Y			TEXT		
MGDLN6	GUARDIAN LAST NAME	AOE	Y			TEXT		
MMDOR6	HEALTH CARE PROVIDER NAME	AOE	Y			TEXT		
MMDAD6	HEALTH CARE STREET ADDRESS	AOE	Y			TEXT		
MMDCI6	HEALTH CARE PROVIDER CITY	AOE	Y			TEXT		
MMDST6	HEALTH CARE PROVIDER STATE	AOE	Y			TEXT		
MMDZI6	HEALTH CARE PROVIDER ZIP CODE	AOE	Y			TEXT		
MMDPH6	HEALTH CARE PROVIDER PHONE	AOE	Y			TEXT		
MLABP6	SUBMITTING LABORATORY PHONE	AOE	Y			TEXT		
8645A	ARSENIC	RES	N	ng/mL	5583-0			
15080B	LEAD	RES	N	mcg/dL	5671-3			
15080D	CADMIUM	RES	N	ng/mL	5609-3			
HMDB1	VENOUS/CAPILLARY	RES	N		IP			
HMDB2	PATIENT STREET ADDRESS	RES	N		IP			
8618A	MERCURY	RES	N	ng/mL	5685-3			
HMDB3	PATIENT CITY	RES	N		IP			
HMDB4	PATIENT STATE	RES	N		IP			
HMDB5	PATIENT ZIP CODE	RES	N		IP			
HMDB6	PATIENT COUNTY	RES	N		IP			
HMDB7	PATIENT HOME PHONE	RES	N		IP			
HMDB8	PATIENT RACE	RES	N		IP			
HMDB9	PATIENT ETHNICITY	RES	N		IP			
HMDB10	PATIENT OCCUPATION	RES	N		IP			
HMDB11	PATIENT EMPLOYER	RES	N		IP			
HMDB12	GUARDIAN FIRST NAME	RES	N		IP			

HMDB13	GUARDIAN LAST NAME	RES	N		IP
HMDB14	HEALTH CARE PROVIDER NAME	RES	N		IP
HMDB15	HEALTH CARE STREET ADDRESS	RES	N		IP
HMDB16	HEALTH CARE PROVIDER CITY	RES	N		IP
HMDB17	HEALTH CARE PROVIDER STATE	RES	N		IP
HMDB18	HEALTH CARE PROVIDER ZIP CODE	RES	N		IP
HMDB19	HEALTH CARE PROVIDER PHONE	RES	N		IP
HMDB20	SUBMITTING LABORATORY PHONE	RES	N		IP

Thyroglobulin Tumor Marker (Mayo HTG2) (93220)

Effective Date 10/6/2014

CPT(s): 84432, 86800

Expiration Date:

Billing No: 93220

Interface Code: XHTG2

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HTG21	THYROGLOBULIN TUMOR MARKER	RES	N	ng/mL	IP
HTG22	THYROGLOBULIN ANTIBODY	RES	N	IU/mL	IP
HTG23	THYROGLOBULIN INTERP	RES	N		IP

HIV-1 Ab Confirm Western Blot (Mayo HV1WB) (95820)

Effective Date 5/19/2014

CPT(s): 86689

Expiration Date:

Billing No: 95820

Interface Code: XHV1WB Orderable and Reflex for NHIV12, NOBPNH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
23878A	HIV-1 CONFIRM WESTERN BLOT	RES	N		13499-9

Immunoglobulin D (IgD) (Mayo IGD) (99636)

Effective Date 4/15/2014

CPT(s): 82784

Expiration Date:

Billing No: 99636

Interface Code: XIGD

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGD1	IMMUNOGLOBULIN D	RES	N		2460-4

IGF-1/GFBP-3 Growth Panel (Mayo IGFGP) (93189P)

Effective Date 1/11/2016

CPT(s): 84305, 83520

Expiration Date:

Billing No: 93189

Interface Code: XIGFGP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGFGP1	IGF-1. LC/MS	RES	N		2484-4
IGFGP2	IGFGP Z-SCORE	RES	N		73561-3
IGFB3	IGFBP-3	RES	N	mcg/mL	2483-6

Immunoglobulin Subclass IgG4 (Mayo IGGS4) (93181)

Effective Date 1/12/2016

CPT(s): 82787

Expiration Date:

Billing No: 93181

Interface Code: XIGGS4

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IGGS4	IMMUNOGLOBULIN SUBCLASS IgG4	RES	N	mg/dL	2469-5

Itraconazole, Serum (Mayo ITCON) (99376)

Effective Date 12/1/2012

CPT(s): 80299

Expiration Date:

Billing No: 99376

Interface Code: XITCON

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ITCON1	ITRACONAZOLE, S	RES	N	mcg/mL	10989-2
ITCON2	HYDROXYITRACONAZOLE	RES	N	mcg/mL	18337-6

June Grass, IgE (Mayo JUNE) (99419)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99419

Interface Code: XJUNE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
JUNE1	JUNE GRASS, IgE	RES	N	kU/L	6153-1

Microsporidia PCR, Stool/Urine (Mayo LCMSP) (93533)

Effective Date 4/1/2015

CPT(s): 87798

Expiration Date:

Billing No: 93533

Interface Code: XLCMSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR64	SPECIMEN SOURCE	AOE	Y			SELECTLIST	STL`URIN	STOOL`URINE
LCMSP1	LCMSP SPECIMEN SOURCE	RES	N		IP			
LCMSP2	ENCEPHALITOZOON SPECIES	RES	N		IP			
LCMSP3	ENTEROCYTOZOON BIENEUSI	RES	N		IP			

Cytomegalovirus, PCR (Mayo LCMV) (96880)

Effective Date 7/31/2013

CPT(s): 87496

Expiration Date:

Billing No: 96880

Interface Code: XLCMV

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR18	CMV SPECIMEN SOURCE	AOE	Y			TEXT		
81240A	CMV SPECIMEN SOURCE	RES	N		31208-2			
81240B	CMV by PCR RESULT	RES	N		5000-5			

Leishmaniasis (Visceral) Ab (Mayo LEIS) (99578)

Effective Date 6/24/2013

CPT(s): 86717

Expiration Date:

Billing No: 99578

Interface Code: XLEIS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LEIS1	LEISHMANIASIS AB	RES	N		7958-2

HSV and VZV by PCR (Mayo LHSVZ) (97780)

Effective Date 11/12/2015

CPT(s): 87529, 87798

Expiration Date:

Billing No: 97780

Interface Code: XLHSVZ

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR10	HSV SPECIMEN SOURCE	AOE	Y			TEXT		
MSOR58	VZV SPECIMEN SOURCE	AOE	Y			TEXT		
80575A	HSV SPECIMEN SOURCE	RES	N		31208-2			
LHSV1	HSV 1, PCR	RES	N		16130-7			
LHSV2	HSV 2, PCR	RES	N		16131-5			
81241A	VZV SPECIMEN SOURCE	RES	N		31208-2			
81241B	VZV RESULT	RES	N		11483-5			

Varicella Zoster Virus, PCR (Mayo LVZV) (96630)

Effective Date 1/21/2014

CPT(s): 87798

Expiration Date:

Billing No: 96630

Interface Code: XLVZV

Result/AOE		Type	Suppress	Units	LOINC	A O E		
Code	**Description**					**Type**	**List Codes**	**List Code Descriptions**
MSOR58	VZV SPECIMEN SOURCE	AOE	Y			TEXT		
81241A	VZV SPECIMEN SOURCE	RES	N		31208-2			
81241B	VARICELLA-ZOSTER VIRUS PCR	RES	N		11483-5			

AFP, Single Marker, Maternal (Mayo MAFP) (92380)

Effective Date 2/15/2013

CPT(s): 82105

Expiration Date:

Billing No: 92380

Interface Code: XMAFP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MESTDD	PATIENTS EST DUE DATE (EDD)	AOE	Y			DATE		
MMTHO	METHOD TO DETERMINE EDD	AOE	Y			TEXT		
MMTWT	PATIENT WEIGHT	AOE	Y			TEXT		
MLBKGS	PAT WEIGHT UNITS (LBS OR KG)	AOE	Y			TEXT		
MIDD	INSULIN DEPENDENT DIABETES	AOE	Y			SELECTLIST	NO`YES	NO`YES
MRACE	BLACK RACE	AOE	Y			SELECTLIST	BLA`NBLA	BLACK`NON BLACK
MMULTF	NUMBER OF FETUSES	AOE	Y			TEXT		
MCHOR	NUMBER OF CHORIONS	AOE	Y			SELECTLIST	MCHO`DCHO`UNK`NAP	MONOCHORIONIC`DICHORIONIC`UNKNOWN`NOT APPLICABLE
MIVFP	IVF PREGNANCY	AOE	Y			SELECTLIST	NO`YES	NO`YES
MEGGD	IVF EGG DONOR DATE OF BIRTH	AOE	Y			DATE		
MEGGFR	EGG OR EMBRYO FREEZE DATE	AOE	Y			DATE		
MPRHIS	PREV DOWN/TRISOMY PREGNANCY	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MPRNTD	PREV PREG W/NEURAL TUBE DEFECT	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MPTNTD	PATIENT OR FATHER HAS A NTD	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MDRPHN	PHYSICIAN PHONE NUMBER	AOE	Y			TEXT		
81149A	RECALC. MATERNAL SERUM SCRN	RES	N		43995-0			
81149B	COLLECTION DATE	RES	N		51953-8			
81149C	BIRTHDATE	RES	N		21112-8			
81149D	CALCULATED AGE at EDD	RES	N		43993-5			
8114HH	MATERNAL WEIGHT (lbs)	RES	N	lbs	29463-7			
8114II	MATERNAL WEIGHT (kg)	RES	N	kg	29463-7			
81149F	INSULIN DEPENDENT DIABETES	RES	N		33248-6			
81149G	BLACK RACE	RES	N		32624-9			
81149H	NUMBER OF FETUSES	RES	N		55281-0			
81149I	IVF PREGNANCY	RES	N		47224-1			
81149J	GESTATION (GA) by U/S	RES	N	wk,d	33882-2			
81149K	DATE OF U/S	RES	N		34970-4			
81149L	EDD BY U/S SCAN	RES	N		11781-2			
81149M	LAST MENSTRUAL PERIOD (LMP)	RES	N		8665-2			
81149N	EDD BY LMP	RES	N		11779-6			
81149O	GESTATION (GA) by DATES	RES	N	wk,d	11885-1			
81149P	DATE OF ESTIMATE	RES	N					
81149Q	GESTATION by PHYSICAL EXAM	RES	N	wk	11884-4			
81149R	DATE OF PHYSICAL EXAM	RES	N					
81149S	GA ON COLLECT. BY U/S SCAN	RES	N	wk,d	11888-5			

81149T	GA ON COLLECTION by DATES	RES	N	wk,d	11885-1
81149U	GA ON COLLECT by PHYS EXAM	RES	N	wk	11884-4
81149V	GA USED IN RISK ESTIMATE	RES	N		21299-3
81149W	AFP	RES	N		31993-9
8114DD	INTERPRETATION (Mat Scrn)	RES	N		59462-2
8114EE	ADD'L COMMENTS (Mat Scrn)	RES	N		55107-7
8114FF	RECM'D FOLLOW UP (Mat Scrn)	RES	N		
8114GG	GENERAL TEST INFO (Mat Scrn)	RES	N		62364-5
8114JJ	OTHER INFO (Mat Scrn)	RES	N		52535-2

Maternal Cell Contamination (Mayo MATCC) (90875)

Effective Date 8/2/2015

CPT(s): 81265

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90875

Interface Code: XMATCC Orderable and reflex for XFXS, XATHAL, XCFP,XPWAS; May reflex XCULFB, XCULAF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MATCC1	MATCC RESULT SUMMARY	RES	N		IP
MATCC2	MATCC RESULT	RES	N		IP
MATCC3	MATCC INTERPRETATION	RES	N		IP
MATCC4	MATCC REASON FOR REFERRAL	RES	N		42349-1
MATCC5	MATCC SPECIMEN	RES	N		66746-9
MATCC6	MATCC SOURCE	RES	N		31208-2
MATCC7	MATCC METHOD	RES	N		49549-9
MATCC8	MATCC RELEASED BY	RES	N		NA

Mannose-Binding Lectin (Mayo MBL) (99143)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 99143

Interface Code: XMBL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MBL1	MANNOSE-BINDING LECTIN	RES	N	ng/mL	30152-3

Mycoplasma genitalium, PCR (Mayo MGRP) (90057)

Effective Date 9/30/2015

CPT(s): 87798

Expiration Date:

Billing No: 90057

Interface Code: XMGRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MSOR67	MGRP SOURCE	AOE	Y			TEXT		
MGRP1	MGRP SOURCE	RES	N		31208-2			
MGRP2	MYCOPLASMA GENITALIUM PCR	RES	N		IP			

Manganese, Serum (Mayo MNS) (93640)

Effective Date 5/9/2016

CPT(s): 83785

Expiration Date:

Billing No: 93640

Interface Code: XMNS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MNS1	MANGANESE, SERUM	RES	N	ng/mL	5683-8

Mycoplasma pneumoniae by PCR (Mayo MPRP) (90565)

Effective Date 11/12/2013

CPT(s): 87581

Expiration Date:

Billing No: 90565

Interface Code: XMPRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSOR62	SPECIMEN SOURCE	AOE	Y		
MPRP1	SPECIMEN SOURCE	RES	N		31208-2
MPRP2	MYCOPLASMA PNEUMONIAE PCR	RES	N		

A O E

Type	List Codes	List Code Descriptions
TEXT		

Micropolyspora faeni IgG Ab (Mayo MPSF) (90701)

Effective Date 12/24/2014

CPT(s): 86609

Expiration Date:

Billing No: 90701

Interface Code: XMPSF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8768A	MICROPOLYSPORA FAENI IgG AB	RES	N	mg/L	26948-0

Multiple Sclerosis Profile (Mayo MSP2) (99799)

Effective Date 8/12/2014

CPT(s): 82040, 82042, 82784 x 2, 83916 x 2

Expiration Date:

Billing No: 99799

Interface Code: XMSP2

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSP21	BANDS, CSF	RES	N	bands	12782-9
MSP22	OLIG BANDS INTERP, CSF	RES	N	bands	12782-9
MSP23	BANDS, S	RES	N	bands	35569-3
MSP24	IgG INDEX, CSF	RES	N		14117-6
MSP25	IgG, CSF	RES	N	mg/dL	2464-6
MSP26	ALBUMIN, CSF	RES	N	mg/dL	1746-7
MSP27	IgG/ALBUMIN, CSF	RES	N		2470-3
MSP28	SYNTHESIS RATE, CSF	RES	N	mg/24 hr	14116-8
MSP29	IgG, S	RES	N	mg/dL	2465-3
MSP210	ALBUMIN, S	RES	N	mg/dL	1751-7
MSP211	IgG/ALBUMIN, S	RES	N		6782-7

Myco. Tuberculosis Complex, PCR (Mayo MTBRP) (90127)

Effective Date 12/1/2012

CPT(s): 87556

Expiration Date:

Billing No: 90127

Interface Code: XMTBRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSOR59	MTBRP SPECIMEN SOURCE	AOE	Y			TEXT		
MTBRP1	MTBRP SPECIMEN SOURCE:	RES	N		31208-2			
MTBRP2	MTBRP RESULT	RES	N		38379-4			

MTHFR A1298C Mutation Analysis (Mayo MTHAC) (90284)

Effective Date 4/23/2013

CPT(s): 81291

Expiration Date:

Billing No: 90284

Interface Code: XMTHAC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MTHAC1	MTHFR A1298C MUTATION AN	RES	N		28060-2
MTHAC2	MTHAC INTERPRETATION	RES	N		69047-9
MTHAC3	MTHAC REVIEWED BY:	RES	N		

MTHFR 2 Mutations Analysis (Mayo MTHP) (90283)

Effective Date 4/23/2013

CPT(s): 81291

Expiration Date:

Billing No: 90283

Interface Code: XMTHP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81648G	METHYLENETETRAHYDROFOL REDUC MUT	RES	N		21709-1
81648H	MTHFR INTERPRETATION	RES	N		69047-9
81648J	MTHFR REVIEWED BY	RES	N		
MTHAC1	MTHFR A1298C MUTATION AN.	RES	N		28060-2
MTHAC2	MTHAC INTERPRETATION	RES	N		69047-9
MTHAC3	MTHAC REVIEWED BY	RES	N		

Mulberry, IgE (Mayo MULB) (90156)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 90156

Interface Code: XMULB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MULB1	MULBERRY, IgE	RES	N	kU/L	6281-0

MuSK Autoantibody (Mayo MUSK) (93666)

Effective Date 5/19/2015

CPT(s): 83519

Expiration Date:

Billing No: 93666

Interface Code: XMUSK

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MUSK1	MUSK AUTOANTIBODY	RES	N	nmol/L	IP

Myoglobin, Urine (Mayo MYGLU) (99122)

Effective Date 7/31/2013

CPT(s): 83874

Expiration Date:

Billing No: 99122

Interface Code: XMYGLU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MYGLU1	MYOGLOBIN, U	RES	N	mcg/L	2641-9

Nettle, IgE (Mayo NETT) (90892)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 90892

Interface Code: XNETT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NETT1	NETTLE, IgE	RES	N	kU/L	6186-1

Nicotine w/ Metabolites, Ur (Mayo NICOU) (95200)

Effective Date 1/1/2015

CPT(s): 80323

Expiration Date:

Billing No: 95200

Interface Code: XNICOU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NICOU1	NICOTINE	RES	N	ng/mL	3854-7
NICOU2	COTININE	RES	N	ng/mL	10366-3
NICOU3	NORNICOTINE	RES	N	ng/mL	33917-6
NICOU4	ANABASINE	RES	N	mg/mL	33915-0

NMO-AQP4-IgG CBA, CSF (Mayo NMOCC) (90435)

Effective Date 9/9/2013

CPT(s): 86255

Expiration Date:

Billing No: 90435

Interface Code: XNMOCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMOCC1	NMO-AQP4-IgG CBA, CSF	RES	N		

NMO-AQP4-IgG CBA (Mayo NMOCS) (90434)

Effective Date 9/9/2013

CPT(s): 86255

Expiration Date:

Billing No: 90434

Interface Code: XNMOCS Orderable and Reflex for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMOCS1	NMO-AQP4-IgG CBA	RES	N		

Nortriptyline (Mayo NOTRP) (92600)

Effective Date 8/25/2015

CPT(s): 80335

Expiration Date:

Billing No: 92600

Interface Code: XNOTRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NOTRP1	NORTRIPTYLINE	RES	N	ng/mL	IP

NTX-Telopeptide, Urine (Mayo NTXPR) (97430)

Effective Date 12/1/2012

CPT(s): 82523

Expiration Date:

Billing No: 97430

Interface Code: XNTXPR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NTXPR1	CREATININE, U	RES	N	mg/dL	2161-8
NTXPR2	NTX	RES	N	nmol/L	35334-2
NTXPR3	NTX-TELOPEPTIDE	RES	N	nmol/mol	21216-7

21-Hydroxylase Antibodies (Mayo OH21) (96720)

Effective Date 4/29/2015

CPT(s): 83519

Expiration Date:

Billing No: 96720

Interface Code: XOH21

Result/AOE Code	Description	Type	Suppress	Units	LOINC
OH211	21-HYDROXYLASE ANTIBODY	RES	N	U/mL	17781-6

Oligoclonal Banding (Mayo OLIG) (91894)

Effective Date 8/12/2014

CPT(s): 83916 x 2

Expiration Date:

Billing No: 91894

Interface Code: XOLIG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSP21	BANDS, CSF	RES	N	bands	12782-9
MSP22	OLIG BANDS INTERP, CSF	RES	N	bands	12782-9
MSP23	BANDS, S	RES	N	bands	35569-3

Opiate, Confirm, Meconium (Mayo OPATM) (93281)

Effective Date 1/1/2015

CPT(s): 80361, 80365

Expiration Date:

Billing No: 93281

Interface Code: XOPATM Orderable and Reflex for XDASM4, XDASM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
OPATM1	MORPHINE	RES	N	ng/g	26860-7
OPATM2	OXYMORPHONE	RES	N	ng/g	69028-9
OPATM3	HYDROMORPHONE	RES	N	ng/g	26862-3
OPATM4	CODIENE	RES	N	ng/g	26865-6
OPATM5	OXYCODONE	RES	N	ng/g	26869-8
OPATM6	HYDROCODONE	RES	N	ng/g	26863-1
OPATM7	INTERPRETATION	RES	N		69050-3
OPATM8	CHAIN OF CUSTODY	RES	N		

Oxygen Dissociation P50,RBC (Mayo P50B) (93840)

Effective Date 1/11/2016

CPT(s): 82820

Expiration Date:

Billing No: 93840

Interface Code: XP50B

Result/AOE Code	Description	Type	Suppress	Units	LOINC
P50B1	P50 INTERPRETATION	RES	N		IP
P50B2	OXYGEN DISSOCIATION P50, RBC	RES	N		IP
P50B3	P50 SHIPPING CONTROL VIAL	RES	N		IP

Lead, Blood (Mayo PBDB) (92260)

Effective Date 5/23/2016

CPT(s): 83655

Expiration Date:

Billing No: 92260

Interface Code: XPBDB

Result/AOE Code	Description	Type	Suppress	Units	LOINC		
		PRFLX					
MVECP	VENOUS/CAPILLARY	AOE	Y			SELECTLIST V`C	VENOUS`CAPILLARY
MPTADD	PATIENT STREET ADDRESS	AOE	Y			TEXT	
MPTCIT	PATIENT CITY	AOE	Y			TEXT	
MPTSTA	PATIENT STATE	AOE	Y			TEXT	
MPTZIP	PATIENT ZIP CODE	AOE	Y			TEXT	
MPTCNT	PATIENT COUNTY	AOE	Y			TEXT	
MPTPHO	PATIENT HOME PHONE	AOE	Y			TEXT	
MPTRAC	PATIENT RACE	AOE	Y			TEXT	
MPTETH	PATIENT ETHNICITY	AOE	Y			TEXT	
MPTOCC	PATIENT OCCUPATION	AOE	Y			TEXT	
MPTEMP	PATIENT EMPLOYER	AOE	Y			TEXT	
MGDFN	GUARDIAN FIRST NAME	AOE	Y			TEXT	
MGDLN	GUARDIAN LAST NAME	AOE	Y			TEXT	
MMDOR	HEALTH CARE PROVIDER NAME	AOE	Y			TEXT	
MMDAD	HEALTH CARE STREET ADDRESS	AOE	Y			TEXT	
MMDCIT	HEALTH CARE PROVIDER CITY	AOE	Y			TEXT	
MMDSTA	HEALTH CARE PROVIDER STATE	AOE	Y			TEXT	
MMDZIP	HEALTH CARE PROVIDER ZIP CODE	AOE	Y			TEXT	
MMDPH	HEALTH CARE PROVIDER PHONE	AOE	Y			TEXT	
MLABPH	SUBMITTING LABORATORY PHONE	AOE	Y			TEXT	
15070A	LEAD, B	RES	N		77307-7		
PBDB1	VENOUS/CAPILLARY	RES	N		31208-2		
PBDB2	PATIENT STREET ADDRESS	RES	N		56799-0		
PBDB3	PATIENT CITY	RES	N		68997-6		
PBDB4	PATIENT STATE	RES	N		46499-0		
PBDB5	PATIENT ZIP CODE	RES	N		45401-7		
PBDB6	PATIENT COUNTY	RES	N		IP		
PBDB7	PATIENT HOME PHONE	RES	N		42077-8		
PBDB8	PATIENT RACE	RES	N		32624-9		
PBDB9	PATIENT ETHNICITY	RES	N		69490-1		
PBDB10	PATIENT OCCUPATION	RES	N		11341-5		
PBDB11	PATIENT EMPLOYER	RES	N		80427-8		
PBDB12	GUARDIAN FIRST NAME	RES	N		IP		
PBDB13	GUARDIAN LAST NAME	RES	N		IP		
PBDB14	HEALTH CARE PROVIDER NAME	RES	N		IP		

PBDB15	HEALTH CARE STREET ADDRESS	RES	N	IP
PBDB16	HEALTH CARE PROVIDER CITY	RES	N	52531-1
PBDB17	HEALTH CARE PROVIDER STATE	RES	N	52532-9
PBDB18	HEALTH CARE PROVIDER ZIP CODE	RES	N	IP
PBDB19	HEALTH CARE PROVIDER PHONE	RES	N	68340-9
PBDB20	SUBMITTING LABORATORY PHONE	RES	N	IP

Penicillin G, IgE (Mayo PBPO) (99129)

Effective Date 10/14/2014

CPT(s): 86003

Expiration Date:

Billing No: 99129

Interface Code: XPBPO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PBPO1	PENICILLIN G, IgE	RES	N	kU/L	6851-0

PCP, Confirm, Meconium (Mayo PCPMC) (93056)

Effective Date 12/1/2012

CPT(s): 83992

Expiration Date:

Billing No: 93056

Interface Code: XPCPMC Orderable and Reflex for XDASM4, XDASM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PCPMC1	PCP CONFIRM	RES	N	ng/g	26859-9
PCPMC2	INTERPRETATION	RES	N		69050-3
PCPMC3	CHAIN OF CUSTODY	RES	N		

Pecan-Food, IgE (Mayo PEC) (99155)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99155

Interface Code: XPEC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PEC1	PECAN-FOOD, IgE	RES	N	kU/L	6208-3

Penicillium, IgE (Mayo PENL) (99860)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99860

Interface Code: XPENL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PENL1	PENICILLIUM, IgE	RES	N	kU/L	IP

Proinsulin, Plasma (Mayo PINS) (96590)

Effective Date 5/6/2014

CPT(s): 84206

Expiration Date:

Billing No: 96590

Interface Code: XPINS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PINS1	PROINSULIN	RES	N	pmol/L	27882-0

Pistachio, IgE (Mayo PISTA) (99976)

Effective Date 4/29/2015

CPT(s): 86003

Expiration Date:

Billing No: 99976

Interface Code: XPISTA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PISTA1	PISTACHIO, IgE	RES	N	kU/L	7613-3

Phenylalanine and Tyrosine, Plasma (Mayo PKU) (95910)

Effective Date 12/5/2014

CPT(s): 84510, 84030

Expiration Date:

Billing No: 95910

Interface Code: XPKU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PKU1	PHENYLALANINE, PLASMA	RES	N	nmol/mL	14875-9
PKU2	TYROSINE, PLASMA	RES	N	nmol/mL	20660-7

PNH, PI-Linked Ag (Mayo PLINK) (90735)

Effective Date 10/14/2014

CPT(s): 88184 x 2, 88185 x 7, 88188

Expiration Date:

Billing No: 90735

Interface Code: XPLINK Test includes: PNH RBC-Partial Ag Loss, PNH RBC-Complete Ag Loss, PNH Granulocytes, PNH Monocytes, PNH Interpretation. (Additionally, NLL 99718 Flow Cytometry 9-15 Markers always performed and billed)

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PLINK1	PNH INTERPRETATION	RES	N		69052-9
PLINK2	PNH RBC-PARTIAL AG LOSS	RES	N	%	
PLINK3	PNH RBC-COMPLETE AG LOSS	RES	N	%	
PLINK4	PNH GRANULOCYTES	RES	N	%	
PLINK5	PNH MONOCYTES	RES	N	%	

PML/RARA Quant PCR (Mayo PMLR) (99594)

Effective Date 5/20/2016

CPT(s): 81315

Expiration Date:

Billing No: 99594

Interface Code: XPMLR

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT3	SPECIMEN TYPE	AOE	N			TEXT		
PMLR1	SPECIMEN TYPE	RES	N					
84114H	FINAL DIAGNOSIS	RES	N		34574-4			
PMLR2	PMRL RESULT	RES	N		IP			

Phenytoin, Free (Mayo PNYF) (90010)

Effective Date 6/26/2015

CPT(s): 80186

Expiration Date:

Billing No: 90010

Interface Code: XPNYF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PNYF1	PHENYTOIN, FREE	RES	N	mcg/mL	IP

Pregnenolone, S (Mayo PREGN) (90756)

Effective Date 9/9/2014

CPT(s): 84140

Expiration Date:

Billing No: 90756

Interface Code: XPREGN

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PREGN1	PREGNENOLONE, S	RES	N	ng/dL	2837-3

Primidone and Phenobarbital (Mayo PRMB) (92820)

Effective Date 6/26/2015

CPT(s): 80184, 80188

Expiration Date:

Billing No: 92820

Interface Code: XPRMB

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PRMB1	PRIMIDONE	RES	N	mcg/mL	3978-4
PRMB2	PHENOBARBITAL	RES	N	mcg/mL	3948-7

Porphyrins, Total, Plasma (Mayo PTP) (90687)

Effective Date 12/1/2012

CPT(s): 84311

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90687

Interface Code: XPTP May Reflex XPFP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81052A	PORPHYRINS, TOTAL, PLASMA	RES	N	mcg/dL	2815-9
PTP1	REVIEWED BY	RES	N		
PTP2	INTERPRETATION	RES	N		59462-2

Prader Willi/Angelman Syndrome (Mayo PWAS) (93890)

Effective Date 8/2/2015

CPT(s): 81331

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 93890

Interface Code: XPWAS May reflex XCULFB, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PWAS1	PWAS RESULT SUMMARY	RES	N		IP
PWAS2	PWAS RESULT	RES	N		IP
PWAS3	PWAS INTERPRETATION	RES	N		IP
PWAS4	PWAS REASON FOR REFERRAL	RES	N		42349-1
PWAS5	PWAS SPECIMEN	RES	N		NA
PWAS6	PWAS SOURCE	RES	N		31208-2
PWAS7	PWAS RELEASED BY	RES	N		NA

Epstein Barr Virus PCR, Quant (Mayo QEBV) (96340)

Effective Date 10/14/2014

CPT(s): 87799

Expiration Date:

Billing No: 96340

Interface Code: XQEBV

Result/AOE Code	Description	Type	Suppress	Units	LOINC
QEBV1	EPSTEIN BARR VIRUS PCR QNT	RES	N		5002-1
QEBV2	QEBV COPIES/mL	RES	N	copies/mL	36923-1
QEBV3	QEBV LOWER 95% CONFID INTERVAL	RES	N	copies/mL	NA
QEBV4	QEBV UPPER 95% CONFID INTERVAL	RES	N	copies/mL	NA

QuantiFERON-TB Gold In-Tube Detection (Mayo QFT3) (92525)

Effective Date 12/1/2012

CPT(s): 86480

Expiration Date:

Billing No: 92525

Interface Code: XQFT3

Result/AOE Code	Description	Type	Suppress	Units	LOINC
QFT301	QuantiFERON-TB GOLD RESULT	RES	N		71773-6
QFT302	TB AG minus NIL RESULT	RES	N	IU/mL	64084-7
QFT303	MITOGEN minus NIL RESULT	RES	N	IU/mL	71774-7
QFT304	NIL RESULT	RES	N	IU/mL	71776-9

QUAD Screen, Maternal (Mayo QUAD) (92420)

Effective Date 6/17/2015

CPT(s): 81511

Expiration Date:

Billing No: 92420

Interface Code: XQUAD

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
MESTDD	PATIENTS EST DUE DATE (EDD)	AOE	Y			DATE		
MMTHO	METHOD TO DETERMINE EDD	AOE	Y			TEXT		
MMTWT	PATIENT WEIGHT	AOE	Y			TEXT		
MLBKGS	PAT WEIGHT UNITS (LBS OR KG)	AOE	Y			TEXT		
MIDD	INSULIN DEPENDENT DIABETES	AOE	Y			SELECTLIST	NO`YES	NO`YES
MRACE	BLACK RACE	AOE	Y			SELECTLIST	BLA`NBLA	BLACK`NON BLACK
MMULTF	NUMBER OF FETUSES	AOE	Y			TEXT		
MCHOR	NUMBER OF CHORIONS	AOE	Y			SELECTLIST	MCHO`DCHO`UNK`NAP	MONOCHORIONIC`DICHORIONIC`UNKNOWN`NOT APPLICABLE
MIVFP	IVF PREGNANCY	AOE	Y			SELECTLIST	NO`YES	NO`YES
MEGGD	IVF EGG DONOR DATE OF BIRTH	AOE	Y			DATE		
MEGGFR	EGG OR EMBRYO FREEZE DATE	AOE	Y			DATE		
MPRHIS	PREV DOWN/TRISOMY PREGNANCY	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MPRNTD	PREV PREG W/NEURAL TUBE DEFECT	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MPTNTD	PATIENT OR FATHER HAS A NTD	AOE	Y			SELECTLIST	NO`YES`UNK	NO`YES`UNKNOWN
MDRPHN	PHYSICIAN PHONE NUMBER	AOE	Y			TEXT		
81149A	RECALC. MATERNAL SERUM SCRN	RES	N		43995-0			
81149B	COLLECTION DATE	RES	N		33882-2			
81149C	BIRTHDATE	RES	N		21112-8			
81149D	CALCULATED AGE at EDD	RES	N		43993-5			
8114HH	MATERNAL WEIGHT (lbs)	RES	N	lbs	29463-7			
8114II	MATERNAL WEIGHT (kg)	RES	N	kg	29463-7			
81149F	INSULIN DEPENDENT DIABETES	RES	N		33248-6			
81149G	BLACK RACE	RES	N		32624-9			
81149H	NUMBER OF FETUSES	RES	N		55281-0			
81149I	IVF PREGNANCY	RES	N		47224-1			
81149J	GESTATION (GA) by U/S	RES	N	wk,d	11888-5			
81149K	DATE OF U/S	RES	N		34970-4			
81149L	EDD BY U/S SCAN	RES	N		11781-2			
81149M	LAST MENSTRUAL PERIOD (LMP)	RES	N		8665-2			
81149N	EDD BY LMP	RES	N		11779-6			
81149O	GESTATION (GA) by DATES	RES	N	wk,d	11885-1			
81149P	DATE OF ESTIMATE	RES	N					
81149Q	GESTATION by PHYSICAL EXAM	RES	N	wk	11884-4			
81149R	DATE OF PHYSICAL EXAM	RES	N					
81149S	GA ON COLLECT. BY U/S SCAN	RES	N	wk,d	11888-5			

81149T	GA ON COLLECTION by DATES	RES	N	wk,d	11885-1
81149U	GA ON COLLECT by PHYS EXAM	RES	N	wk	11884-4
81149V	GA USED IN RISK ESTIMATE	RES	N		21299-3
81149W	AFP	RES	N		31993-9
81149X	uE3	RES	N		27259-1
81149Y	hCG, TOTAL	RES	N		2116-2
81149Z	INHIBIN	RES	N		2478-6
8114AA	DOWN SYN SCR RISK ESTIMATE	RES	N		43995-0
8114BB	DOWN SYN MATERNAL AGE RISK	RES	N		49090-4
8114CC	TRISOMY 18 SCRN RISK EST.	RES	N		43994-3
8114DD	INTERPRETATION (Mat Scrn)	RES	N		59462-2
8114EE	ADD'L COMMENTS (Mat Scrn)	RES	N		55107-7
8114FF	RECM'D FOLLOW UP (Mat Scrn)	RES	N		
8114GG	GENERAL TEST INFO (Mat Scrn)	RES	N		62364-5
8114JJ	OTHER INFO (Mat Scrn)	RES	N		52535-2

Quinidine (Mayo QUIND) (93550)

Effective Date 6/26/2015

CPT(s): 80194

Expiration Date:

Billing No: 93550

Interface Code: XQUIND

Result/AOE Code	Description	Type	Suppress	Units	LOINC
QUIND1	QUINIDINE	RES	N	mcg/mL	IP

Rice, IgE (Mayo RICE) (99660)

Effective Date 8/12/2015

CPT(s): 86003

Expiration Date:

Billing No: 99660

Interface Code: XRICE

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RICE1	RICE, IgE	RES	N	kU/L	6230-7

RNA Polymerase III Ab, IgG (Mayo RNAP) (99268)

Effective Date 12/1/2012

CPT(s): 83520

Expiration Date:

Billing No: 99268

Interface Code: XRNAP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RNAP1	RNA POLYMERASE III, AB, IgG	RES	N	U	

Respiratory Profile Reg 9 Great Plain (Mayo RPR9) (90562)

Effective Date 9/9/2014

CPT(s): 82785, 86003 x 22

Expiration Date:

Billing No: 90562

Interface Code: XRPR9

Result/AOE Code	Description	Type	Suppress	Units	LOINC
8159A	IMMUNOGLOBULIN E, IgE	RES	N	kU/L	19113-0
3033A	HOUSE DUST MITES/D.P., IgE	RES	N	kU/L	6096-2
83720A	HOUSE DUST MITES/D.F., IgE	RES	N	kU/L	6095-4
83720B	CAT EPITHELIUM, IgE	RES	N	kU/L	6833-8
83720C	DOG DANDER, IgE	RES	N	kU/L	6098-8
83720D	BERMUDA GRASS, IgE	RES	N	kU/L	6041-8
83346B	TIMOTHY GRASS, IgE	RES	N	kU/L	6265-3
83720F	COCKROACH, IgE	RES	N	kU/L	30170-5
PENL1	PENICILLIUM, IgE	RES	N	kU/L	IP
83720G	CLADOSPORIUM, IgE	RES	N	kU/L	53760-5
3033B	ASPERGILLUS FUMIGATUS, IgE	RES	N	kU/L	6025-1
83720H	ALTERNARIA TENUIS, IgE	RES	N	kU/L	6020-2
83720I	BOX ELD/MAPLE, IgE	RES	N	kU/L	7155-5
CED1	MOUNTAIN CEDAR, IgE	RES	N	kU/L	6178-8
83720J	OAK, IgE	RES	N	kU/L	6189-5
83720K	ELM, IgE	RES	N	kU/L	6109-3
83720L	COTTONWOOD, IgE	RES	N	kU/L	6090-5
ASHW1	WHITE ASH, IgE	RES	N	kU/L	6278-6
MULB1	MULBERRY, IgE	RES	N	kU/L	6281-0
83720M	SHORT RAGWEED, IgE	RES	N	kU/L	6085-5
83720N	RUSSIAN THISTLE, IgE	RES	N	kU/L	6234-9
SORR1	RED SORREL, IgE	RES	N	kU/L	6244-8
NETT1	NETTLE, IgE	RES	N	kU/L	6186-1

Streptococcal Antibodies Panel (Mayo SABP) (99552)

Effective Date 1/12/2016

CPT(s): 86060, 86215

Expiration Date:

Billing No: 99552

Interface Code: XSABP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SAPB1	SABP ANTISTREP-O TITER	RES	N	IU/mL	5370-2
SAPB2	ANTI-Dnase B TITER	RES	N	U/mL	5133-4

Salmon, IgE (Mayo SALM) (99495)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99495

Interface Code: XSALM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SALM1	SALMON, IgE	RES	N	kU/L	6237-2

Supersaturation Profile, 24 hr Urine (Mayo SAT24) (91213)

Effective Date 11/17/2015

CPT(s): 82340, 82436, 82507, 82570, 83735, 83935, 83945, 83986, 84105, 84133, 84300, 84392, 82140, 84540, 84560

Expiration Date:

Billing No: 91213

Interface Code: XSAT24

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MVOL16	SAT24 URINE VOLUME	AOE	Y		
MDUR19	SAT24 COLLECTION DURATION	AOE	Y		
82029A	SAT24 CALCIUM OXALATE CRYSTAL	RES	N	DG	IP
82029B	SAT24 BRUSHITE CRYSTAL	RES	N	DG	42673-4
82029C	SAT24 HYDROXYAPATITE CRYSTAL	RES	N	DG	IP
82029D	SAT24 URIC ACID CRYSTAL	RES	N	DG	42678-3
82029E	SAT24 SODIUM URATE CRYSTAL	RES	N	DG	43423-3
82029F	SAT24 INTERPRETATION	RES	N		59462-2
8202A	SAT24 SODIUM, 24 HR	RES	N	mmol/24 h	2956-1
8202C	SAT24 COLLECTION DURATION	RES	N	hours	13362-9
8202D	SAT24 URINE VOLUME	RES	N		3167-4
8202F	SAT24 POTASSIUM, 24 HR	RES	N	mmol/24 h	2829-0
SAT241	SAT24 CALCIUM, 24 HR	RES	N	mg/24 h	IP
SAT242	SAT24 MAGNESIUM,24 HR	RES	N	mg/24 h	IP
8202Q	SAT24 CHLORIDE, 24 HR	RES	N	mmol/24 h	2079-2
8202V	SAT24 PHOSPHORUS, U	RES	N	mg/24 h	2779-7
8202Z	SAT24 SULFATE, U	RES	N	mmol/24 h	26889-6
8202DD	SAT24 CITRATE EXCRETION, U	RES	N	mg/24 h	14650-6
8202HH	SAT24 OXALATE, mmol/24 h	RES	N	mmol/24 h	14862-7
8202II	SAT24 OXALATE, mg/24 h	RES	N	mg/24 h	2701-1
82029R	SAT24 pH, U	RES	N		27378-9
8202NN	SAT24 URIC ACID, U	RES	N	mg/24 h	3087-4
8202RR	SAT24 CREATININE, U	RES	N	mg/24 h	2162-6
82029U	SAT24 OSMOLALITY	RES	N	mOSm/kg	2695-5

A O E

Type	List Codes	List Code Descriptions
TEXT		
TEXT		

SAT243	SAT24 AMMONIUM, 24 HR	RES	N	mmol/24 h	IP
SAT244	SAT24 UREA NITROGEN, U	RES	N	g/24 h	IP
SAT245	SAT24 PROTEIN CATABOLIC RATE	RES	N		IP

Blastomyces AB, Immunodiffusion (Mayo SBL) (92522)

Effective Date 2/9/2016

CPT(s): 86612

Expiration Date:

Billing No: 92522

Interface Code: XSBL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83121B	BLASTOMYCES IMMUNODIFFUSION	RES	N		5058-3

Coccidioides Ab (Mayo SCOC) (97790)

Effective Date 12/1/2012

CPT(s): 86635 x 3

Expiration Date:

Billing No: 97790

Interface Code: XSCOC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83121C	COCCI COMPLEMENT F	RES	N		5096-3
83121D	COCCI IMMUNODIFFUSION IgG	RES	N		22209-1
83121E	COCCI IMMUNODIFFUSION IgM	RES	N		22210-9

Shrimp, IgE (Mayo SHRI) (99494)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99494

Interface Code: XSHRI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
30342C	SHRIMP, IgE	RES	N	kU/L	6246-3

Sirolimus, Blood (Mayo SIIRO) (95670)

Effective Date 7/2/2013

CPT(s): 80195

Expiration Date:

Billing No: 95670

Interface Code: XSIIRO

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SIIRO1	SIROLIMUS	RES	N	ng/Ml	29247-4

Cryptococcus Ag Screen w/Titer (Mayo SLFA) (90871)

Effective Date 5/6/2014

CPT(s): 87899

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90871

Interface Code: XSLFA May Reflex XSLFAT

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SLFA1	CRYPTOCOCCUS AG SCR w/TITER	RES	N		

Cryptococcus Ag Titer (Mayo SLFAT) (90872)

Effective Date 5/6/2014

CPT(s): 87899

Expiration Date:

Billing No: 90872

Interface Code: XSLFAT Orderable and Reflex for XSLFA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SLFAT1	CRYPTOCOCCUS AG TITER	RES	N		

Red Sorrel, IgE (Mayo SORR) (90893)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 90893

Interface Code: XSORR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SORR1	RED SORREL, IgE	RES	N	kU/L	6244-8

Short Ragweed, IgE (Mayo SRW) (99523)

Effective Date 9/9/2014

CPT(s): 86003

Expiration Date:

Billing No: 99523

Interface Code: XSRW

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83720M	SHORT RAGWEED, IgE	RES	N	kU/L	6085-5

Strawberry, IgE (Mayo STBY) (99689)

Effective Date 8/12/2015

CPT(s): 86003

Expiration Date:

Billing No: 99689

Interface Code: XSTBY

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STBY1	STRAWBERRY, IgE	RES	N	kU/L	6257-0

Strychnine, Serum/Plasma (Mayo STCH) (94210)

Effective Date 6/24/2013

CPT(s): 80323

Expiration Date:

Billing No: 94210

Interface Code: XSTCH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STCH1	STRYCHNINE	RES	N	ng/mL	5738-0
STCH2	STRYCHNINE REPORTING LIMIT	RES	N	ng/mL	

St. Louis Encephalitis Ab, IgG, IgM (Mayo STLP) (91243)

Effective Date 10/27/2014

CPT(s): 86653 x 2

Expiration Date:

Billing No: 91243

Interface Code: XSTLP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STLP1	ST. LOUIS ENCEPH AB, IgG	RES	N		10906-6
STLP2	ST. LOUIS ENCEPH AB, IgM	RES	N		10907-4

Strongyloides Antibody IgG (Mayo STRNG) (99791)

Effective Date 11/2/2015

CPT(s): 86682

Expiration Date:

Billing No: 99791

Interface Code: XSTRNG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STRNG1	STRONGYLOIDES ANTIBODY, IgG	RES	N		IP

TSH, Sensitive (Mayo STSH) (93310)

Effective Date 11/25/2014

CPT(s): 84443

Expiration Date:

Billing No: 93310

Interface Code: XSTSH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
STSH1	TSH, SENSITIVE	RES	N	mIU/L	11579-0

T Cell Receptor Gene Rearrangement (Mayo TCGR) (99714)

Effective Date 5/7/2013

CPT(s): 81340, 81342

Expiration Date:

Billing No: 99714

Interface Code: XTCGR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83122L	TCGR FINAL DIAGNOSIS	RES	N		34574-4

Thiamin (Vitamin B1), WB (Mayo TDP) (99010)

Effective Date 1/11/2016

CPT(s): 84425

Expiration Date:

Billing No: 99010

Interface Code: XTDP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TDP1	THIAMIN (VITAMIN B1), WB	RES	N	nmol/L	

Thyroglobulin Mass Spectrometry (Mayo TGMS) (90886)

Effective Date 12/5/2014

CPT(s): 84432

Expiration Date:

Billing No: 90886

Interface Code: XTGMS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TGMS1	THYROGLOBULIN MASS SPEC	RES	N	ng/mL	3013-0
TGMS2	TGMS INTERPRETATION	RES	N		59462-2

Carboxy-THC, Confirm, Meconium (Mayo THCM) (93055)

Effective Date 12/1/2012

CPT(s): 80349

Expiration Date:

Billing No: 93055

Interface Code: XTHCM Orderable and Reflex for XDASM4, XDASM5

Result/AOE Code	Description	Type	Suppress	Units	LOINC
THCM1	THC CONFIRM	RES	N	ng/g	69007-3
THCM2	INTERPRETATION	RES	N		69050-3
THCM3	CHAIN OF CUSTODY	RES	N		

Carboxy-Tetrahydrocannabinol (THC) Confirmation, Urine (Mayo THCU) (95520)

Effective Date 1/1/2015

CPT(s): 80349

Expiration Date:

Billing No: 95520

Interface Code: XTHCU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
THCU2	CARBOXY THC BY GCMS	RES	N	ng/mL	3530-3
THCU3	CARBOXY THC INTERPRETATION	RES	N		69050-3
THCU4	CARBOXY THC CHAIN OF CUSTODY	RES	N		

Tomato, IgE (Mayo TOMA) (97960)

Effective Date 11/3/2015

CPT(s): 86003

Expiration Date:

Billing No: 97960

Interface Code: XTOMA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOMA1	Tomato, IgE	RES	N	kU/L	6266-1

Toxoplasma, AB IgG (Mayo TOXGP) (93280)

Effective Date 6/11/2013

CPT(s): 86777

Expiration Date:

Billing No: 93280

Interface Code: XTOXGP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOXGP1	TOXOPLASMA AB, IgG	RES	N		40677-7
TOXGP2	TOXOPLASMA IgG VALUE	RES	N	threshold	56991-3

Toxoplasma AB, IgM (Mayo TOXMP) (93305)

Effective Date 6/11/2013

CPT(s): 86778

Expiration Date:

Billing No: 93305

Interface Code: XTOXMP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOXMP1	TOXOPLASMA AB, IgM	RES	N		35282-3
TOXMP2	TOXOPLASMA IgM VALUE	RES	N	threshold	5390-0

Toxoplasma AB, IgM and IgG (Mayo TOXOP) (93980)

Effective Date 6/11/2013

CPT(s): 86777, 86778

Expiration Date:

Billing No: 93980

Interface Code: XTOXOP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOXGP1	TOXOPLASMA AB, IgG	RES	N		40677-7
TOXGP2	TOXOPLASMA IgG VALUE	RES	N	threshold	56991-3
TOXMP1	TOXOPLASMA AB, IgM	RES	N		35282-3
TOXMP2	TOXOPLASMA IgM VALUE	RES	N	threshold	5390-0

Tramadol and Metabolite, UR (Mayo TRAM) (99641)

Effective Date 4/29/2015

CPT(s): 80373

Expiration Date:

Billing No: 99641

Interface Code: XTRAM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TRAM1	TRAMADOL	RES	N	ng/mL	IP
TRAM2	O-DESMETHYLTRAMADOL	RES	N	ng/mL	IP

TORCH Profile, IgG (Mayo TRCHG) (94270)

Effective Date 6/11/2013

CPT(s): 86644, 86695, 86696, 86762, 86777

Expiration Date:

Billing No: 94270

Interface Code: XTRCHG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOXGP1	TOXOPLASMA AB, IgG	RES	N		40677-7
TOXGP2	TOXOPLASMA IgG VALUE	RES	N	threshold	56991-3
TRCHG1	RUBELLA AB, IgG	RES	N		40667-8
TRCHG2	RUBELLA IgG AB INDEX	RES	N		5334-8
TRCHG3	CYTOMEGALOVIRUS AB, IgG	RES	N		
84422A	HSV TYPE 1 AB, IgG	RES	N		51916-5
84422B	HSV TYPE 2 AB, IgG	RES	N		43180-9

TORCH Profile, IgM (Mayo TRCHM) (94280)

Effective Date 6/11/2013

CPT(s): 86645, 86694, 86778

Expiration Date:

Billing No: 94280

Interface Code: XTRCHM

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TOXMP1	TOXOPLASMA AB, IgM	RES	N		35282-3
TOXMP2	TOXOPLASMA IgM VALUE	RES	N	threshold	5390-0
TRCHM1	CYTOMEGALOVIRUS AB, IgM	RES	N		
26589A	HSV AB, IgM by IFA	RES	N		44507-2

Tetanus Toxoid IgG AB (Mayo TTIGS) (94300)

Effective Date 6/23/2015

CPT(s): 86317

Expiration Date:

Billing No: 94300

Interface Code: XTTIGS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TTIGS1	TETANUS IgG AB	RES	N		IP
TTIGS2	TETANUS IgG VALUE	RES	N	IU/mL	IP

Histoplasma Ag, U (Mayo UHIST) (93760)

Effective Date 8/12/2014

CPT(s): 87385

Additional CPTs will be billed when appropriate.

Expiration Date:

Billing No: 93760

Interface Code: XUHIST May Reflex XFMVHU

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UHIST1	HISTOPLASMA AG RESULT	RES	N		44524-7
UHIST2	HISTOPLASMA AG VALUE	RES	N	ng/mL	13971-7

Uniparental Disomy (Mayo UNIPD) (98400)

Effective Date 11/12/2015

CPT(s): 81402

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 98400

Interface Code: XUNIPD May Reflex XCULFB, XCULAF

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			
UNIPD1	UNIPD RESULT SUMMARY	RES	N		IP
UNIPD2	UNIPD RESULT	RES	N		IP
UNIPD3	UNIPD INTERPRETATION	RES	N		IP
UNIPD4	UNIPD REASON FOR REFERRAL	RES	N		42349-1
UNIPD5	UNIPD SPECIMEN	RES	N		IP
UNIPD6	UNIPD SOURCE	RES	N		31208-2
UNIPD7	UNIPD METHOD	RES	N		49549-9
UNIPD8	UNIPD RELEASED BY	RES	N		IP

Ureaplasma species, PCR (Mayo URRP) (93295)

Effective Date 9/30/2015

CPT(s): 87798

Expiration Date:

Billing No: 93295

Interface Code: XURRP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	AOE Type	AOE List Codes	AOE List Code Descriptions
MSOR68	URRP SPECIMEN SOURCE	AOE	Y			TEXT		
URRP1	URRP SPECIMEN SOURCE	RES	N		31208-2			
URRP2	UREAPLASMA UREALYTICUM PCR	RES	N		51988-4			
URRP3	UREAPLASMA PARVUM PCR	RES	N		69933-0			

Valproic Acid Total + Free (Mayo VALPG) (99444)

Effective Date 6/26/2015

CPT(s): 80164, 80165

Expiration Date:

Billing No: 99444

Interface Code: XVALPG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VALPG1	VALPROIC ACID, FREE	RES	N	mcg/mL	IP
VALPG2	VALPROIC ACID, TOTAL	RES	N	mcg/mL	IP

Culture, Viral, Non Respiratory (Mayo VIRNR) (99633)

Effective Date 12/1/2012

CPT(s): 87252

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99633

Interface Code: XVIRNR

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT4	SPECIMEN TYPE	AOE	N			TEXT		
VIRNR1	VIRAL CULTURE, NON RESPIRATORY	RES	N		6584-7			

Vitamin K1 (Mayo VITK1) (98980)

Effective Date 4/23/2013

CPT(s): 84597

Expiration Date:

Billing No: 98980

Interface Code: XVITK1

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VITK1	VITAMIN K1	RES	N	ng/mL	9622-2

Voriconazole, Serum (Mayo VORI) (92678)

Effective Date 8/12/2015

CPT(s): 80299

Expiration Date:

Billing No: 92678

Interface Code: XVORI

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VORI1	VORICONAZOLE, SERUM	RES	N	mcg/mL	38370-3

Culture, Viral, Respiratory (Mayo VRESP) (99632)

Effective Date 12/1/2012

CPT(s): 87252

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 99632

Interface Code: XVRESP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
MSPT5	SPECIMEN TYPE	AOE	N			TEXT		
VRESP1	VIRAL CULTURE, RESPIRATORY	RES	N		6584-7			

West Nile Virus Ab, IgG and IgM, CSF (Mayo WNC) (99449)

Effective Date 11/19/2015

CPT(s): 86788, 86789

Expiration Date:

Billing No: 99449

Interface Code: XWNC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WNC1	WEST NILE VIRUS AB, IGG, CSF	RES	N		41236-1
WNC2	WEST NILE VIRUS AB, IGM CSF	RES	N		29569-1
WNC3	WEST NILE CSF INTERPRETATION	RES	N		69048-7

Egg Yolk, IgE (Mayo YOLK) (97990)

Effective Date 10/22/2013

CPT(s): 86003

Expiration Date:

Billing No: 97990

Interface Code: XYOLK

Result/AOE Code	Description	Type	Suppress	Units	LOINC
YOLK1	EGG YOLK, IgE	RES	N	kU/L	6107-7

Prometheus Celiac Serology (Prom 1155) (93370)

Effective Date 2/2/2016

CPT(s): 83520 x 3, 82784, 88346

Expiration Date:

Billing No: 93370

Interface Code: Y1155

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	A O E List Codes	A O E List Code Descriptions
1155G	AUTO ADD IF non-IBD	AOE	N			TEXT		
1155A	CELIAC SEROLOGY	RES	N		IP			
1155B	ANTI-ENDOMYSIAL IgA IFA	RES	N		IP			
1155C	TOTAL IgA BY NEPHELOMETRY	RES	N		IP			
1155D	TISSUE TRANSGLU IgA ELISA	RES	N		IP			
1155E	DEAMIDATED GLIADIN PEP IgG	RES	N		IP			
1155F	DEAMIDATED GLIADIN PEP IgA	RES	N		IP			
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP			

Prometheus IBD sgi Diagnostic (Prom 1800) (90595)

Effective Date 2/2/2016

CPT(s): 83520 x 8, 82397 x 3, 86140, 88346, 88350, 81479 x 4

Expiration Date:

Billing No: 90595

Interface Code: Y1800

Result/AOE Code	Description	Type	Suppress	Units	LOINC
1800A	IBD DIAGNOSTIC	RES	N		IP
1800B	pANCA PERINUCLEAR PATTERN	RES	N		IP
1800C	pANCA DNASE PATTERN	RES	N		IP
1800D	ASCA IgA ELISA	RES	N		IP
1800E	ASCA IgG ELISA	RES	N		IP
1800F	pANCA AUTOANTIBODY ELISA	RES	N		IP
1800G	ANTI-CBir1 ELISA	RES	N		IP
1800H	ANTI-OmpC IgA ELISA	RES	N		IP
1800I	ANTI-A4-Fla2 IgG ELISA	RES	N		IP
1800J	ANTI-FlaX IgG ELISA	RES	N		IP
1800K	ICAM-1	RES	N		IP
1800L	VCAM-1	RES	N		IP
1800M	VEGF	RES	N		IP
1800N	PROMETHEUS CRP	RES	N		IP
1800O	ATG16L1 SNP (rs2241880)	RES	N		IP
1800P	NKX2-3 SNP (rs10883365)	RES	N		IP
1800Q	ECM1 SNP (rs3737240)	RES	N		IP
1800R	STAT3 SNP (rs744166)	RES	N		IP
1800S	SAA	RES	N		IP
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP

Prometheus Crohn's Prognostic (Prom 2001) (90863)

Effective Date 2/2/2016

CPT(s): 83520 x 5, 88346, 88350, 81401

Expiration Date:

Billing No: 90863

Interface Code: Y2001

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
2001F	AUTO ADD IF CROHNS	AOE	N		IP	TEXT		
2001A	CROHNS PROGNOSTIC	RES	N		IP			
2001B	SNP 8 (R702W)	RES	N		IP			
2001C	SNP 12 (G908R)	RES	N		IP			
2001D	SNP 13 (1007fs)	RES	N		IP			
1800B	pANCA PERINUCLEAR PATTERN	RES	N		IP			
1800C	pANCA DNASE PATTERN	RES	N		IP			
2001E	ANTI-I2 ELISA	RES	N		IP			
1800D	ASCA IgA ELISA	RES	N		IP			
1800E	ASCA IgG ELISA	RES	N		IP			
1800G	ANTI-CBir1 ELISA	RES	N		IP			
1800H	ANTI-OmpC IgA ELISA	RES	N		IP			
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP			

Prometheus Anser IFX (Prom 3150) (91297)

Effective Date 5/9/2016

CPT(s): 84999

Expiration Date:

Billing No: 91297

Interface Code: Y3150

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
3150D	REASON FOR ORDER	AOE	N			SELECTLIST	DISMON`INFUS`LOSS`RELAP`DRGHOL`SIDEFF	Disease monitoring`Infusion/allergic reaction`Loss of Response`Relapse`Restart after drug holiday`Side effects
3150K	MEDICATION	AOE	N			SELECTLIST	INFLX`REMICA	Infliximab biosimilar`Remicade (Infliximab)
3150H	CURRENT INFLIXIMAB DOSE	AOE	N			TEXT		
3150I	CURRENT INFLIX FREQ (week)	AOE	N			TEXT		
3150J	CURRENT INFLIX START DATE	AOE	N			TEXT		
3150A	ANSER IFX	RES	N		IP			
3150B	INFLIXIMAB CONCENTRATION	RES	N		IP			
3150C	ANTIBODIES TO INFLIXIMAB	RES	N		IP			
PROCO	PROMETEHUS FOOTER COMMENT	RES	N		IP			

