POWERING AFFORDABLE CARE



with Quest UrgentDx

Tests commonly ordered in urgent care centers through Quest

General health testing

Better outcomes with support for your patients throughout their healthcare journeys. With a broad and deep menu of 3,500 routine, esoteric, and genetic tests for nearly every health condition, we empower healthcare providers with the insights that help you make informed decisions for your patients. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
CBC (includes Differential and Platelets) Includes: White Blood Cell Count (937); Red Blood Cell Count (783); Hemoglobin (510); Hematocrit (509); MCV; MCH; MCHC; RDW; Platelet Count, EDTA (723); MPV; Differential (Absolute and Percent - Neutrophils, Lymphocytes, Monocytes, Eosinophils, and Basophils)	6399
Comprehensive Metabolic Panel Includes: Albumin (223); Albumin/Globulin Ratio (calculated); Alkaline Phosphatase (234); Alanine Aminotransferase (ALT)(823); Aspartate Aminotransferase (AST)(822); BUN/Creatinine Ratio (296); Calcium (303); Carbon Dioxide (310); Chloride (330); Creatinine with GFR Estimated; Globulin (calculated); Glucose (483); Potassium, Serum (733); Sodium (836); Urea Nitrogen (BUN)(294)	<u>10231</u>
Basic Metabolic Panel Includes: BUN/Creatinine Ratio (calculated) (296); Calcium (303); Carbon Dioxide (310); Chloride (330); Creatinine with GFR Estimated; Glucose (483); Potassium, Serum (733); Sodium (836); Bilirubin, Total (287); Protein, Total and Protein Electrophoresis (747); Urea Nitrogen (BUN) (294)	<u>10165</u>
Basic Metabolic Panel without Calcium Includes: BUN/Creatinine Ratio (calculated)(296); Carbon Dioxide (310); Chloride (330); Creatinine, Estimated Glomerular Filtration Rate (eGFR); Glucose (483); Potassium, Serum (733); Sodium (836)	<u>34388</u>
Vitamin B ₁₂ (Cobalamin)	<u>927</u>
Urinalysis, Macroscopic	<u>6448</u>
Urinalysis, Microscopic	<u>8563</u>
Iron, Total	<u>571</u>
Lipase	<u>606</u>
PSA, Total	<u>5363</u>
Prothrombin with INR and Partial Thromboplastin Times	<u>4914</u>
Amylase Isoenzymes Includes: Amylase (243); Pancreatic Isoenzyme; Salivary Isoenzymes (calculated)	<u>845</u>
Fecal Globin by Immnochemistry (InSure® ONE™)	<u>11290</u>
Comprehensive Hereditary Cancer Panel Multi-cancer 66 gene panel tests for variants in these genes: APC (93797); ATM (38802); AXIN2; BAP1 (38803); BARD1; BLM (38804); BMPR1A; BRCA1; BRCA2; BRIP1; CDH1 (92568); CDK4; CDKN1B; CDKN2A (p16, p14)(93939); CHEK2 (93940); DICER1; EGFR; EPCAM; FANCA; FANCC; FANCM; FH (38805); FLCN (38806); GALNT12; GREM1; HOXB13 (38807); MAX; MEN1 (93942); MET; MITF (38808); MLH1 (91460); MRE11 (MRE11A); MSH2; MSH3; MSH6 (91458); MUTYH (93944); NBN; NF1 (93941); NTHL1; PALB2 (92571); PMS2 (91457); POLD1; POLE; POT1; PTCH1; PTEN (92566); RAD50; RAD510; RECQL; RET (93796); SDHA; SDHAF2; SDHB; SDHC; SDHD; SMAD4; SMARCA4 (38809); STK11 (92565); SUFU; TMEM127; TP53 (92560); TSC1; TSC2; VHL (93943); XRCC2	<u>38600</u>
Hereditary Breast Cancer Panel Tests for variants in 16 genes predominantly associated with breast, prostate cancer, and other tissues including these genes: ATM (38802); BRCA1; BRCA2; CDH1 (92568); CHEK2 (93940); EPCAM; MLH1 (91460); MSH2, MSH6 (91458); NBN, NF1 (93941); PALB2 (92571); PMS2 (91457); PTEN (92566); STK11 (92565); TP53 (92560)	<u>38621</u>
Vascular Endothelial Growth Factor (VEGF), ELISA	<u>14512</u>
Folate, Serum	466

