95536.2883 LG Health Laboratories Reflex Test List

Copy of version 12.0 (approved and current)

Last Approval or Periodic Review Completed	1/28/2025
Next Periodic Review Needed On or Before	1/28/2026
Effective Date	1/27/2025

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Location	Test Directory
Organization	LGH Main Lab - Lancaster General Hospital

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Approval and Periodic Review Signatures

Type	Description	Date	Version	Performed By	Notes
Approval	Lab Director	1/28/2025	12.0	Dr. Bruce King Bruce King	
Approval	Manager Laboratory Operations	1/27/2025	12.0	Lori L. Topper Lori Topper	

Signatures from prior revisions are not listed.

Version History

Version	Status	Type	Date Added	Date Effective	Date Retired
12.0	Approved and Current	Major revision	1/27/2025	1/27/2025	Indefinite

Linked Documents

- 95536.2882 LG Health Laboratories Reflex Test Policy

TITLE: LG HEALTH LABORATORIES REFLEX TEST LIST

ORDERED TEST w/CPT CODE	CRITERIA FOR REFLEX TEST(S)	TEST(S) ORDERED BY REFLEX RULES	CPT CODE(S) For REFLEX TESTS
BLOOD BANK			
ABORH 86900 86901 86850	ABO discrepancy	Antibody ID Adsorption Genotyping	86850 ABSC 86870 Ab ID 81403
	D Typing discrepancy/ Weak D Test	DAT Elution Genotyping	86880 DAT 86860 Elution 81403
	Two Blood Types not on file	ABO Type Confirmation	86900, 86901 ABDC
Antibody Screen 86850	Positive antibody screen	Antibody ID Patient Antigen typing DAT Elution Adsorption Antibody Titer Genotype ABSCP (PEG) ABSCA (Albumin)	CPT Codes vary depending on additional required testing: 86870, 86886, 86905, 86880, 86860, 86977 81403
	Pregnant + ABSC	Antibody Titer	
DAT	Positive	IgG DAT, C3 DAT Elution	86880 86860
Type and Screen	ABO discrepancy Positive Antibody Screen	Antibody ID Patient antigen typing DAT Elution Adsorption Crossmatch 2 units Antigen typing units Complete Antigen Phenotype or Genotype if transfused	86870 86905 multiple 86880 86860 86978 86920 X 2 86922 X 2 86902 multiple
	Anti-CD38 patient (changed from Dara patient)	Complete Antigen Phenotype or Genotype if recently transfused DTT	86906 86905 multiple 81479 81403 86975
Post-Partum or Bleeding Episode RhIG Evaluation	Positive Fetal screen	Fetal Hemoglobin-Kleihauer Betke	85460
	Positive Antibody Screen	Antibody ID	86850

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Cord Blood Hold	Mother ABO type "O" or Rh negative, Mother with positive antibody screen	Cord Blood Evaluation	No CPT codes or billing
Cord Blood Evaluation	Positive DAT Eluate Rh Negative	Bilirubin	82274 86860
	Rh Negative	Weak D test	86901
	Rh Negative mother delivered Rh Positive infant	RhIG Evaluation on Mother	86850 86900 86901
Crossmatch/Ab Screen Positive	Incompatible Units	Antibody ID Antigen typing of units	86870 86902 multiple
TRXN	Positive antibody screen on Post sample	Antibody ID Antigen typing of patient Antigen typing or unit Pathologist Interpretation	86870 86905 multiple 86902 multiple 86078
	Positive DAT	Elution	86860
Antibody Titer	Positive Antibody Screen	Antibody ID Antibody Titer	86870 86886
HLA Type			81373, 81372, or 81376
HLA Antibody Screen	Positive HLA screen	HLA antibody ID	86828
CHEMISTRY			
Lipid Panel 80061	Triglyceride > 800	LDLD	83722
Urine Tox Screen with Confirmation	Positive	Individual specific tests	Amphetamine-80359, 80324 Benzo-80346 Barbiturate- 80345 Opiate- 80361, 80365 Marijuana- 80349 Cocaine – 80353 PCP – 83992 Methadone-30358 Fentanyl- 80307

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			Buprenorphine-30348
Thyroid Disease Screening Panel	Increased or Decreased TSH	FT4, TT3, TPO Ab	84439
TSH With Reflex FT4 (84443)	Increased or Decreased TSH	FT4	84439
Indirect Bilirubin	If BILIT and BILID are ordered together, the indirect bili will be calculated	BILII	No charge
CMP, BMP, K or PLK	Hemolyzed Flag	KREP or PKREP (Inpatients only)	No charge
Vitamin B12 82607	145-179 pg/mL	MMA (Methylmalonic Acid, Quant)	83921
Glucose Tolerance – physician orders full tolerance, lab orders fasting and if all criteria are met, hourly tests are reflexed			
IMMUNOLOGY			
HBSAG 87340	Repeatedly Reactive	BSAG	87340
HCVAB 86803	Reactive	HCVQT	87522
HIV Ag/Ab Screen 87389	Reactive	HIVDF	86701
HIVDF 86701	HIV Ag/Ab Screen is Reactive and HIVDF is Non-Reactive or Indeterminate	HIV1R	87536
Lyme Total Abs (IgG, IgM) (86618)	≥0.90	Immunoblot	86617 X2
Syphilis: Treponemal Antibody Total (86592)	≥0.90	RPRSC	86593
HEMATOLOGY			
CBCD (85025) & WBCD (85007)& ANCBC (85027)		Manual Differential	No charge for Diff
CBC (85027) , CBCD (85025), WBCD (85007), ANCBC (85027), PLT (85409)	Fragment? Flag	IPF	85055

