

**METHOD AND REFERENCE  
VALUES CHANGE**

**NOTIFICATION DATE:** July 21, 2009

**EFFECTIVE DATE:** August 25, 2009

**THYROTROPIN RECEPTOR ANTIBODY, SERUM  
#81797**

**EXPLANATION:** Mayo Medical Laboratories will transition Thyrotropin Receptor Antibody, Serum (#81797) to the Roche Cobas e601 instrument, which necessitates a reference value change.

**CURRENT REFERENCE VALUES:** <16% (negative)  
>= 16% (positive)

**NEW REFERENCE VALUES:** <=1.75 IU/L

**CURRENT METHODOLOGY:** RIA Binding Inhibition Assay

**NEW METHODOLOGY:** Electrochemiluminescence Immunoassay (ECLIA)

**NOTE:** CPT codes and specimen requirements will not change for this test.

**QUESTIONS:** Contact your Mayo Medical Laboratories' Regional Manager  
Greg Renkly, Mayo Medical Laboratories' Technologist Support  
Telephone: 800-533-1710



**MAYO CLINIC**  
Mayo Medical Laboratories

# TEST DEFINITION

7/21/2009

MML NAME/ORDER CODE CROSS-REFERENCE  
 CODE NAME  
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 81797 THYROTROPIN RECEPTOR AB, S

MML		MML TEST SETUP INFORMATION				PERFORM	
ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	SITE *	
81797	6/24/2009		THYROTROPIN RECEPTOR AB, S			MCR	
			TRANSPORT TEMP : REFRIG\FROZEN OK\AMBIENT NO				
			81797 THYROTROPIN RECEPTOR AB, S				
			UNITS: IU/L				
			NO SEX				
			ALL AGES : 0-1.75		; <=1.75		
			MALE				
			ALL AGES : 0-1.75		; <=1.75		
			FEMALE				
			ALL AGES : 0-1.75		; <=1.75		

\*PERFORMING SITE LEGEND

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MCR MAYO CLINIC DPT OF LAB MED & PATHOLOGY LAB DIRECTOR: FRANKLIN R. COCKERILL, III, M.D.  
 200 FIRST STREET SW  
 ROCHESTER, MN 55905

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MML MESSAGES USED AS NORMALS  
 CODE TEXT  
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TOTAL OF 0 NORMALS CODES

\*\*\* END OF REPORT \*\*\*



## LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, EMIR IS		PATIENT NUMBER		AGE 40	SEX M	ACCESSION # G9132059
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 07/17/09 11:00 A	RECEIVED 07/17/09 11:00 A	REPORT PRINTED 07/21/09 08:35 A		SPECIMEN INFORMATION DATE OF BIRTH:		
<b>DATE</b>	<b>TIME</b>	<b>DATE</b>	<b>TIME</b>			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO		REF RANGE	PERFORM SITE *
<b>Thyrotropin Receptor Ab, S</b> <b>Thyrotropin Receptor</b> <b>Ab, S</b>		<b>&lt;1.00</b>	<b>IU/L</b>	<b>&lt;=1.75</b> <b>MCR</b>

## \* PERFORMING SITE

MCR      Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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PATIENT NAME TESTING, EMIR IS	ORDER STATUS Final	COLLECTION DATE AND TIME 07/17/09 11:00 A
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Specimen receipt and report times are in CST/CDT

REPRINT

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