Endocrine testing

Insights that can help you diagnose and manage endocrine disorders. Quest Diagnostics offers an extensive menu of tests for a range of endocrine disorders. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Thyroid Stimulating Hormone (TSH)	<u>899</u>
T4 Free (FT4)	<u>866</u>
T3 Free	<u>34429</u>
FSH and LH	<u>7137</u>
Testosterone, Free (Dialysis) and Total, MS Includes: Testosterone, Total, MS (15983); Testosterone, Free (Dialysis)	<u>36170</u>
Vitamin D, 25-Hydroxy, Total, Immunoassay	<u>17306</u>

Panel components may be ordered separately.

Cardiovascular & metabolic testing

Improve clinical outcomes through early identification and intervention in patients with risk for heart disease and metabolic-associated conditions. Quest Diagnostics offers a full range of testing options to help evaluate patients' cardiovascular and metabolic risk. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Lipid Panel, Standard Includes: Cholesterol, Total (334); Triglycerides (896); HDL Cholesterol (608); LDL-Cholesterol (calculated); Cholesterol/HDL Ratio (calculated); Non-HDL Cholesterol (calculated)	<u>7600</u>
hs-CRP	<u>10124</u>
Hemoglobin A1c	<u>496</u>
Creatinine	<u>375</u>
Albumin, Random Urine with Creatinine	<u>6517</u>
Kidney Profile Includes: Creatinine (includes eGFR); Albumin, Random Urine with Creatinine (includes Albumin/Creatinine Ratio) (6517)	<u>39165</u>

Sexual health

Helping you protect the health of your patients. Our comprehensive menu provides the tests you need to diagnose your patients who present with symptoms and to deliver the highest quality of care—from testing through follow-up. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Chlamydia trachomatis RNA, TMA, Urogenital	<u>11361</u>
Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital Includes: Chlamydia trachomatis RNA, TMA, Urogenital (11361); Neisseria gonorrhoeae RNA, TMA, Urogenital (11362)	<u>11363</u>
Neisseria gonorrhoeae RNA, TMA, Urogenital	<u>11362</u>
Herpes Simplex Virus 1 and 2 (IgG), with Reflex to HSV-2 Inhibition Includes: If Herpes Simplex Virus 2 (IgG) is >1.09, then HSV-2 Inhibition Study will be performed at an additional charge (CPT code(s): 86696).	<u>17169</u>
Sexually Transmitted Infections (STIs) Cervicitis Panel Includes: Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363); SureSwab®, Trichomonas vaginalis RNA, Qualitative, TMA (19550); Mycoplasma genitalium, rRNA, TMA (91475)	<u>36962</u>
Sexually Transmitted Infections (STIs) Male Urethritis Panel Includes: Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363); Trichomonas vaginalis RNA, Qualitative, TMA, Males (90801); Mycoplasma genitalium, rRNA, TMA (91475)	<u>36964</u>
Sexually Transmitted Infections (STIs) Pelvic Inflammatory Disease (PID) Panel Includes: Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363); SureSwab®, Trichomonas vaginalis RNA, Qualitative, TMA (19550); Mycoplasma genitalium, rRNA, TMA (91475)	<u>36965</u>
SureSwab® Advanced Bacterial Vaginosis (BV), CT/NG, TMA Includes: SureSwab® Advanced Bacterial Vaginosis (BV), TMA (10016); Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363)	<u>10123</u>
SureSwab® Advanced Bacterial Vaginosis (BV), TMA	<u>10016</u>
SureSwab® Advanced <i>Candida</i> Vaginitis (CV), TMA	<u>10121</u>
SureSwab® Advanced Candida Vaginitis (CV)/Trichomonas vaginalis (TV), TMA Includes: SureSwab® Advanced Candida Vaginitis (CV), TMA (10121); Trichomonas vaginalis (TV), TMA	<u>10029</u>
SureSwab® Advanced Vaginitis Plus, TMA Includes: SureSwab® Advanced Bacterial Vaginosis (BV), TMA (10016); SureSwab® Advanced Candida Vaginitis (CV), TMA (10121); Trichomonas vaginalis (TV), TMA; Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363)	<u>10120</u>
SureSwab® Advanced Vaginitis, TMA Includes: SureSwab® Advanced Bacterial Vaginosis (BV), TMA (10016); SureSwab® Advanced Candida Vaginitis (CV), TMA (10121); Trichomonas vaginalis (TV), TMA	<u>10119</u>
SureSwab®, CT/NG, T. vaginalis Includes: Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital (11363); SureSwab®, Trichomonas vaginalis RNA, Qualitative, TMA (19550)	<u>16492</u>
SureSwab®, Herpes Simplex Virus, Type 1 and 2 mRNA,TMA	90570
Mycoplasma genitalium, rRNA, TMA	<u>91475</u>
Trichomonas vaginalis RNA, Qualitative, TMA, Males	90801
Trichomonas vaginalis RNA, Qualitative, TMA, Pap Vial	90521
Rapid Plasma Reagin (RPR) (Diagnosis) with Reflex to Titer and Confirmatory Testing Includes: If RPR screen is reactive, RPR Titer and Fluorescent Treponemal Antibody (FTA) Confirmatory testing will be performed at an additional charge (CPT code(s): 86593, 86780).	<u>36126</u>