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Mono Screen – MSEBV reflex panel only (86308)		EBV	86664, 86663, 86665
PSMR, PSBM, Or FCI	No CBCD in last 24 hours	CBCD	85025
Flow Cytometry 88184	If additional markers are needed	Flow Cyto Each AddL Marker	88185
COAGULATION			
Inhibitor 85732, Mixing Study	Increased PT and/or PTT	If PTI is + charges 2 additional 85610. If PTT is + charges 2 additional 85730	85610 (PT/INR) 85730 (PTT)
Lupus Panel- includes dRVVT screen (85613) and PTT LA (85613, 85730)	If dRVVT screen ratio is elevated, confirmation and mixing studies are reflexed.	dRVVT Screen Mix, dRVVT Confirm, dRVVT Confirm Mix	85613 (screen) 85597 (confirm)
URINALYSIS			
UA 81003	Leukocytes Esterase: trace to positive Blood: trace to positive Protein:>100mg/dL Nitrite: trace to positive Gross discoloration Specimen is not clear	Microscopic	No charge
UAMCI 81001	>10 WBC/HPF	Urine Culture	87088
MICROBIOLOGY			
C Diff PCR 87493	Positive	C Diff EIA	87449 and 87324 (No charge)
Soft Tissue (87640 and 87641)	Positive or Negative	Wound Culture	87070
Bacterial Stool PCR STOEN 87506	Positive for Salmonella, Shigella, E. coli (STEC), Vibrio, or Yersinia enterolitica	MISCM	(No charge by PA DOH)
RPRSC (86592)	Reactive	Titer	86593
RPRSC (86592)	Non-Reactive	TPPA	86870
RPRN (86592)	Reactive	Titer	86593
SENDOUTS (Referral Labs)			

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ADAMTS13 Activity (85397)	≤0.30 IU/mL	Inhibitor	85335
ANA Screen (86038)	Positive	Titer and Pattern	86039
ANCA Screen	Positive	Titer	86037
Anti dsDNA Ab-DSDSC (86225)	Positive	Titer	86256
Bartonella Species Antibodies (86611 X4)	Positive	Titer	86611
Celiac Disease Comprehensive Panel (86364, 82784)	Detected	Titer	86231 and/or 86364, 86258
Childhood Allergy Profile (82785, 86003 X16)	≥0.10 kU/L	Component Panel(s)	86008
Dabigatran (80299)	<45 ng/mL	Thrombin Clotting Time	85670
Endomysial Ab Screen IgA (86231)	Positive	Titer	86231
Epidermal Abs (86255 X2)	Positive	Titer	86256
Food Allergy Profile 86003 X15)	≥0.10 kU/L	Component Panel(s)	86008
Heparin-Induced Platelet Ab (86022)	Positive	Serotonin Release Assay	86022
Hepatitis A Ab (86708)	Reactive	Hepatitis A IgM Ab	86709
Hepatitis Panel, Acute (80074)	Positive	Hepatitis B Surface Ag Confirmation Hepatitis C PCR	87341 87522
HSV Culture (87255)	Positive	Typing	87140
HPV mRNA E6/E7 (87624)	Detected	HPV Genotypes	87625
HPV mRNA E6/E7, Post-Hysterectomy (87624)	Detected	HPV Genotypes	87625
HTLV-I/II Ab (86790)	Reactive	Confirmatory Assay	86689
Hu, Yo, and Ri Ab (90138)	Positive	Western Blot, Titer	84181, 86256

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Myelin Associated Glycoprotein Ab (84181)	Positive	MAG-SGPG Ab MAG Ab	83520 83520
Protein Electrophoresis, Serum (84155, 84165)	Detected	Immunofixation	86334
Q Fever Ab (IgG, IgM) (86638 X4)	Positive	Titer(s)	86638
Rheumatoid Factor, Synovial Fluid (86430)	Positive	Titer	86431
Rickettsia Ab Panel (86757 X4)	Detected	Titer(s)	86757
Russell Viper Venom Time (85613)	>45 seconds	dRVVT Confirm	85597
Stratify JCV Ab (86711)	Inclusive	Ab Inhibition Assay	86711
Striated Muscle Ab (86255)	Positive	Titer	86256
Viral Respiratory Rapid Culture (87254)	Positive	Identification	87140 X7
Yo Ab Screen (86255)	Positive	Western Blot, Titer	84181, 86256
Jak2 (81270)	Positive	Exon	81403
POINT OF CARE TESTING			
PTBD (85601)	INR ≥ 3.5	PT/INR	85610
UPRGI-EMD only (81025)	Invalid	Pregnancy Test, serum-Qual (Rad/OR only)	84703
UAPOC (81003)	Nitrite- Positive Leukocyte Esterase- Trace to Large Blood- Trace to Large Protein- >300 mg/dL Bilirubin- Small to Large	UMICR	No charge
UMICR	>10 WBC/HPF	Urine Culture	87088