Prometheus Anser ADA (Prom 3170) (91295)

Effective Date 5/9/2016

CPT(s): 84999

Expiration Date:

Billing No: 91295

Interface Code: Y3170

Result/AOE Code	Description	Type	Suppress	Units	LOINC			
		PRFLX						
3150D	REASON FOR ORDER	AOE	N			SELECTLIST	DISMON`INFUS`LOSS`RELAP`DRGHOL`SIDEFF	Disease monitoring`Infusion/allergic reaction`Loss of Response`Relapse`Restart after drug holiday`Side effects
3170G	CURRENT ADALIMUMAB DOSE (mg)	AOE	N			TEXT		
3170H	CURRENT ADALIM FREQ (weeks)	AOE	N			TEXT		
3170I	CURRENT ADALIM START DATE	AOE	N			TEXT		
3170A	ANSER ADA	RES	N		IP			
3170B	ADALIMUMAB CONCENTRATION	RES	N		IP			
3170C	ANTIBODIES TO ADALIMUMAB	RES	N		IP			
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP			

Prometheus Thiopurine Met. (Prom 3200) (91282)

Effective Date 2/2/2016

CPT(s): 82542

Expiration Date:

Billing No: 91282

Interface Code: Y3200

Result/AOE Code	Description	Type	Suppress	Units	LOINC			
		PRFLX						
3200D	CURRENT THERAPEUTIC	AOE	N		IP	SELECTLIST	MP`AZA`OTHER	6-MP`AZA`OTHER
3200E	Y3200 DOSAGE(mg/day)	AOE	N		IP	TEXT		
3200F	OTHER THERAPEUTIC	AOE	N		IP	TEXT		
3200A	THIOPURINE METABOLITES	RES	N		IP			
3200B	6-MMPN	RES	N		IP			
3200C	6-TGN	RES	N		IP			
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP			

Prometheus TPMT Genetics (Prom 3300) (90596)

Effective Date 2/2/2016

CPT(s): 81401

Expiration Date:

Billing No: 90596

Interface Code: Y3300

Result/AOE Code	Description	Type	Suppress	Units	LOINC
3300A	TPMT	RES	N		IP
3300B	TPMT GENETICS	RES	N		IP
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP

Prometheus TPMT Enzyme (Prom 3320) (90762)

Effective Date 2/2/2016

CPT(s): 82657, 82542

Expiration Date:

Billing No: 90762

Interface Code: Y3320

Result/AOE Code	Description	Type	Suppress	Units	LOINC
3320A	TPMT ENZYME	RES	N		IP
3320B	TPMT ENZYME ACTIVITY	RES	N		IP
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP

Prometheus FIBROSpect II (Prom 4000) (90873)

Effective Date 2/2/2016

CPT(s): 83883, 83520 x 2

Expiration Date:

Billing No: 90873

Interface Code: Y4000

Result/AOE Code	Description	Type	Suppress	Units	LOINC
4000A	FIBROSPECT II	RES	N		IP
4000B	FIBROSpect II INDEX	RES	N		IP
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP

Prometheus Celiac Genetics (Prom 6260) (90865)

Effective Date 2/2/2016

CPT(s): 81382 x 2

Expiration Date:

Billing No: 90865

Interface Code: Y6260

Result/AOE Code	Description	Type	Suppress	Units	LOINC
6260A	CELIAC GENETICS	RES	N		IP
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP

Prometheus Celiac Plus (Prom 6360) (90864)

Effective Date 2/2/2016

CPT(s): 83520 x 3, 88346, 82784, 81382 x 2

Expiration Date:

Billing No: 90864

Interface Code: Y6360

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
1155G	AUTO ADD IF non-IBD	AOE	N		IP	TEXT		
6360A	CELIAC PLUS	RES	N		IP			
6260A	CELIAC GENETICS	RES	N		IP			
1155A	CELIAC SEROLOGY	RES	N		IP			
1155B	ANTI-ENDOMYSIAL IGA IFA	RES	N		IP			
1155C	TOTAL IGA BY NEPHELOMETRY	RES	N		IP			
1155D	TISSUE TRANSGLU IGA ELISA	RES	N		IP			
1155E	DEAMIDATED GLIADIN PEP IgG	RES	N		IP			
1155F	DEAMIDATED GLIADIN PEP IgA	RES	N		IP			
PROCO	PROMETHEUS FOOTER COMMENT	RES	N		IP			

Culture, Yeast (55900)

Effective Date 12/1/2012

CPT(s): 87102

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 55900

Interface Code: YEASC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	N			SELECTLIST	VAG`CER`VC`STOOL`THRT	VAGINAL`CERVICAL`VAGINAL-CERVICAL`STOOL`THROAT
SREQ	SPECIAL REQUESTS	AOE	N			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		18482-0			
RPT	REPORT STATUS	RES	N					

Culture, Yersinia (56000)

Effective Date 12/1/2012

CPT(s): 87046

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 56000

Interface Code: YERC

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
SDES	SPECIMEN DESCRIPTION	AOE	Y			SELECTLIST	STOOL	STOOL
SREQ	SPECIAL REQUESTS	AOE	Y			TEXT		
SDES	SPECIMEN DESCRIPTION	RES	N		31208-2			
SREQ	SPECIAL REQUESTS	RES	N		8251-1			
CULT	CULTURE	RES	N		701-3			
RPT	REPORT STATUS	RES	N					

Patient Antibody ID

Effective Date 12/1/2012

CPT(s): 86870

Expiration Date:

Billing No: 10060

Interface Code: %ABI Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%ABI	PATIENT ANTIBODY ID	RES	N		888-8

Patient RBC Antigens

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: %AGI Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%AGI	PATIENT RBC ANTIGENS	RES	N		33062-1

Patient Antibody Screen

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Billing No: 10100

Interface Code: %AS Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%AS	PATIENT ANTIBODY SCREEN	RES	N		890-4

DAT, Polyspecific

Effective Date 12/1/2012

CPT(s): 86880

Expiration Date:

Billing No: 10160

Interface Code: %DBS Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%DBS	DAT, POLYSPECIFIC	RES	N		1006-6

DAT, Anti-IgG

Effective Date 12/1/2012

CPT(s): 86880

Expiration Date:

Billing No: 10310

Interface Code: %DIG Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%DIG	DAT, ANTI-IgG	RES	N		1007-4

RBC Antibody Eluted

Effective Date 12/1/2012

CPT(s): 86870

Expiration Date:

Billing No: 10330

Interface Code: %ELU Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
%ELU	RBC ANTIBODY ELUTED	RES	N		897-9

A1 Subtype on Patient

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No:

Interface Code: A1PT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
A1PT	A1 SUBTYPE ON PATIENT	RES	N		844-1

Body Fluid Type

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: ABFT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ABFT	BODY FLUID TYPE	RES	N		47938-6

Auto Differential

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: ADIFF Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
APIG	IM GRANS %, AUTO	PRFLX	N	%	71695-1
APNEUT	NEUTROPHIL %, AUTO	PRFLX	N	%	770-8
APLYMP	LYMPHOCYTE %, AUTO	PRFLX	N	%	736-9
APMONO	MONOCYTE %, AUTO	PRFLX	N	%	5905-5
APEOS	EOSINOPHIL %, AUTO	PRFLX	N	%	713-8
APBASO	BASOPHIL %, AUTO	PRFLX	N	%	706-2
ABIG	IM GRANS ABS, AUTO	PRFLX	N	tho/cmm	53115-2
ABNEUT	NEUTROPHIL ABS, AUTO	PRFLX	N	tho/cmm	751-8
ABLYMP	LYMPHOCYTE ABS, AUTO	PRFLX	N	tho/cmm	731-0
ABMONO	MONOCYTE ABS, AUTO	PRFLX	N	tho/cmm	742-7
ABEOS	EOSINOPHIL ABS, AUTO	PRFLX	N	tho/cmm	711-2
ABBASO	BASOPHIL ABS, AUTO	PRFLX	N	tho/cmm	704-7

Rh PHENOTYPE

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BCLCBE Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BCLCBE	Rh PHENOTYPE	RES	N		

C Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BCPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BCPT	C ANTIGEN TYPE on PT	RES	N		

E Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BEPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BEPT	E ANTIGEN TYPE on PT	RES	N		

K Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BKPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BKPT	K ANTIGEN TYPE on PT	RES	N		1096-7

M Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BMPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BMPT	M ANTIGEN TYPE on PT	RES	N		1225-2

N Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BNPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BNPT	N ANTIGEN TYPE on PT	RES	N		1261-7

S Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: BSPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
BSPT	S ANTIGEN TYPE ON PT	RES	N		1320-1

Cold Autoadsorption

Effective Date 12/1/2012

CPT(s): 86978

Expiration Date:

Billing No: 10340

Interface Code: COLDAB Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
COLDAB	COLD AUTOADSORPTION	RES	N		896-1

A copy is being sent to:

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: CT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CT	A copy is being sent to:	RES	N		

Cw Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: CWPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CWPT	Cw ANTIGEN TYPE on PT	RES	N		960-5

DAT,ANTI-C3b, -C3d

Effective Date 12/1/2012

CPT(s): 86880

Expiration Date:

Billing No: 10160

Interface Code: DC3 Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DC3	DAT, ANTI-C3b, -C3d	RES	N		55774-4

Enzyme Antibody Screen

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Billing No: 10350

Interface Code: EAS Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EAS	ENZYME ANTIBODY SCREEN	RES	N		

Fy(a) Antigen Type on PT

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86905

Billing No: 10320

Interface Code: FYAPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FYAPT	Fy(a) ANTIGEN TYPE on PT	RES	N		1027-2

Fy(b) Antigen Type on PT

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86905

Billing No: 10320

Interface Code: FYBPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FYBPT	Fy(b) ANTIGEN TYPE on PT	RES	N		1033-0

Glomerular Filtration Rate, Estimated (23760)

Effective Date 5/1/2015
Expiration Date:

CPT(s):

Billing No: 23760

Interface Code: GFR Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
EGFR	GFR, EST. Non African-Amer.	RES	N	mL/min /1.73m 2	48642-3
BGFR	GFR, EST. African-American	RES	N	mL/min /1.73m 2	48643-1

Hepatitis B Surface AG Confirm

Effective Date 12/1/2012
Expiration Date:

CPT(s): 87341

Billing No: 24760

Interface Code: HBSCF Reflexed by NLL, Not orderable by client, Reflexed from HBSR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HBSCF	HEPATITIS B SURFACE AG Confirm	RES	N		5195-3

Jk(a) Antigen Type on PT

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86905

Billing No: 10320

Interface Code: JKAPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
JKAPT	Jk(a) ANTIGEN TYPE on PT	RES	N		1072-8

Jk(b) Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: JKBPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
JKBPT	Jk(b) ANTIGEN TYPE on PT	RES	N		1078-5

Kp(a) Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: KPAPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
KPAPT	Kp(a) ANTIGEN TYPE on PT	RES	N		1102-3

Lisa Antibody Screen

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Billing No: 10320

Interface Code: LAS Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LAS	LISA ANTIBODY SCREEN	RES	N		890-4

c Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LCPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LCPT	c ANTIGEN TYPE on PT	RES	N		1159-3

Le(a) Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LEAPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LEAPT	Le(a) ANTIGEN TYPE on PT	RES	N		1115-5

Le(B) Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LEBPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LEBPT	Le(b) ANTIGEN TYPE on PT	RES	N		1121-6

e Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LEPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LEPT	e ANTIGEN TYPE on PT	RES	N		1165-0

e Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LETYP Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LETYP	e ANTIGEN TYPE on PT	RES	N		1165-0

Cellano (k) Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LKPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LKPT	CELLANO (k) TYPE on PT	RES	N		4469-3

s Antigen Type on PT

Effective Date 12/1/2012

CPT(s): 86905

Expiration Date:

Billing No: 10320

Interface Code: LSPT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
LSPT	s ANTIGEN TYPE ON PT	RES	N		1213-8

A1AT Phenotype (99554)

Effective Date 12/1/2012

CPT(s): 82104

Expiration Date:

Billing No: 99554

Interface Code: M17089 Not orderable by client; Reflex only for M83050

Result/AOE Code	Description	Type	Suppress	Units	LOINC
17089A	A1AT PHENOTYPE	RES	N		49244-7

HSV AB, IgM, Confirm (Mayo HSMR) (99631)

Effective Date 12/1/2012

CPT(s): 86694

Expiration Date:

Billing No: 99631

Interface Code: M26589 Not orderable by client; Reflex only for M84422, M87998

Result/AOE Code	Description	Type	Suppress	Units	LOINC
26589A	HSV AB, IgM, CONFIRM	RES	N		44507-2

Immunofixation Cryoglob (Mayo IMFXC) (99504)

Effective Date 4/29/2015

CPT(s): 86334

Expiration Date:

Billing No: 99504

Interface Code: M28265 Not orderable by client; Reflex only for M83659, XCRYS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
28265A	IMMUNOFIXATION CRYOGLOB	RES	N		48638-1

M. PNEUMONIAE AB IgM, IFA (Mayo MMYCO) (99241)

Effective Date 4/24/2015

CPT(s): 86334

Expiration Date:

Billing No: 99241

Interface Code: M29326 Not orderable by client; Reflex only for M85107

Result/AOE Code	Description	Type	Suppress	Units	LOINC
29326A	M. PNEUMONIAE AB IgM, IFA	RES	N		21406-4

HGB Electrophoresis, Molecular (Mayo HGBMO) (91483)

Effective Date 6/11/2014

CPT(s): 81257, 81401, 81403

Expiration Date:

Billing No: 91483

Interface Code: M29374 Not orderable by client; Reflex only for M81626, M84158

Result/AOE Code	Description	Type	Suppress	Units	LOINC
29374A	ALPHA GLOBIN GENE SEQUENCING	RES	N		
29374B	BETA GLOBIN GENE SEQUENCING	RES	N		50996-8
29374C	ALPHA GLOBIN GENE SEQUENCE	RES	N		21687-9
29374D	BETA GLOBIN GENE SEQUENCE	RES	N		50996-8
29374E	BETA GLOBIN GENE DEL/DUP	RES	N		21689-5
29374F	MANUAL DNA EXTRACTION	RES	N		5699-4

Alpha-Globin Gene Analysis (Mayo AGPBT) (90549)

Effective Date 6/4/2015

CPT(s): 81257

Expiration Date:

Additional CPTs will be billed when appropriate.