Women's health—well visits

Screening for every woman, at every age. A well-woman visit provides an excellent opportunity to counsel your patients about staying engaged in their own health, maintaining a healthy lifestyle, and minimizing their risks. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Chlamydia trachomatis RNA, TMA, Urogenital	<u>11361</u>
Chlamydia/Neisseria gonorrhoeae RNA, TMA, Urogenital Includes: Chlamydia trachomatis RNA, TMA, Urogenital (11361); Neisseria gonorrhoeae RNA, TMA, Urogenital (11362)	<u>11363</u>
Neisseria gonorrhoeae RNA, TMA, Urogenital	<u>11362</u>
SureSwab®, Trichomonas vaginalis RNA, Qualitative, TMA	<u>19550</u>
ThinPrep® Imaging System Pap	<u>58315</u>
ThinPrep® Pap Includes: Pap results requiring physician interpretation will be performed at an additional charge (CPT Code(s): 88141; HCPCS: G0124)	<u>35455</u>

Panel components may be ordered separately.

Women's health-well visits-Smart Codes

Simplified screening for cervical cancer and sexually transmitted infections. Our age-based Smart Codes use a patient's age and risk factors to simplify the ordering process for appropriate guideline-based screening for your patients. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Image-Guided Papa with Age-Based Screening Protocols Includes: Ages 21-24: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) will also be performed (CPT code(s): 87491, 87591). Ages 25-29: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Ages 30-65: Image-Guided Pap and HPV mRNA (Pap and HPV together as co-testing). If the Pap result is negative but the HPV mRNA screen is positive (detected), Genotyping for HPV mRNA 16, 18/45 will be performed at an additional charge (CPT code(s): 87625). Pap results requiring physician interpretation will be performed at an additional charge (CPT code(s): 88141; HCPCS: G0124).	<u>91384</u>
Image-Guided Papa with Age-Based Screening with CT/NG (high risk for STIs) Includes: Ages 21-24: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Additionally, testing for Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) will also be performed (CPT code(s): 87491, 87591). Ages 25-29: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Additionally, testing for Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) will also be performed (CPT code(s): 87491, 87591). Ages 30-65: Image-Guided Pap and HPV mRNA (Pap and HPV together as co-testing). If the Pap result is negative but the HPV mRNA screen is positive (detected), Genotyping for HPV mRNA 16, 18/45 will be performed. Additionally, testing for Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) will also be performed (CPT code(s): 87491, 87591). Pap results requiring physician interpretation will be performed at an additional charge (CPT Code(s): 88141; HCPCS: G0124).	<u>91385</u>
Image-Guided Pap ^a with Age-Based Screening with CT/NG, <i>Trichomonas</i> (high risk for STIs) Includes: Ages 21-24: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) (CPT code(s): 87491, 87591), and <i>Trichomonas vaginalis</i> , Qualitative TMA, Pap Vial (90521)(CPT code(s): 87661) will also be performed. Ages 25-29: Image-Guided Pap. If the Pap result is ASC-US then the HPV mRNA assay (90887) will be performed at an additional charge (CPT code(s): 87624). Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) (CPT code(s): 87491, 87591), and <i>Trichomonas vaginalis</i> , Qualitative TMA, Pap Vial (90521)(CPT code(s): 87661) will also be performed. Ages 30-65: Image-Guided Pap and HPV mRNA (Pap and HPV together as co-testing). If the Pap result is negative and the HPV mRNA screen (CPT code(s): 87624) is positive (detected), then HPV mRNA Genotypes 16, 18/45 will be performed at an additional charge (CPT code(s): 87625). Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363) (CPT code(s): 87691), and <i>Trichomonas vaginalis</i> , Qualitative TMA, Pap Vial (90521)(CPT code(s): 87661) will also be performed. Pap results requiring physician interpretation will be performed at an additional charge (CPT Code(s): 8141; HCPCS: G0124).	<u>91386</u>

Panel components may be ordered separately.

