



NEW TEST ANNOUNCEMENT

NOTIFICATION DATE: MAY 8, 2009

EFFECTIVE DATE: MAY 12, 2009

***Mycobacterium tuberculosis* Complex by Rapid PCR #88807**

USEFUL FOR: The detection of *Mycobacterium tuberculosis* complex DNA.

METHODOLOGY: Real-Time Polymerase Chain Reaction (PCR)

REFERENCE VALUES: Negative for *Mycobacterium tuberculosis* complex DNA

NOTE: This test will replace #56033, *Mycobacterium tuberculosis*, Amplified Direct test and also FOCUS test #91303, *Mycobacterium tuberculosis*, DNA PCR effective June 9, 2009.

SPECIMEN REQUIREMENTS:

Submit only 1 of the following specimens:

Respiratory Specimen

Submit 1 mL from a respiratory specimen (eg, bronchoalveolar lavage fluid, bronchial washing, sputum) in a screw-capped, sterile container refrigerated. Maintain sterility and forward promptly.

Tissue

Send fresh tissue specimen (5 mm) in a screw-capped, sterile container refrigerated. Maintain sterility and forward promptly. The high sensitivity of amplification by PCR requires the specimen to be processed in an environment in which contamination of the specimen by *Mycobacterium tuberculosis* complex DNA is not likely.

Note: A biopsy specimen of tissue fixed with formalin in a paraffin block is also acceptable.

Body Fluid or Urine

Submit 1 mL

Stool Specimen

Submit 5 grams

CPT CODE: 87556

ANALYTIC TIME: 1 DAY

LIST FEE: \$288.60

DAY(S) SET UP: MONDAY-FRIDAY

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Jeremy R. Caddell, Mayo Medical Laboratories' Technical Support
Telephone: 800-533-1710



MAYO CLINIC
Mayo Medical Laboratories

TEST DEFINITION

5/8/2009

Code Name

88807 Mtb Complex, Rapid PCR

**** End of Name to order code Report ****

MML MML Test setup information

ORDER CODE	EFF DATE	TC	TITLE	Checking Normals	Print normals (# coded)	Perform Site *
88807	5/7/2009		Mtb Complex, Rapid PCR			MCR
			Transport temp : Refrig\Ambient OK\Frozen NO			
			56043 Specimen Source			
			56044 Result			
			56045 Special Information			
			56046 Report Status			

*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

Total of 0 normals codes

*** End of Report ***



LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, ANN		PATIENT NUMBER		AGE 40	SEX F	ACCESSION # G9126425
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 05/06/09 08:30 A	RECEIVED 05/07/09 01:32 P	REPORT PRINTED 05/08/09 10:55 A		SPECIMEN INFORMATION DATE OF BIRTH:		
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 *
Mtb Complex, Rapid PCR			
Specimen Source			MCR
BRONCHIAL WASHINGS			
Result			MCR
Negative			
Report Status			MCR
FINAL 05072009			

* 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, ANN	ORDER STATUS Final	COLLECTION DATE AND TIME 05/06/09 08:30 A
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