

**Cell Count and Differential, Body Fluids
#8419**

EXPLANATION: Effective August 25, 2009, the cell count and differential analysis on body fluids will be performed on the Sysmex XE-5000 instrumentation. With this change, test codes 5030, Cell Count and Differential, BF, and 8307, Morphologic Review, BF, will be removed from the test set-up. File definition changes are required.

NOTE: Specimen Requirements, pricing, and CPT coding will remain unchanged.

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Julie Breider, Mayo Medical Laboratories' Technologist Support
Telephone: 800-533-1710

TEST DEFINITION

7/21/2009

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
8419 (PROFILE)			CELL COUNT, BF			
29096	6/6/2009		CELL COUNT AND DIFFERENTIAL, BF			MCR
			TRANSPORT TEMP : AMBIENT\REFRIG OK\FROZEN NO			
			792 FLUID TYPE			
			POSSIBLE RESULT VALUES INCLUDE : ABDOMINAL , CSF , LEFT KNEE SYNOVIAL , NASAL , PERITONEAL , RIGHT KNEE SYNOVIAL , SYNOVIAL , SPUTUMR			
			2457 GROSS APPEARANCE			
			POSSIBLE RESULT VALUES INCLUDE : BLOODY , CLEAR , SEROUS , YELLOW			
			2465 TOTAL NUCLEATED CELLS			
			EXPECT RESULTS OF FORM : SHOULD BE A WHOLE NUMBER UP TO 6 DIGITS OR A "<" SYMBOL.			
			POSSIBLE RESULT VALUES INCLUDE : <1			
			UNITS: /uL			
			NO SEX			
			ALL AGES :			; #N2465
			MALE			
			ALL AGES :			; #N2465
			FEMALE			
			ALL AGES :			; #N2465
			2456 ERYTHROCYTES			
			EXPECT RESULTS OF FORM : SHOULD BE A 1-7 DIGIT WHOLE NUMBER.			
			UNITS: /uL			
			2454 COMMENT			
			POSSIBLE RESULT VALUES INCLUDE : COUNT APPROXIMATE DUE TO CLOT(S) . , COUNT DONE ON TUBE 4 . , COUNT DONE ON TUBE 1 . , COUNT A .			
			(CONTINUED NEXT PAGE)			

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
8419 (CONTINUED)			2467 NEUTROPHILS			
			EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS			
			UNITS: %			

NO SEX
ALL AGES : ; #N2467
MALE
ALL AGES : ; #N2467
FEMALE
ALL AGES : ; #N2467

- - - - -
2468 LYMPHOCYTES

EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS

UNITS: %
NO SEX
ALL AGES : ; #N2468
MALE
ALL AGES : ; #N2468
FEMALE
ALL AGES : ; #N2468

- - - - -
2455 MONOCYTES/MACROPHAGES

EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS

UNITS: %
NO SEX
ALL AGES : ; #N2455
MALE
ALL AGES : ; #N2455
FEMALE
ALL AGES : ; #N2455

- - - - -
7515 EOSINOPHILS

EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS

UNITS: %

- - - - -
30664 BASOPHILS

EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS

UNITS: %

- - - - -
2469 OTHER CELLS

EXPECT RESULTS OF FORM : SHOULD BE 1-3 DIGITS

UNITS: %

- - - - -
2551 DIFF COMMENTS

POSSIBLE RESULT VALUES INCLUDE : DIFFERENTIAL DONE ON CHAMBER., NO RECOVERY ON CYTOSPIN.

29097 6/6/2009 MORPHOLOGIC REVIEW, BF

MCR

TRANSPORT TEMP : AMBIENT\REFRIG OK\FROZEN NO

2639 OTHER CELLS ARE:

- - - - -
2552 COMMENT

POSSIBLE RESULT VALUES INCLUDE : NO BLASTS OR MALIGNANT CELLS SEEN.

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(CONTINUED NEXT PAGE)

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PERFORM PRINT NORMALS (# CODED)	SITE *
8419	(CONTINUED)	2553	REVIEWED BY:			
POSSIBLE RESULT VALUES INCLUDE : #H531, #H521, #H537, #H539, #H535, #H533, #H530, #H536, #H507, #H502, #H515, #H532, #H538, TECHNOL7						

*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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*** END OF REPORT ***

CODE	TEXT
N2455	CSF: ADULT (30% +/- 15%) NEONATES (70% +/- 20%) SYNOVIAL: <70%
N2465	CSF: ADULT (0-5) NEONATE (0-30) SYNOVIAL: <150 PERITONEAL/PLEURAL/PERICAR DIAL: <500
N2467	CSF: ADULT (2% +/- 4%) NEONATES (4% +/- 4%) SYNOVIAL: <25% PERITONEAL/PLEURAL/PERICARDIAL: <25%
N2468	CSF: ADULT (60% +/- 20%) NEONATE (20% +/- 15%) SYNOVIAL: <75%

TOTAL OF 4 NORMALS CODES

*** END OF REPORT ***



LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, DERLEN IS		PATIENT NUMBER		AGE 54	SEX F	ACCESSION # G9132018
ORDERING PHYSICIAN DR OLDENBURG		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 07/16/09 06:15 P	RECEIVED	REPORT PRINTED 07/21/09 08:13 A		SPECIMEN INFORMATION DATE OF BIRTH: TESTING DERLEN		
DATE TIME	DATE TIME	DATE TIME	DATE TIME			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
Cell Count and Differential, BF			
Fluid Type			MCR
Pleural/Thoracentesis			
Gross Appearance			MCR
Cloudy			
Total Nucleated Cells	1165	/uL	MCR
-- EXPECTED VALUES --			
CSF: Adult(0-5)			
Neonate(0-30)			
Synovial: <150			
Peritoneal/Pleural/Pericardial: <500			
Neutrophils	15	%	MCR
-- EXPECTED VALUES --			
CSF: Adult(2% +/- 4%)			
Neonates(4% +/- 4%)			
Synovial: <25%			
Peritoneal/Pleural/Pericardial: <25%			
Lymphocytes	32	%	MCR
-- EXPECTED VALUES --			
CSF: Adult(60% +/- 20%)			
Neonate(20% +/- 15%)			
Synovial: <75%			
Monocytes/Macrophages	26	%	MCR
-- EXPECTED VALUES --			
CSF: Adult(30% +/- 15%)			
Neonates(70% +/- 20%)			
Synovial: <70%			
Eosinophils	5	%	MCR
Other Cells	22	%	MCR

Morphologic Review, BF

* Perform Site Legend on last page of report

PATIENT NAME TESTING, DERLEN IS	ORDER STATUS Final	COLLECTION DATE AND TIME 07/16/09 06:15 P
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Specimen receipt and report times are in CST/CDT

REPRINT

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07/21/2009 8:14AM



LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, DERLEN IS		PATIENT NUMBER		AGE 54	SEX F	ACCESSION # G9132018
ORDERING PHYSICIAN DR OLDENBURG		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 07/16/09 06:15 P	RECEIVED	REPORT PRINTED 07/21/09 08:13 A		SPECIMEN INFORMATION DATE OF BIRTH: TESTING DERLEN		
DATE TIME	DATE TIME	DATE TIME	DATE TIME			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
Other Cells Are:			MCR
Mesothelial cells			
Comment			MCR
*See Cytology report PR09-38181			
Reviewed by:	Technologist		MCR

* 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, DERLEN IS	ORDER STATUS Final	COLLECTION DATE AND TIME 07/16/09 06:15 P
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Specimen receipt and report times are in CST/CDT

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