Billing No: 90549

Interface Code: M31032 Not orderable by client; Reflex only for M84158

Result/AOE Code	Description	Type	Suppress	Units	LOINC
31032A	ALPHA-GLOBIN GENE ANALYSIS	RES	N		21687-9

von Willebrand Factor Multimer (Mayo VWFM) (90537)

Effective Date 12/1/2012

CPT(s): 85247

Expiration Date:

Billing No: 90537

Interface Code: M31046 Not orderable; Reflex only for M83094, M83099

Result/AOE Code	Description	Type	Suppress	Units	LOINC
31046A	VON WILLEBRAND FACTOR MULTIMER	RES	N		32217-2

DRVVT Mix (Mayo DRVTM) (91514)

Effective Date 12/1/2012

CPT(s): 85613

Expiration Date:

Billing No: 91514

Interface Code: M32467 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550I	DRVVT MIX RATIO	RES	N		

DRVVT Confirmation (Mayo DRVTC) (91515)

Effective Date 12/1/2012

CPT(s): 85613

Expiration Date:

Billing No: 91515

Interface Code: M32468 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550J	DRVVT CONFIRM RATIO	RES	N		

Special Coag Interpretation (Mayo CCC2) (91718)

Effective Date 12/1/2012

CPT(s): 85390-26

Expiration Date:

Billing No: 91718

Interface Code: M32517 Not orderable by client; Reflex only for M83009 and M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
32517A	SPECIAL COAG INTERPRETATION	RES	N		69049-5

HB Variant by Mass Spec (Mayo MASS) (90548)

Effective Date 12/1/2012

CPT(s): 83789

Expiration Date:

Billing No: 90548

Interface Code: M60286 Not orderable by client; Reflex only for M84158, M81626

Result/AOE Code	Description	Type	Suppress	Units	LOINC
60286A	HB VARIANT BY MASS SPEC	RES	N		32017-6

Soluble Fibrin Monomer (Mayo SFM) (90546)

Effective Date 12/1/2012

CPT(s): 85366

Expiration Date:

Billing No: 90546

Interface Code: M6600 Not orderable by client; Reflex only for M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83093B	SOLUBLE FIBRIN MONOMER	RES	N		40702-3

D-Dimer (Mayo DIRM) (90545)

Effective Date 12/1/2012

CPT(s): 85379

Expiration Date:

Billing No: 90545

Interface Code: M6625 Not orderable by client; Reflex only for M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83093A	FIBRINOGEN EQUIV. UNITS (FEU)	RES	N	mcg/mL	69049-5
550M	D-DIMER UNITS (DDU)	RES	N	ng/mL DDU	

Bethesda Units (Mayo IBETH) (99535)

Effective Date 11/27/2013

CPT(s): 85335

Expiration Date:

Billing No: 99535

Interface Code: M7288 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097, M83099, M83102

Result/AOE Code	Description	Type	Suppress	Units	LOINC
1501B	BETHESDA UNITS	RES	N		13591-3

Coag Factor VIII Inhib Screen (Mayo F8IS) (99744)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 99744

Interface Code: M7289 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097, M83099, M83102

Result/AOE Code	Description	Type	Suppress	Units	LOINC
1501A	COAG FACTOR VIII INHIB SCRN	RES	N		3206-0

ANA2 Cascade (Mayo CASMT)

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: M7586 Not orderable by client; Reflex only from M83631

Result/AOE		Type	Suppress	Units	LOINC
Code	**Description**				
7586A	ANA2 CASCADE INTERP	RES	N		

Factor IX Inhib Screen (Mayo F9_IS) (90541)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90541

Interface Code: M7802 Not orderable by client; Reflex only for M83094

Result/AOE		Type	Suppress	Units	LOINC
Code	**Description**				
7802A	FACTOR IX INHIB SCREEN	RES	N		30086-3

Factor XI Inhib Screen (Mayo 11_IS) (90543)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90543

Interface Code: M7804 Not orderable by client; Reflex only for M83094

Result/AOE		Type	Suppress	Units	LOINC
Code	**Description**				
7804A	FACTOR XI INHIB SCREEN	RES	N		

Factor II Inhib Screen (Mayo F2_IS) (90538)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90538

Interface Code: M7806 Not orderable by client; Reflex only for M83094

Result/AOE		Type	Suppress	Units	LOINC
Code	**Description**				
7806A	FACTOR II INHIB SCREEN	RES	N		

Factor V Inhib Screen (Mayo F5_IS) (90539)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90539

Interface Code: M7808 Not orderable by client; Reflex only for M83094

Result/AOE		Type	Suppress	Units	LOINC
Code	**Description**				
7808A	FACTOR V INHIB SCREEN	RES	N		

Factor VII Inhib Screen (Mayo F7_IS) (90540)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90540

Interface Code: M7810 Not orderable by client; Reflex only for M83094

Result/AOE Code	Description	Type	Suppress	Units	LOINC
7810A	FACTOR VII INHIB SCREEN	RES	N		

Factor X Inhib Screen (Mayo 10_IS) (90542)

Effective Date 12/1/2012

CPT(s): 85335

Expiration Date:

Billing No: 90542

Interface Code: M7812 Not orderable by client; Reflex only for M83094

Result/AOE Code	Description	Type	Suppress	Units	LOINC
7811B	FACTOR X INHIB SCREEN	RES	N		39556-6

Dilute Russells Viper Venom Time (Mayo DRVT) (90536)

Effective Date 12/1/2012

CPT(s): 85613

Expiration Date:

Billing No: 90536

Interface Code: M80340 Not orderable; Reflex only for M83094

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550H	DRVVT SCREEN RATIO	RES	N	ratio	15359-3

Fibrinogen (Mayo FIBC) (90544)

Effective Date 12/1/2012

CPT(s): 85384

Expiration Date:

Billing No: 90544

Interface Code: M80343 Not orderable; Reflex only for M83092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80343A	FIBRINOGEN	RES	N	mg/dL	3255-7

Protein S Antigen (Mayo PST) (99766)

Effective Date 12/1/2012

CPT(s): 85305

Expiration Date:

Billing No: 99766

Interface Code: M80994 Not orderable; Reflex only for M83093

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83049B	PROTEIN S ANTIGEN, TOTAL	RES	N		27823-4

IEF Confirms (Mayo IEF) (99537)

Effective Date 12/1/2012

CPT(s): 82664

Expiration Date:

Billing No: 99537

Interface Code: M81644 Not orderable by client; Reflex only for M84158, M81626

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81664B	IEF CONFIRMS	RES	N		49316-3

Special Coagulation interpretation (Mayo CCC) (90547)

Effective Date 12/1/2012

CPT(s): 85390

Expiration Date:

Billing No: 90547

Interface Code: M82539 Not orderable by client; Reflex only for M83102

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550R	SP COAG INTERPRETATION	RES	N		69049-5
550S	SP COAG REVIEWED BY:	RES	N		

Tissue Transglutaminase Antibody, IgA, Serum (Mayo TTGA) (93260)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 93260

Interface Code: M82587 Not orderable by client; Reflex only for XCDSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82587A	TISSUE TRANSGLUT. AB, IgA	RES	N		46128-5

Staclot LA (Mayo STLA) (97750)

Effective Date 12/1/2012

CPT(s): 85598

Expiration Date:

Billing No: 97750

Interface Code: M82756 Not orderable; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
82756A	STACLOT APTT	RES	N		14979-9
82756B	STACLOT DELTA	RES	N		

CRMP-5-IgG Western Blot (Mayo CRMWS) (96060)

Effective Date 12/1/2012

CPT(s): 84182

Expiration Date:

Billing No: 96060

Interface Code: M83107 Not orderable; Reflex only for M83380, M83370

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83107A	CRMP-5-IgG WESTERN BLOT	RES	N		47401-5

Paraneoplastic Autoantibody WBLOT (Mayo WBN) (96060)

Effective Date 12/24/2014

CPT(s): 80154

Expiration Date:

Billing No: 96060

Interface Code: M83108 Not orderable; Reflex only for M83380, M83370

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83108A	PARANEOPLASTIC AUTOANTIBODY WBLOT	RES	N		34142-0

NMO IgG Serum (Neuromyelitis Optica Ab) (Mayo NMOS) (99330)

Effective Date 12/1/2012

CPT(s): 86255

Expiration Date:

Billing No: 99330

Interface Code: M83185 Not orderable; Reflex only for M60796

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83185A	NMO IGG SERUM	RES	N		43638-6

Ach Receptor (Mayo ARMO) (96070)

Effective Date 12/1/2012

CPT(s): 83519

Expiration Date:

Billing No: 96070

Interface Code: M83378 Not orderable; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83378A	ACh RECEPTOR (MUSCLE) MODULATING AB	RES	N	%	30192-9

AChR Ganglionic Neuronal AB (Mayo GANG) (98760)

Effective Date 12/1/2012

CPT(s): 83519

Expiration Date:

Billing No: 98760

Interface Code: M84321 Not orderable by client; Reflex only for M83770

Result/AOE Code	Description	Type	Suppress	Units	LOINC
84321A	AChR GANGLIONIC NEURONAL AB	RES	N		42233-7

Platelet Neutralization Procedure (Mayo PNP) (90532)

Effective Date 12/1/2012

CPT(s): 85597

Expiration Date:

Billing No: 90532

Interface Code: M8866 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550F	PLATELET NEUTRAL PROC.	RES	N		40647-0
550G	PNP BUFFER CONTROL	RES	N	s	

Gliadin (Deamidated) Ab IgA (Mayo DAGL) (99679)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 99679

Interface Code: M89029 Not orderable by client; Reflex only for XCDSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89029A	DEAMIDATED GLIADIN AB, IgA	RES	N		63453-5

Gliadin (Deamidated) Ab IgG (Mayo DGGL) (99680)

Effective Date 12/1/2012

CPT(s): 83516

Expiration Date:

Billing No: 99680

Interface Code: M89030 Not orderable by client; Reflex only for XCDSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89030A	DEAMIDATED GLIADIN AB, IgG	RES	N		63459-2

Neuronal VGKC-Ab (Mayo VGKC) (99850)

Effective Date 12/1/2012

CPT(s): 83519

Expiration Date:

Billing No: 99850

Interface Code: M89165 Not orderable by client; Reflex only for M83370

Result/AOE Code	Description	Type	Suppress	Units	LOINC
83380L	NEURONAL VGKC-AB	RES	N		41871-5

Amphiphysin Western Blot (Mayo ABLOT) (99286)

Effective Date 1/2/2014

CPT(s): 84182

Expiration Date:

Billing No: 99286

Interface Code: M89381 Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
89381A	AMPHIPHYSIN WESTERN BLOT	RES	N		33422-7

Ristocetin Cofactor (Mayo RIST) (97120)

Effective Date 12/1/2012

CPT(s): 85245

Expiration Date:

Billing No: 97120

Interface Code: M9046 Not orderable by client; Reflex only for M83092, M83094, M89792, M89799

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9046A	RISTOCETIN COFACTOR	RES	N		6014-5

PT Mix 1:1 (Mayo PTMX) (90530)

Effective Date 12/1/2012

CPT(s): 85611

Expiration Date:

Billing No: 90530

Interface Code: M9053 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550C	PT MIX 1:1	RES	N	s	5959-2

Coag Factor IX Assay (Mayo F_9) (95570)

Effective Date 12/1/2012

CPT(s): 85250

Expiration Date:

Billing No: 95570

Interface Code: M9065 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9065A	COAG FACTOR IX ASSAY	RES	N		3187-2

Coag Factor X Assay (Mayo F_10) (99424)

Effective Date 12/1/2012

CPT(s): 85260

Expiration Date:

Billing No: 99424

Interface Code: M9066 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
7811A	COAG FACTOR X ASSAY	RES	N		3218-5

Coag Factor VIII Activity Assay (Mayo F8A) (95560)

Effective Date 12/1/2012

CPT(s): 85240

Expiration Date:

Billing No: 95560

Interface Code: M9070 Not orderable by client; Reflex only for M83092, M83093, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
9070A	COAG FACTOR VIII ACTIVITY ASSAY	RES	N		3209-4

Reptilase Time (Mayo RPTL) (90534)

Effective Date 12/1/2012

CPT(s): 85635

Expiration Date:

Billing No: 90534

Interface Code: M9078 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550L	REPTILASE TIME	RES	N	s	6683-7

Hemoglobin, Unstable (Mayo UNHB) (99531)

Effective Date 10/8/2013

CPT(s): 83068

Expiration Date:

Billing No: 99531

Interface Code: M9095 Reflex only for M84158, M81626

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81664A	HEMOGLOBIN, UNSTABLE	RES	N		4639-1

APTT Mix 1:1 (Mayo APTTM) (90531)

Effective Date 12/1/2012

CPT(s): 85732

Expiration Date:

Billing No: 90531

Interface Code: M9118 Not orderable by client; Reflex only for M83092, M83093, M83094, M83097

Result/AOE Code	Description	Type	Suppress	Units	LOINC
550E	APTT MIX 1:1	RES	N	s	5946-9

Modified Antibody ID

Effective Date 12/1/2012

CPT(s): 86870

Expiration Date:

Billing No: 10370

Interface Code: MABI Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

NLL Credit Battery

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: NCR NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTST	TEST W/ PARTIAL CREDIT	RES	N		

NLL Credit Battery 2

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: NCR2 NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTST2	TEST W/ PARTIAL CREDIT	RES	N		

NLL Credit Battery 3

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: NCR3 NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CTST3	TEST W/ PARTIAL CREDIT	RES	N		

Neutralization

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86977

Billing No: 10380

Interface Code: NEUT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NEUT	NEUTRALIZATION	RES	N		

Extra Specimen Received

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: NEXTSP

Result/AOE Code	Description	Type	Suppress	Units	LOINC	A O E Type	List Codes	List Code Descriptions
EXTSP	SPECIMEN(S) RECEIVED:	AOE	N			TEXT		
ENOTE	NOTE:	RES	N					
EXTSP	SPECIMEN(S) RECEIVED:	RES	N					
EXFAX	FAX COMMENT	RES	N					

Information

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: NINFO NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NINFO	INFORMATION:	RES	N		48767-8

P1 Type on PT

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86905

Billing No: 10320

Interface Code: P1PT Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
P1PT	P1 TYPE on PATIENT	RES	N		1291-4

Patient's ABO Group

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86900

Billing No: 10150

Interface Code: PABO Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PABO	PATIENT'S ABO GROUP	RES	N		883-9

PeG Antibody Screen, 3DR

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86850

Billing No: 10390

Interface Code: PAS Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
PAS	PeG ANTIBODY SCREEN, 3 DROPS	RES	N		890-4

Patient's Rh (D) Type

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86901

Billing No: 10200

Interface Code: PRH Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
		PRFLX			

Period and Volume

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No: 10400

Interface Code: PV Reflex ONLY for Timed Urine Chemistries; not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UVOL	URINE VOLUME	RES	N	mL	28009-9
HRS	COLLECTION PERIOD	RES	N	hrs	
START	START DATE and TIME	RES	Y		
STOP	STOP DATE and TIME	RES	Y		

dRVVT Confirmation (Quest 15111) (99202)

Effective Date 12/1/2012
Expiration Date:

CPT(s): 85597

Billing No: 99202

Interface Code: Q15111 Not orderable by client; Reflex only for Q7079

Result/AOE Code	Description	Type	Suppress	Units	LOINC
15111A	dRVVT CONFIRMATION	RES	N		52756-4

PTT-LA Screen w/ Reflex (Quest 17408)

Effective Date 6/4/2013

CPT(s):

Expiration Date:

Billing No: NA

Interface Code: Q17408 Not orderable by client; always auto order/ Reflex only for Q7079

Result/AOE Code	Description	Type	Suppress	Units	LOINC
17408A	PTT-LA SCREEN	RES	N	sec	15362-7
17408B	PTT LA SCREEN COMMENT	RES	N		

ANA, Titer and Pattern (Q18167) (99321)

Effective Date 12/1/2012

CPT(s): 86039

Expiration Date:

Billing No: 99321

Interface Code: Q18167 Not orderable by client; Reflex only test for Q249;

Result/AOE Code	Description	Type	Suppress	Units	LOINC
18167A	ANA TITER	RES	N		8061-4
18167B	ANA PATTERN	RES	N		13068-2

C-ANCA Titer (Quest 18755) (90223)

Effective Date 3/26/2013

CPT(s): 86021

Expiration Date:

Billing No: 90223

Interface Code: Q18755 Not orderable by client; Reflex only for Q70171, ANCAPN.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
18755A	C-ANCA TITER	RES	N	Titer	14277-8

P-ANCA Titer (Quest 18756) (90222)

Effective Date 3/26/2013

CPT(s): 86021

Expiration Date:

Billing No: 90222

Interface Code: Q18756 Not orderable by client; Reflex only for Q70171, ANCAPN.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
18756A	P-ANCA TITER	RES	N	Titer	14278-6

Atypical P-ANCA Titer (Quest 18757) (90225)

Effective Date 3/26/2013

CPT(s): 86021

Expiration Date:

Billing No: 90225

Interface Code: Q18757 Not orderable by client; Reflex only for Q70171, ANCAPN.