HPV mRNA assay (90887); Chlamydia trachomatis (CT)/Neisseria gonorrhoeae (NG) RNA, TMA (11363); HPV mRNA Genotypes 16, 18/45 (90942); Trichomonas vaginalis, Qualitative TMA, Pap Vial (90521)

Quest Diagnostics Smart Codes may not represent all of the possible screening options in published guidelines. Please contact your Quest Diagnostics representative for information on additional Pap and HPV testing options from Quest.

For all 3 Smart Codes, if a patient is over the age of 65: Screening should be discontinued if patient has had adequate negative prior screening results and no history of CIN 2+.

 $Recommend \ continuing \ age-based \ screening \ for \ >= 20 \ years \ in \ those \ patients \ with \ a \ history \ of \ CIN \ 2, \ CIN \ 3, \ or \ adenocarcinoma \ in \ situ.$

- ^a ACOG recommendations do not specify a particular type of Pap test. Both imaged and nonimaged Pap tests are acceptable under the recommendations. Information on nonimaged Pap tests can be found at QuestDiagnostics.com/TestDirectory
- b Defined as 3 consecutive negative Paps or 2 consecutive negative co-tests within the past 10 years, with the most recent test occurring within the past 5 years.

Infectious disease and immunology (IDI) testing

A comprehensive test menu for a wide range of diseases. Our powerful combination of responsive turnaround and specialized technologies for advanced immunology and infectious disease testing help inform and empower earlier interventions. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
SARS-CoV-2 (COVID-19) testing	
SARS-CoV-2 RNA (COVID-19), Qualitative NAAT	<u>39448</u>
SARS-CoV-2 RNA (COVID-19) and Influenza A and B, Qualitative NAAT ncludes: SARS-CoV-2 RNA (COVID-19), Qualitative NAAT (39448); Influenza A and B, RNA Qualitative Real-Time PCR (16086)	<u>31688</u>
SARS-CoV-2 RNA (COVID-19) and Respiratory Viral Panel, Qualitative NAAT ncludes: SARS-CoV-2 RNA (COVID-19), Qualitative NAAT (39448); Respiratory Viral Panel (95512). Respiratory Viral Panel (95512) includes: Adenovirus DNA, Qualitative, Real-Time PCR (16046); Human Metapneumovirus RNA, Qualitative, Real-Time PCR (40034); Influenza A and B, RNA, Qualitative Real-Time PCR (16086); nfluenza A and B Virus with Subtyping, Real-Time PCR (91335); Parainfluenza Virus Antigen Detection, DFA (39494); Rhinovirus/Enterovirus; RSV RNA, Qualitative Real-Time PCR (16047).	<u>31686</u>
SARS-CoV-2 (RNA) COVID-19 and Respiratory Pathogen Panel, Qualitative NAAT noludes: SARS-CoV-2 RNA (COVID-19), Qualitative NAAT (39448); Respiratory Pathogen Panel (37444). Respiratory Pathogen Panel (37444) includes: Adenovirus NA, Qualitative, Real-Time PCR (16046); Chlamydophila pneumonie; Coronavirus 229E; Coronavirus 0C43; Coronavirus NL63; Coronavirus HKU1; Human Bocavirus; luman Metapneumovirus RNA, Qualitative, Real-Time PCR (40034); Influenza A and B, RNA, Qualitative Real-Time PCR (16086); Influenza A and B Virus with subtyping, Real-Time PCR (91335); Mycoplasma pneumoniae (659); Parainfluenza Virus (Types 1, 2, 3, and 4) RNA, Qualitative, Real-Time PCR (91228); Rhinovirus/ interovirus; RSV RNA, Qualitative Real-Time PCR (16047).	<u>31687</u>
