ALLINA HEALTH LABORATORY

Memo

To: Allina Health Laboratory outreach clients

From: Allina Health Laboratory outreach services

Date: January 3, 2023

Re: Major Roche chemistry platform changes

Effective Tuesday, 1/3/2023 at 05:00 am, Allina Health Central lab will go live with new chemistry analyzers that will impact testing performed at Abbott Northwestern Hospital.

Be aware of the following changes (click on links to jump to section)

Troponin test changes:

The Abbott Northwestern Allina Health Central Laboratory in Minneapolis will be transitioning from a contemporary Troponin I assay to a high sensitivity Troponin T assay (hs cTNT).

- The Troponin T (hs) – Ambulatory assay (14933/LAB14933) is not a stat test and if a patient is experiencing symptoms, they need to be sent to the nearest Hospital Emergency room.
- Review the test information in the Allina Health Laboratory test catalog and be aware of reference range changes when evaluating results.
- Refer to the Chemistry Analyzer Replacement Project timeline that will be updated as sites in the system transition.

BNP test changes:

Effective January 3, 2023, the Pro-BNP assay (4095/LAB4095) will replace the current BNP assay (5531/LAB5531) for specimens submitted to Allina Health Central Laboratory in Minneapolis/Abbott Northwestern Hospital.

- Measured concentrations of Pro-BNP are higher due to its longer half-life.
- Pro-BNP will now be collected in a light green Li Hep PST.

More information on specimen requirements, reference ranges, and clinical indications can be found in the Allina Health Laboratory test catalog.

Tests changing permanently to send outs:

Effective January 3, 2023, Allina Health Laboratory will permanently refer testing out for the following assays:

Test Name	Current Order Code	New Order Code
THYROGLOBULIN TUMOR MARKER	LAB429	LAB14709
THYROGLOBULIN ANTIBODY	LAB1654	LAB14687
CYCLOSPORINE	LAB564	LAB14587

New reference ranges:

Tests performed on the new Roche instrumentation will have different reference ranges than the tests performed on the prior instrumentation.

- Pay attention to the reference range when you interpret each instance of testing and note that flagging may be different due to reference range differences.
- As this is a phased roll-out of the Roche instruments, patients at hospitals other than ANW will have testing that continues to be performed on the old instruments. Again, pay attention to the reference range when you interpret each instance of testing.

Biotin Interference

Allina Health Laboratory's new chemistry analyzer platform has several tests susceptible to biotin interference. On January 3, 2023, if the results for one of the tests listed below is discordant with the clinical picture, high dose biotin interference should be excluded by retesting after avoiding supplements for one week.

Order code	Test (Endocrine highlighted)	Biotin Direction of Interference
LAB20	AFP α1-fetoprotein	Decrease
LAB294	Cancer Antigen 125	Decrease
LAB3551	Cancer Antigen 15-3	Decrease
LAB259	Cancer Antigen 19-9	Decrease
LAB664	Carcinoembryonic Antigen (CEA)	Decrease
LAB8813	Cortisol	Increase
LAB265	C-Peptide	Decrease
LAB2070	Creatine Kinase-MB	Decrease
LAB690	HCG + β-subunit	Decrease
LAB141	Insulin	Decrease
LAB2439	Tacrolimus whole blood	Increase
LAB4784	Thyroperoxidase Antibodies	Increase

The assays affected by biotin, listed in this table, will have result comments attached as a reminder and is reported below as:

Large doses of biotin (10 mg or more per day) may cause clinically significant interference with this test. If interference is suspected, it is strongly recommended that biotin is discontinued for at least one week prior to retesting.

All patients should be routinely instructed to not take any supplements or multivitamins at least 12 hours prior to an office visit in case a blood draw is needed. Patients may not know whether a supplement contains biotin, so avoiding any supplements is recommended to prevent interference.

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Tumor Marker Re-baselining

If tumor marker tests were used for monitoring before January 3, 2023, patients will need to be re-baselined on the new method. Affected testing is listed in the following table.

Test (Endocrine highlighted)	Order Code
AFP (α1-fetoprotein)	LAB20
Cancer Antigen 125 (CA 125)	LAB294
Cancer Antigen 15-3 (CA 15-3)	LAB3551
Cancer Antigen 19-9 (CA 19-9	LAB259
Carcinoembryonic Antigen (CEA)	LAB664

A result comment will attach to the tests as a reminder and state “This test method changed on 1/3/2023. If this test is ordered for serial monitoring, re-baselining is recommended. Re-baselining consists of two (2) measurements, collected 3-6 weeks apart.”

In order to help facilitate the re-baselining transition, Allina Health Laboratories will perform a second tumor marker assay by the new method (Roche) at no charge.

To credit the repeat tumor marker testing, please complete a Re-Baselining of tumor markers credit request form found on the Allina Health Laboratory test catalog website.

Please note:
At this time, PSA testing is not included in this list of tests. However, when testing for this assay resumes at Allina Health Laboratory, this will be included, and communication will be provided.

Changes to the laboratory phone call list:

Effective January 3, 2023, Allina Health Laboratory’s new Results that Require Action List goes into effect.

If you have any questions about this transition, please contact your Allina Health Laboratory Account Representative.

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