Result/AOE Code	Description	Type	Suppress	Units	LOINC
18757A	ATYPICAL P-ANCA TITER	RES	N	Titer	49503-6

dRVVT 1:1 Mix (Quest 19791X) (99735)

Effective Date 12/1/2012

CPT(s): 85613

Expiration Date:

Billing No: 99735

Interface Code: Q19791 Not orderable by client; Reflex only for Q15111

Result/AOE Code	Description	Type	Suppress	Units	LOINC
19791A	dRVVT 1:1 MIX	RES	N		34569-4

dRVVT Screen w/ Reflex (Quest 33693)

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No: NA

Interface Code: Q33693 Not orderable by client; always auto order/ Reflex only for Q7079

Result/AOE Code	Description	Type	Suppress	Units	LOINC
33693A	dRVVT SCREEN	RES	N	sec	6303-2
33693B	dRVVT	RES	N		34569-4
33693C	dRVVT MIX INTERPRETATION	RES	N		50008-2

DFA Respiratory Viral Ag (Quest 39607) (90239)

Effective Date 4/16/2013

CPT(s): 87260, 87275, 87276, 87279 x 3, 87280

Expiration Date:

Billing No: 90239

Interface Code: Q39607 Not orderable by client; Reflex only for Q14860

Result/AOE Code	Description	Type	Suppress	Units	LOINC
39607A	RESPIRATORY DFA VIRAL AG	RES	N		12272-1

ZHepatitis B Core Antibody, IgM (Quest 4848)

Effective Date 1/21/2016

CPT(s): 86705

Expiration Date:

Billing No: 91273

Interface Code: Q4848 Reflexed by NLL, Not orderable by client

Result/AOE Code	Description	Type	Suppress	Units	LOINC
4848A	HEPATITIS B CORE IgM AB	RES	N		24113-3

Hepatitis A IgM (Quest 512) (99571) (INACTIVE)

Effective Date 5/29/2014

CPT(s): 86709

Expiration Date:

Billing No: 99571

Interface Code: Q512 Not orderable by client; Reflex only for Q35172

Result/AOE Code	Description	Type	Suppress	Units	LOINC
512B	HEPATITIS A IgM	RES	N		

Thrombin Clotting Time (Quest 883) (90318)

Effective Date 6/4/2013

CPT(s): 85670

Expiration Date:

Billing No: 90318

Interface Code: Q883 Not orderable by client; Reflex only for Q7079

Result/AOE Code	Description	Type	Suppress	Units	LOINC
883AA	THROMBIN CLOTTING TIME	RES	N	sec	

DNA(ds) Antibody, IFA Titer (Q90067) (90623)

Effective Date 11/27/2013

CPT(s): 86256

Expiration Date:

Billing No: 90623

Interface Code: Q90067 Not orderable by client; Reflex only for Q37092

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90067A	DNA AB (ds), CRITHIDIA, TITER	RES	N		

STRATIFY JCV Ab Inhibition (Quest 90259) (90437)

Effective Date 8/6/2014

CPT(s): 86711

Expiration Date:

Billing No: 90437

Interface Code: Q90259 Not orderable by client; Reflex only for Q90257, Q91665

Result/AOE Code	Description	Type	Suppress	Units	LOINC
90259A	STRATIFY JCV AB INHIBITION	RES	N		

Room Temperature Antibody Screen

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Billing No: 10400

Interface Code: RAS Not orderable by client; Reflexed by NLL,

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RAS	ROOM TEMP ANTIBODY SCREEN	RES	N		890-4

Reporting Documentation

Effective Date 5/28/2015

CPT(s):

Expiration Date:

Billing No:

Interface Code: RPDOC NLL Internal Use Only; Reflex only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
DOC1	REPORT DOCUMENTATION 1	RES	N		
DOC2	REPORT DOCUMENTATION 2	PRFLX	N		

RPR Titer

Effective Date 12/1/2012

CPT(s):

Expiration Date:

Billing No:

Interface Code: RPRT Not orderable by client; Reflexed by NLL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RPRT	RPR TITER	RES	N		31147-2

Solid Phase Antibody Screen

Effective Date 12/1/2012

CPT(s): 86850

Expiration Date:

Billing No: 10410

Interface Code: SPAS Not orderable by client: Reflexed by NLL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
SPAS	SOLID PHASE ANTIBODY SCREEN	RES	N		890-4

Current Titer of

Effective Date 12/1/2012

CPT(s): 86886

Expiration Date:

Billing No: 10120

Interface Code: TCUR Not orderable by client; Reflexed by NLL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
TCUR	CURRENT TITER OF	RES	N		50401-9

Free T4

Effective Date 12/1/2012

CPT(s): 84439

Expiration Date:

Billing No: 28660

Interface Code: THYFT4 Not orderable by client; Reflex only for THYCAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FT4	T4, FREE	RES	N		3024-7

T3, Total Cascade Panel (28560)

Effective Date 12/1/2012

CPT(s): 84480

Expiration Date:

Billing No: 28560

Interface Code: THYT3 Not orderable by client; Reflex only for THYCAS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
T3	T3, TOTAL	RES	N		3053-6

Urinalysis Microscopic Only

Effective Date 12/1/2012

CPT(s): 81015

Expiration Date:

Billing No:

Interface Code: UMIC Not orderable by client; Reflex only by NLL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
UWBC	WBC`S, UR	RES	N	/HPF	46702-7
URBC	RBC`S, UR	RES	N	/HPF	46419-8
TRIK	TRICHOMONAS, UR	PRFLX	N		5813-1
UFFAT	URINE FREE FAT, UR	PRFLX	N		2272-3
OFB	OVAL FAT BODIES, UR	PRFLX	N		25158-7
USPRM	SPERM, UR	PRFLX	N		8248-7
HYLCA	HYALINE CAST, UR	RES	N	/LPF	33223-9
UBACT	BACTERIA, UR	RES	N	/HPF	33218-9
UEP	EPITHELIAL CELLS, UR	RES	N	/HPF	33219-7
RBCCA	RBC CAST, UR	PRFLX	N		5807-3
TPCR	TRIPLE PHOSPHATE CRYSTAL, UR	PRFLX	N		5814-9
WBCCA	WBC CAST, UR	PRFLX	N		5820-6
RTECA	RENAL TUBULAR EPI CAST, UR	PRFLX	N		30079-8
WAXCA	WAXY CAST, UR	PRFLX	N		5819-8
UNIDCR	UNIDENTIFIED CRYSTALS, UR	PRFLX	N		5783-6
BACTCA	BACTERIA CAST, UR	PRFLX	N		53128-5
FATCA	FATTY CAST, UR	PRFLX	N		5789-3
UOTH	OTHER FORMED ELEMENTS, UR	PRFLX	N		58442-5
UYST	YEAST, UR	PRFLX	N		5822-2
UAMOR	AMORPHOUS, UR	PRFLX	N		8246-1
DEBRIS	NONCELLULAR DEBRIS, UR	PRFLX	N		
CIND	URINE CULTURE IF INDICATED	PRFLX	N		
CAOXCR	CALCIUM OXALATE CRYSTALS, UR	PRFLX	N		25148-8
NAUCR	SODIUM URATE CRYSTAL, UR	PRFLX	N		53129-3
GRCA	GRANULAR CAST, UR	PRFLX	N		5793-5
CAPCR	CALCIUM PHOSPHATE CRYSTAL, UR	PRFLX	N		25149-6
AMBCR	AMMONIUM BIURATE CRYSTAL, UR	PRFLX	N		25144-7
UMUC	MUCUS, UR	PRFLX	N		8247-9
UACCR	URIC ACID CRYSTALS, UR	PRFLX	N		46138-4
URBC	RBC'S, UR	PRFLX	N		46419-8
CACCR	CALCIUM CARBONATE CRYSTAL, UR	PRFLX	N		25147-0
UWBC	WBC'S, UR	PRFLX	N		46702-7
RTEP	RENAL TUBULAR EPI, UR	PRFLX	N		26052-1
CHOLCR	CHOLESTEROL CRYSTAL, UR	PRFLX	N		25153-8
HYPHAE	HYPHAE, UR	PRFLX	N		41861-6
BILCR	BILIRUBIN CRYSTAL, UR	PRFLX	N		25146-2

TYRCR	TYROSINE CRYSTAL, UR	PRFLX	N	53119-4
CYSCR	CYSTINE CRYSTAL, UR	PRFLX	N	25155-3
LEUCR	LEUCINE CRYSTAL, UR	PRFLX	N	25163-7
MICCOM	COMMENT FOR MICROSCOPIC	PRFLX	N	

Verbal Order Documentation

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: VODOC NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VOTADD	TEST ADDED:	RES	N		

Verbal Order Documentation

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: VODOC2 NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VOTAD2	TEST ADDED:	RES	N		

Verbal Order Documentation

Effective Date 12/1/2012
Expiration Date:

CPT(s):

Billing No:

Interface Code: VODOC3 NLL Internal Use Only

Result/AOE Code	Description	Type	Suppress	Units	LOINC
VOTAD3	TEST ADDED:	RES	N		

Warm Autoadsorption

Effective Date 12/1/2012
Expiration Date:

CPT(s): 86978

Billing No: 10420

Interface Code: WARMAB Not orderable by client; Reflex only by NLL

Result/AOE Code	Description	Type	Suppress	Units	LOINC
WARMA	WARM AUTOADSORPTION	RES	N		904-3

Alpha-1-Antitrypsin Phenotype (Mayo A1APR) (91141)

Effective Date 8/2/2015
Expiration Date:

CPT(s): 82104

Billing No: 91141

Interface Code: XA1APR Not orderable by client; Reflex only for XA1ALC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
A1APR1	A-1-AT PHENOTYPE	RES	N	bands	IP

ADAMTS13 Bethesda Titer (Mayo ADMBU) (91047

Effective Date 1/5/2016

CPT(s): 85335

Expiration Date:

Billing No: 91047

Interface Code: XADMBU Not Orderable by client; Refles only for XADM13

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADMBU1	ADAMTS13 BETHESDA TITER	RES	N		IP

ADAMTS13 Inhibitor Screen (Mayo ADMIS) (91145)

Effective Date 1/5/2016

CPT(s): 85335

Expiration Date:

Billing No: 91145

Interface Code: XADMIS Not Orderable by client; Reflex only for XADM13

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ADMIS1	ADAMTS13 INHIBITOR SCREEN	RES	N		IP

AMPA-R Ab CBA (Mayo AMPCS) (90910)

Effective Date 6/30/2014

CPT(s): 86255

Expiration Date:

Billing No: 90910

Interface Code: XAMPCS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMPCS1	AMPA-R AB CBA	RES	N		

AMPA-R Ab IF Titer Assay (Mayo AMPIS) (90913)

Effective Date 6/30/2014

CPT(s): 86256

Expiration Date:

Billing No: 90913

Interface Code: XAMPIS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
AMPIS1	AMPA-R AB IF TITER ASSAY	RES	N	titer	

Antinuclear Ab (Multiple) (Mayo ANAB) (99105)

Effective Date 6/25/2013

CPT(s): 86039

Expiration Date:

Billing No: 99105

Interface Code: XANAB Not orderable by client; Reflex only for XANAH2

Result/AOE Code	Description	Type	Suppress	Units	LOINC
ANAB1	ANA TITER	RES	N		5048-4
ANAB2	ANA PATTERN	RES	N		49311-4
ANAB3	ANA TITER (2)	RES	N		
ANAB4	ANA PATTERN (2)	RES	N		

CK Isoenzyme Electrophoresis (Mayo CKE) (90227)

Effective Date 4/16/2013

CPT(s): 82552

Expiration Date:

Billing No: 90227

Interface Code: XCKE Not orderable by client; Reflex only for XCKELR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
80906B	CK ISOENZYME ELECTROPHOR.	RES	N		14680-3
80906C	TOTAL CK ACTIVITY	RES	N	U/L	2157-6
80906D	MM FRACTION	RES	N	%	15049-0
80906E	MB FRACTION	RES	N	%	12187-1
80906F	BB FRACTION	RES	N	%	15048-2

dsDNA AB by Crithidia IFA, IgG (Mayo CRITH) (93668)

Effective Date 5/29/2015

CPT(s): 86255

Expiration Date:

Billing No: 93668

Interface Code: XCRITH Not orderable by client; Reflex only for M83631 and XADNAR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CRITH1	DSDNA AB BY CRITHIDIA IFA, IGG	RES	N		IP
CRITH2	CRITHIDIA INTERPRETATION	RES	N		IP

Amniotic Fluid Culture for Genetic Testing (Mayo CULAF) (99828)

Effective Date 8/2/2015

CPT(s): 88235, 88240

Expiration Date:

Billing No: 99829

Interface Code: XCULAF Not orderable by client; Reflex only for XFXS, XPWAS, XCFP, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CULAF1	CULAF RESULT SUMMARY	RES	N		IP
CULAF2	CULAF INTERPRETATION	RES	N		IP
CULAF3	CULAF RESULT	RES	N		IP
CULAF4	CULAF REASON FOR REFERRAL	RES	N		42349-1
CULAF5	CULAF SPECIMEN	RES	N		NA
CULAF6	CULAF SOURCE	RES	N		31208-2
CULAF7	CULAF METHOD	RES	N		49549-9
CULAF8	CULAF ADDITIONAL INFORMATION	RES	N		8251-1
CULAF9	CULAF RELEASED BY	RES	N		NA

Fibroblast Culture Genetic (Mayo CULFB) (99828)

Effective Date 8/2/2015

CPT(s): 88233, 88240

Expiration Date:

Billing No: 99828

Interface Code: XCULFB Not orderable by client; Reflex only for XFXS, XPWAS, XCFP, XMATCC