Aicrobiology/virology	
Culture, Urine, Routine ncludes: If culture is positive, CPT code(s): 87088 (each isolate) will be added with an additional charge. Identification will be performed at an additional charge (CPT code(s): 87147 or 87147 or 87147 or 87149). Antibiotic susceptibilities are only performed when appropriate (CPT code(s): 87181 or 87184 or 87185 or 87186).	<u>395</u>
Streptococcus Group A Culture ncludes: If culture is positive, identification will be performed at an additional charge, (CPT code(s): 87077 or 87140 or 87143 or 87147 or 87149). Antibiotic susceptibilities are only performed when appropriate (CPT code(s): 87181 or 87185 or 87185).	<u>4485</u>
Culture, Throat ncludes: If culture is positive, identification will be performed at an additional charge (CPT code(s): 87077 or 87140 or 87143 or 87147 or 87149). Antibiotic usceptibilities are only performed when appropriate (CPT code(s): 87181 or 87184 or 87185 or 87186).	<u>394</u>
Culture, Aerobic and Anaerobic noludes: Culture, Aerobic Bacteria (4550); Culture, Anaerobic Bacteria with Gram Stain (18881). If culture is positive, identification will be performed at an additional charge (CPT code(s): 87076 and/or 87077 or 87140 or 87143 or 87147 or 87149). Antibiotic susceptibilities are only performed when appropriate (CPT code(s): 87181 or 87185 or 87186).	<u>4446</u>
aricella-Zoster Virus, Rapid Method, Culture	<u>2691</u>
lerpes Simplex Virus Culture	<u> 2692</u>
'iral Respiratory, Rapid Culture with Reflex ncludes: If Viral Respiratory, Rapid Culture Screen is Positive, then Rapid Respiratory Viruses identification will be performed at an additional charge (CPT codes(s): 7140 x7)	<u>14867</u>
Salmonella/Shigella Cult, Campy EIA and Shiga Toxin reflex E.coli 0157 Cult ncludes: Shiga Toxins, EIA with Reflex to E. coli 0157, Culture (30264); Salmonella and Shigella, Culture (10019); Campylobacter species Antigen, EIA (16302). Shiga oxins, EIA with Reflex to E. coli 0157, Culture: If Shiga Toxin, EIA is Detected, then Escherichia coli 0157, Culture (8631) will be performed at an additional charge (CPT ode(s): 87046). Salmonella and Shigella, Culture: If culture is "Isolated", then identification will be performed at an additional charge (CPT code(s): 87077and/or 87140 or 87149). Antibiotic susceptibilities are only performed when appropriate (CPT code(s): 87181 or 87185 or 87185).	<u>32114</u>
Ova and Parasites, Concentrate and Permanent Smear ncludes: Ova and Parasite Concentrate Result; Trichrome Result	<u>681</u>
Ova and Parasites with Giardia Antigen ncludes: Ova and Parasites, Concentrate and Permanent Smear (681); Giardia Antigen, EIA, Stool (8625)	<u>1748</u>
ntimicrobial Susceptibility, Anaerobic Bacteria, 1 Drug, MIC	90276
ntimicrobial Susceptibility, Anaerobic Bacteria, 2 Drug, MIC	90278
ntimicrobial Susceptibility, Anaerobic Bacteria, 3 Drug, MIC	90279
ntimicrobial Susceptibility Panel, Anaerobic Bacteria, MIC (Gradient) ncludes: Ampicillin/Sulbactam; Clindamycin; Imipenem; Meropenem; Metronidazole; Penicillin	<u>70242</u>
Susceptibility Panel, Aerobic Bacterium	<u>6641</u>
Nerobic Bacterium Identification and Susceptibility	<u>392</u>