Result/AOE Code	Description	Type	Suppress	Units	LOINC
CULFB1	CULFB RESULT SUMMARY	RES	N		IP
CULFB2	CULFB INTERPRETATION	RES	N		IP
CULFB3	CULFB RESULT	RES	N		IP
CULFB4	CULFB REASON FOR REFERRAL	RES	N		42349-1
CULFB5	CULFB SPECIMEN	RES	N		NA
CULFB6	CULFB SOURCE	RES	N		31208-2
CULFB7	CULFB METHOD	RES	N		49549-9
CULFB8	CULFB ADDITIONAL INFORMATION	RES	N		8251-1
CULFB9	CULFB RELEASED BY	RES	N		NA

Bordetella pertussis Ab, IgA Immunoblot (Mayo FBAAI) (90452)

Effective Date 12/5/2014

CPT(s): 86615

Expiration Date:

Billing No: 90452

Interface Code: XFBAAI Not orderable by client; Reflex only for XFBPAG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FBAAI1	B PERTUSSIS AB IgA INTERP	RES	N		
FBAAI2	B PERTUSSIS IgA IMMB, PT	RES	N		
FBAAI3	B PERTUSSIS IgA IMMB, FHA	RES	N		

Bordetella pertussis AB, IgG Immunoblot (Mayo FBAGI) (93190)

Effective Date 12/5/2014

CPT(s): 86615

Expiration Date:

Billing No: 93190

Interface Code: XFBAGI Not orderable by client; Reflex only for XFBPAG

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FBAGI1	B PERTUSSIS AB IgG INTERP	RES	N		
FBAGI2	B PERTUSSIS AB IgG PT 100	RES	N		
FBAGI3	B PERTUSSIS AB IgG IMMB, PT	RES	N		
FBAGI4	B PERTUSSIS AB IgG IMMB, FHA	RES	N		

Bordetella pertussis AB, IgM Immunoblot (Mayo FBAMI) (93191)

Effective Date 4/15/2014

CPT(s): 86615

Expiration Date:

Billing No: 93191

Interface Code: XFBAMI Not orderable by client; Reflex only for XFBORD, XFBPTS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FBAMI1	B PERTUSSIS AB IgM INTERP	RES	N		
FBAMI2	B PERTUSSIS AB IgM IMMB, PT	RES	N		
FBAMI3	B PERTUSSIS AB IgM IMMB, FHA	RES	N		

MAG Antibody EIA Reflex (Mayo FMGS) (91983)

Effective Date 11/17/2015

CPT(s): 83520 x 2

Expiration Date:

Billing No: 91983

Interface Code: XFMGS Not orderable by client; Reflex only for XFMGA

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMGS1	MAG-SGPG AB IgM, EIA	RES	N		43190-8
FMGS2	MAG AB IgM, EIA	RES	N		31023-5

Mvista Histoplasma Ag, U (Mayo FMVHU) (90947)

Effective Date 8/12/2014

CPT(s): 87385

Expiration Date:

Billing No: 90947

Interface Code: XFMVHU Not orderable by client; Reflex only for XUHIST

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FMVHU1	FMVHU RESULT	RES	N	ng/mL	IP
FMVHU2	FMVHU INTERPRETATION	RES	N		IP

Fragile X Follow Up (Mayo FXFU) (91121)

Effective Date 8/2/2015

CPT(s): 81244

Expiration Date:

Billing No: 91121

Interface Code: XFXFU Not orderable by client; Reflex only for XFXS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
FXFU1	FXFU SPECIMEN	RES	N		NA
FXFU2	FXFU SPECIMEN ID	RES	N		NA
FXFU3	FXFU SOURCE	RES	N		31208-2
FXFU4	FXFU ORDER DATE	RES	N		NA
FXFU5	FXFU RESULT	RES	N		IP
FXFU6	FXFU AMENDMENT	RES	N		IP
FXFU7	FXFU REVIEWED BY	RES	N		NA
FXFU8	FXFU RELEASED DATE	RES	N		NA

GABA-B-R Ab CBA (Mayo GABCS) (90911)

Effective Date 6/30/2014

CPT(s): 86255

Expiration Date:

Billing No: 90911

Interface Code: XGABCS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GABCS1	GABA-B-R AB CBA	RES	N		

GABA-B-R IF Titer Assay (Mayo GABIS) (90914)

Effective Date 6/30/2014

CPT(s): 86256

Expiration Date:

Billing No: 90914

Interface Code: XGABIS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GABIS1	GABA-B-R IF TITER ASSAY	RES	N	titer	

Gastrin, Serum (Mayo GASTR) (91341)

Effective Date 12/1/2012

CPT(s): 82941

Expiration Date:

Billing No: 91341

Interface Code: XGASTR Not orderable; Reflex ONLY code for M83632

Result/AOE Code	Description	Type	Suppress	Units	LOINC
GASTR1	GASTRIN, S	RES	N	pg/mL	

Hepatitis C Virus Genotype Resolution (Mayo HCVGR) (91264)

Effective Date 1/11/2016

CPT(s): 87902

Expiration Date:

Billing No: 91264

Interface Code: XHCVGR

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HCVGR1	HCV GENOTYPE RESOLUTION	RES	N		IP

HIV 1/2 Ab Differentiation, S (Mayo HIVDI) (91046)

Effective Date 1/5/2016

CPT(s): 86701, 86702

Expiration Date:

Billing No: 91046

Interface Code: XHIVDI Not orderable by client. Reflex for NHIV12. This test can also reflex XHV1WB, XHIV2L

Result/AOE Code	Description	Type	Suppress	Units	LOINC
HIVDI1	HIV-1 Ab Differentiation, S	RES	N		29893-5
HIVDI2	HIV-2 Ab Differentiation, S	RES	N		30361-0

Intrinsic Factor Blocking Antibody (Mayo IFBPA) (97571)

Effective Date 12/1/2012

CPT(s): 86340

Expiration Date:

Billing No: 97571

Interface Code: XIFBPA Not orderable; Reflex only for M83632

Result/AOE Code	Description	Type	Suppress	Units	LOINC
IFBPA1	INTRINSIC FACTOR BLOCKING AB	RES	N		31444-3
IFBPA2	COMMENT	RES	N		48767-8

Methylmalonic Acid, QN (Mayo MMAPA) (92499)

Effective Date 12/1/2012

CPT(s): 83921

Expiration Date:

Billing No: 92499

Interface Code: XMMAPA Not orderable; Reflex only for M83632

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MMAPA1	METHYLMALONIC ACID, QN	RES	N	nmol/mL	

Methadone Confirmation, Urine (Mayo MSMT) (90438)

Effective Date 1/1/2015

CPT(s): 80358

Expiration Date:

Billing No: 90438

Interface Code: XMSMT Not orderable by client; Reflex only for XDMETH

Result/AOE Code	Description	Type	Suppress	Units	LOINC
MSMT1	GCMS CONFIRM, METHADONE	RES	N		16246-1
MSMT2	METHADONE	RES	N	ng/mL	16246-1
MSMT4	EDDP	RES	N	ng/mL	IP

NMDA-R Ab CBA (Mayo NMDCS) (90909)

Effective Date 6/30/2014

CPT(s): 86255

Expiration Date:

Billing No: 90909

Interface Code: XNMDCS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMDCS1	NMDA-R AB CBA	RES	N		

NMDA-R Ab IF Titer Assay (Mayo NMDIS) (90912)

Effective Date 6/30/2014

CPT(s): 86256

Expiration Date:

Billing No: 90912

Interface Code: XNMDIS Not orderable by client; Reflex only for M83380

Result/AOE Code	Description	Type	Suppress	Units	LOINC
NMDIS1	NMDA-R AB IF TITER ASSAY	RES	N	titer	

Porphyrins, Fractionation (Mayo PFP) (90688)

Effective Date 12/1/2012

CPT(s): 82492

Expiration Date:

Billing No: 90688

Interface Code: XPFP Not orderable by client; Reflex only for XPTP

Result/AOE Code	Description	Type	Suppress	Units	LOINC
81052B	PORPHYRINS, FRACT., PLASMA	RES	N		2815-9
81052C	UROPORPHYRIN	RES	N	mcg/dL	14274-5
81052D	HEPTACARBOXYL PORPHYRINS	RES	N	mcg/dL	9447-4
81052E	HEXACARBOXYL PORPHYRINS	RES	N	mcg/dL	9451-6
81052F	PENTACARBOXYL PORPHYRINS	RES	N	mcg/dL	10882-9
81052G	COPROPORPHYRIN	RES	N	mcg/dL	14157-2
81052H	PROTOPORPHYRIN	RES	N	mcg/dL	17501-8
81052I	PORPHYRINS FRACT INTERP	RES	N		
PFP1	REVIEWED BY	RES	N		

Coccidioides Ab, CF/ID (Mayo RSCOC) (90868)

Effective Date 5/6/2014

CPT(s): 86635 x 3

Expiration Date:

Billing No: 90868

Interface Code: XRSCOC Not orderable by client; Reflex only for XCOXIS

Result/AOE Code	Description	Type	Suppress	Units	LOINC
RSCOC1	COCCI AB, CF	RES	N		
RSCOC2	COCCI ID-IgG	RES	N		
RSCOC3	COCCI ID-IgM	RES	N		

Mapping 'Type' codes are defined as follows: RES=Result, AOE=Ask at Order Entry, PRFLX=Potential Reflex Res

CODE TABLE LIST:

CodeType: Fluid/Wounds

EYE	EYE
GRAF	GRAFT SITE
GEN	GENITAL
GB	GALLBLADDDER
GASTR	GASTROSTOMY
GAS	GASTRIC
FOOT	FOOT
FINGN	FINGERNAIL
LEG	LEG
FACE	FACE
HAIR	HAIR
END	ENDOMETRIUM
ENCV	ENDOCERVICAL
EMESIS	EMESIS
ELBOW	ELBOW
EAR	EAR
DUOF	DUODENAL FLUID
DRNG	DRAINAGE
DIAF	DIALYSIS FLUID
FING	FINGER
ILE	ILEOSTOMY
LABIA	LABIA
KNEE	KNEE
WRIST	WRIST
JP	JACKSON PRATT
ABD	ABDOMEN
JEJU	JEJUNAL
IVF	IV FLUID
IUD	INTRAUTERINE DEVICE
GROIN	GROIN
ILEO	ILEOSTOMY DRAINAGE
GROS	GROSHONG SITE
HYDF	HYDROCELE FLUID
HIP	HIP
HERNIA	HERNIA
HEP	HEPATIC
HEMOW	HEMODIALYSIS WATER
HEAD	HEAD
HAND	HAND
CSF	CEREBROSPINAL FLUID

INCIS	INCISION
ARM	ARM
CTIP	CATHETER TIP
BILE	BILE
BCF	BRAIN CYST FLUID
BARTC	BARTHOLIN CYST
BACK	BACK
AXIL	AXILLARY
AXI	AXILLA
ATR	ATRIUM
BLU	BLOOD UNITS
ASCT	ASCITIC FLUID
BM	BONE MARROW
APDX	APPENDIX
AORT	AORTA
ANKL	ANKLE
ANAL	ANAL
AMNF	AMNIOTIC FLUID
ADR	ADRENAL
ABSC	ABSCESS
ABDF	ABDOMINAL FLUID
ASP	ASPIRATE
CHEEK	CHEEK
JUG	JUGULAR
CORS	CORNEAL SCRAPINGS
CORN	CORNEA
CORD	CORD BLOOD
CONL	CONTACT LENS
CONJ	CONJUNCTIVAL
COLS	COLOSTOMY SITE
COLO	COLOSTOMY DRAINAGE
BIOP	BIOPSY
CHEST	CHEST
CSTF	CYST FLUID
CER	CERVICAL
CAPDS	CAPD SITE
BUTT	BUTTOCKS
BURN	BURN
BRST	BREAST
BRN	BRAIN
BONE	BONE
BOIL	BOIL
COCCYX	COCCYX
STUMP	STUMP

UT	UTERINE
SKN	SKIN
RCF	RENAL CYST FLUID
TON	TONSIL
SAC	UTERINE CUL/DE/SAC FLUID
SCROT	SCROTUM
SEM	SEMEN
SHOL	SHOULDER
SHUN	SHUNT FLUID
SIN	SINUS
SKBP	SKIN BIOPSY
LIPP	LIP
UR	URETHRAL
VAG	VAGINAL
SWGZ	SWAN GANTZ CATHETER
TONGUE	TONGUE
TOOT	TOOTH
TOEN	TOENAIL
TOE	TOE
TI	TISSUE
SPLN	SPLEEN
SYN	SYNOVIAL FLUID
STOOL	STOOL
UMBL	UMBILICUS
SUMP	SUMP DRAINAGE
SUBM	SUBMENTAL AREA
SUBD	SUBDURAL FLUID
SUBC	SUBCLAVIAN
PUMP	PUMP SPECIMEN
THF	THORACENTESIS FLUID
MOUTH	MOUTH
PTLF	PERITONEAL LAVAGE
VCSF	VENTRICULAR CSF
RECT	RECTAL SWAB
VUL	VULVA
WND	WOUND
WNDR	WOUND DRAINAGE
VC	VAGINAL-CERVICAL
MV	MITRAL VALVE
NGS	N/G SITE
MEAT	MEATUS
MAND	MANDIBLE
LYMN	LYMPH NODE
LUNG	LUNG TISSUE

LUMB	LUMBAR
LSAC	LUMBAR SAC FLUID
NAIL	NAIL
PERIN	PERINEUM
PTF	PERITONEAL FLUID
PROS	PROSTATE
PLTP	PLATELET PACKS
PLEF	PLEURAL FLUID
PLAC	PLACENTA
NECK	NECK
PILC	PILONIDAL CYST
VARE	VAGINAL-RECTAL
PERI	PERICARDIAL FLUID
PENIS	PENIS
PELV	PELVIC/PELVIS
PARF	PARACENTESIS FLUID
PANF	PANCREATIC FLUID
OVARY	OVARY

CodeType: Micro Sites

TTUB	T/TUBE
BALV	BRONCHOALVEOLAR LAVAGE
TRAC	TRACHEOSTOMY
URINEC	URINE CATHETERIZED
BBP	BRONCH BRUSH PROTECTIVE
URINE	URINE
URET	URETER
TTRA	TRANSTRACHEAL ASPIRATE
KID	KIDNEY
NARES	NARES
NASL	NASAL
NASP	NASOPHARYNGEAL
NEPH	NEPHROSTOMY
NPWASH	NASOPHARYNGEAL WASHINGS
NSG	NASOGASTRIC
ET	ENDOTRACHEAL
ESB	ESOPHAGEAL BRUSHINGS
SPASP	SPUTUM, ORAL ASPIRATION
SP	SPUTUM
BLAD	BLADDER
SPIN	SPUTUM, INDUCED
SUPA	SUPRAPUBIC ASPIRATE
BWASH	BRUSH WASHINGS
BW	BRONCHIAL WASHINGS

	TASP	TRACHEAL ASPIRATE
	BRONCB	BRONCHIAL BRUSHINGS
	THRT	THROAT SWAB
	BLD	BLOOD
	RENA	RENAL