Infectious disease and immunology (IDI) testing continued

	Test code
HIV and hepatitis screening and care	
HIV-1/2 Antigen and Antibodies, Fourth Generation, with Reflexes Includes: If HIV Antigen and Antibody, 4th Generation Screen is Repeatedly Reactive, then HIV-1/2 Antibody Differentiation will be performed at an additional charge (CPT code(s): 86701, 86702). If HIV-1/2 Antibody Differentiation is Indeterminate or Negative, then HIV-1 RNA, Qualitative Real-Time PCR (16185) will be performed at an additional charge (CPT code(s): 87535).	<u>91431</u>
Hepatitis A IgM Antibody	<u>512</u>
Hepatitis C Antibody with Reflex to HCV, RNA, Quantitative, Real-Time PCR Includes: If Hepatitis C Antibody is reactive, then Hepatitis C Viral RNA, Quantitative, Real-Time PCR (35645) will be performed at an additional charge (CPT code(s): 87522).	<u>8472</u>
Hepatitis B Surface Antigen with Reflex Confirmation Includes: Positive samples will be confirmed based on the manufacturer's FDA approved recommendations at an additional charge (CPT code(s): 87341).	<u>498</u>
Hepatitis B Core Antibody (IgM)	<u>4848</u>
Hepatitis B Core Antibody, Total	<u>501</u>
HBV Screen Panel with Reflexes Includes: Interpretation; Hepatitis B Surface Antigen with Reflex Confirmation (498); Hepatitis B Core Antibody, Total, with Reflex to IgM (37676); Hepatitis B Surface Antibody, Quantitative (499). Positive Hepatitis B Surface Antigen samples will be confirmed based on the manufacturer's FDA approved recommendations at an additional charge (CPT code(s): 87341). If Hepatitis B Core Antibody Total is reactive, then Hepatitis B Core IgM Antibody (4848) will be performed at an additional charge (CPT code(s): 86705).	<u>39170</u>
	Test code
Allergy testing (childhood)	
Childhood and Tree Nut Allergy Panel with Reflex to Components Includes: IgE allergy testing for: Almond (f20) (2820); Alternaria alternata (m6) (2706); Brazil Nut (f18) (2818); Cashew Nut (f202) (2608); Cat Dander (e1) (2601); Cladosporium herbarum (m2) (2702); Cockroach (i6) (2736); Codfish (f3) (2803); Cow's Milk (f2) (2802); Dermatophagoides farinae (d2) (2722); Dermatophagoides pteronyssinus (d1) (2721); Dog Dander (e5) (2605); Egg White (f1) (2801); Hazelnut (f17) (2817); Macadamia Nut (rf345) (38475); Mouse Urine Proteins (e72) (2658); Peanut (f13) (2813); Shrimp (f24) (2824); Soybean (f14) (2814); Walnut (f256) (3489); Wheat (f4) (2804). If Cow's Milk (f2) IgE is ≥0.10 kU/L, Milk Component Panel (91403) will be performed at an additional charge (CPT code(s): 86008 x3). Milk Component Panel includes: Alpha-lactalbumin (f76) IgE (2851); Beta-lactoglobulin (f77) IgE (2852); Casein (f78) IgE (2853). If Egg White (f1) IgE is ≥0.10 kU/L, Egg Component Panel (91372) will be performed at an additional charge (CPT code(s): 86008 x2). Egg Componet Panel includes: Ovalbumin (f232) IgE (2719); Ovomucoid (f233) IgE (3046). If Peanut (f13) IgE is ≥0.10 kU/L, Peanut Component Panel (91681) will be added at an additional charge (CPT code(s): 86008 x6). Peanut Component Panel includes: Ara h 1 (f422); Ara h 2 (f423); Ara h 3 (f424); Ara h 6 (f447); Ara h 8 (f352); Ara h 9 (f427). If Brazil Nut (f18) IgE is ≥0.10 kU/L, Brazil Nut Component Panel (94469) will be performed at an additional charge (CPT code(s): 86008). Brazil Nut Component Panel includes: Ber e1 (f354). If Walnut (f256) IgE is ≥0.10 kU/L, Walnut Component Panel (94472) will be performed at an additional charge (CPT code(s): 86008 x2). Walnut Component Panel includes: Ana o3 (f443). If Cashew Nut (f2002) IgE is ≥0.10 kU/L, Cashew Nut Component (94470) will be performed at an additional charge (CPT code(s): 86008). Cashew Nut Component Panel includes: Ana o3 (f443). If Hazelnut (f17) IgE is ≥0.10 kU/L, Hazelnut Component Panel (94476) will be perfor	<u>36766</u>
Childhood and Tree Nut Allergy Panel ncludes: IgE allergy testing for: Almond (f20) (2820); Alternaria alternata (m6) (2706); Brazil Nut (f18) (2818); Cashew Nut (f202) (2608); Cat Dander (e1) (2601); Cladosporium herbarum (m2) (2702); Cockroach (i6) (2736); Codfish (f3) (2803); Cow's Milk (f2) (2802); Dermatophagoides farinae (d2) (2722); Dermatophagoides pteronyssinus (d1) (2721); Dog Dander (e5) (2605); Egg White (f1) (2801); Hazelnut (f17) (2817); Macadamia Nut (rf345) (38475); Mouse Urine Proteins (e72) (2658); Peanut (f13) (2813); Shrimp (f24) (2824); Soybean (f14) (2814); Walnut (f256) (3849); Wheat (f4) (2804).	<u>36765</u>
Childhood Allergy (Food and Environmental) Profile with Reflexes Includes: IgE allergy testing for: Alternaria alternata (m6) (2706); Cat Dander (e1) (2601); Cladosporium herbarum (m2) (2702); Cockroach (i6) (2736); Codfish (f3) (2803); Cow's Milk (f2) (2802); Dermatophagoides farinae (d2) (2722); Dermatophagoides pteronyssinus (d1) (2721); Dog Dander (e5) (2605); Egg White (f1) (2801); Mouse Urine Proteins (e72) (2658); Peanut (f13) (2813); Shrimp (f24) (2824); Soybean (f14) (2814); Walnut (f256) (3489); Wheat (f4) (2804); Immunoglobulin E (542). If Egg White (f1) IgE is ≥0.10 kU/L, Egg Component Panel (91372) will be performed at an additional charge (CPT code(s): 86008 x2). Egg Componet Panel includes: Ovalbumin (f232) IgE (2719); Ovomucoid (f233) IgE (3046). If Cow's Milk (f2) IgE is ≥0.10 kU/L, Milk Component Panel (91403) will be performed at an additional charge (CPT code(s): 86008 x3). Milk Component Panel includes: Alpha-lactalbumin (f76) IgE (2851); Beta-lactoglobulin (f77) IgE (2852); Casein (f78) IgE (2853). If Peanut (f13) IgE is ≥0.10 kU/L, Peanut Component Panel (91681) will be added at an additional charge (CPT code(s): 86008 x6). Peanut Component Panel includes: Ara h 1 (f422), Ara h 2 (f423), Ara h 3 (f424), Ara h 6 (f447), Ara h 8 (f352) and Ara h 9 (f427).	<u>91683</u>

Infectious disease and immunology (IDI) testing continued

taran da antara da a	
lllergy testing (regular)	
Food and Tree Nut Allergy Panel with Reflex to Components ncludes: IgE allergy testing for: Almond (f20) (2820); Brazil Nut (f18) (2818); Cashew Nut (f202) (2608); Codfish (f3) (2803); Cow's Milk (f2) (2802); Egg White (f1) (2801); lazelnut (f17) (2817); Macadamia Nut (rf345) (38475); Peanut (f13) (2813); Salmon (f41) (2841); Scallop (f338) (273); Sesame Seed (f10) (2810); Shrimp (f24) (2824); loybean (f14) (2814); Tuna (f40) (2840); Walnut (f256) (3489); Wheat (f4) (2804).	
Cow's Milk (f2) gE is ≥0.10 kU/L, Milk Component Panel (91403) will be performed at an additional charge (CPT code(s): 86008 x3). Milk Component Panel includes: lpha-lactalbumin (f76) gE (2851); Beta-lactoglobulin (f77) gE (2852); Casein (f78) gE (2853). Egg White (f1) gE is ≥0.10 kU/L, Egg Component Panel (91372) will be performed at an additional charge (CPT code(s): 86008 x2). Egg Componet Panel includes: lovalbumin (f232) gE (2719); Ovomucoid (f233) gE (3046). Feanut (f13) gE is ≥0.10 kU/L, Peanut Component Panel (91681) will be added at an additional charge (CPT code(s): 86008 x6). Peanut Component Panel includes: was h 1 (f422), Ara h 2 (f423), Ara h 3 (f424), Ara h 6 (f447), Ara h 8 (f352) and Ara h 9 (f427). Fbrazil Nut (f18) gE is ≥0.10 kU/L, Brazil Nut Component (94469) will be performed at an additional charge (CPT code(s): 86008). Brazil Nut Component Panel includes: Ber e1 (f354). Walnut (f256) gE is ≥0.10 kU/L, Walnut Component Panel (94472) will be performed at an additional charge (CPT code(s): 86008 x2). Walnut Component Panel includes rJug r1(f441) and rJug r3 (f442). Cashew Nut (f202) gE is ≥0.10 kU/L, Cashew Nut Component (94470) will be performed at an additional charge (CPT code(s): 86008). Cashew Nut Component includes: Ana o3 (f443) Hazelnut (f17) gE is ≥0.10 kU/L, Hazelnut Component Panel (94476) will be performed at an additional charge (CPT code(s): 86008 x4). Hazelnut Component Panel includes: Cor a1 (f428); Cor a8 (f425); Cor a9 (f440); Cor a14 (f439).	<u>36763</u>
ood and Tree Nut Allergy Panel cludes: IgE allergy testing for: Almond (f20) (2820); Brazil Nut (f18) (2818); Cashew Nut (f202) (2608); Codfish (f3) (2803); Cow's Milk (f2) (2802); Egg White (f1) (2801); azelnut (f17) (2817); Macadamia Nut (rf345) (38475); Peanut (f13) (2813); Salmon (f41) (2841); Scallop (f338) (273); Sesame Seed (f10) (2810); Shrimp (f24) (2824); oybean (f14) (2814); Tuna (f40) (2840); Walnut (f256) (3489); Wheat (f4) (2804).	<u>36762</u>
illergy Insect Venom Panel ncludes: Honey Bee (11) IgE (2731); White-Face Hornet (12) IgE (2732); Yellow Jacket (13) IgE (2733); Paper Wasp (14) IgE (2734); Fire Ant (170) IgE (2739).	<u>38038</u>
ryptase	<u>34484</u>
eanut, Total with Reflex to Peanut Component Panel Includes: If Peanut (f13) IgE is ≥0.10 kU/L, Peanut Component Panel (91681) will be added at an additional charge (CPT code(s): 86008 x6).Peanut Component Panel Includes Ara h 1 (f422), Ara h 2 (f423), Ara h 3 (f424), Ara h 6 (f447), Ara h 8 (f352) and Ara h 9 (f427).	<u>91747</u>
ick-borne illnesses	
ick-borne Disease, Acute Molecular Panel° ncludes: Lyme Disease (Borrelia spp) DNA, Qualitative Real-Time PCR, Blood (15777); Anaplasma phagocytophilum DNA, Qualitative Real-Time PCR° (17320); Babesia nicroti DNA, Real-Time PCR° (37314); Borrelia miyamotoi DNA, Real-Time PCR, Miscellaneous° (93795); Ehrlichia chaffeensis DNA, Real-Time PCR° (11353)	<u>94322</u>
ick-borne Disease, Acute Molecular Panel, Non-Lyme° ncludes: Anaplasma phagocytophilum DNA, Qualitative Real-Time PCR° (17320); Babesia microti DNA, Real-Time PCR° (37314); Borrelia miyamotoi DNA, Real-Time CR, Miscellaneous° (93795); Ehrlichia chaffeensis DNA, Real-Time PCR° (11353)	<u>32338</u>
ick-Borne Disease, Antibody Panel° ncludes: <i>Anaplasma phagocytophilum</i> Antibodies (IgG, IgM)° (34464); WA1 IgG Antibody, IFA° (17231); <i>Babesia microti</i> Antibodies (IgG, IgM), IFA° (34300); Lyme Disease Ab with Reflex to Blot (IgG, IgM) (6646); <i>Ehrlichia chaffeensis</i> (IgG, IgM)° (34271). If Lyme Disease Antibody Screen is ≥0.90, then Lyme Disease Antibodies (IgG, IgM), Immunoblot (8593) will be performed at an additional charge (CPT code(s): 86617 x2).	<u>36942</u>
yme Disease (<i>Borrelia spp</i>) DNA, Qualitative Real-Time PCR, Synovial Fluid/CSF°	<u>15564</u>
yme Disease (<i>Borrelia spp</i>) DNA, Qualitative Real-Time PCR, Tick ^c	<u>15510</u>
yme Disease Antibody with Reflex to Immunoassay (IgG, IgM) cludes: If Lyme Disease Antibody is Positive or Equivocal (≥0.91), then Lyme Disease Supplemental Antibodies (IgG, IgM), Immunoassay will be performed at an dditional charge (CPT code(s): 86617(x2))	<u>39733</u>
uberculosis testing	
uantiFERON®-TB Gold Plus, 1 Tube Includes: The Centers for Disease Control and Prevention (CDC) has provided guidance on clinical considerations for tuberculosis (TB) testing such as QuantiFERON®- B Gold Plus in conjunction with COVID-19 mRNA vaccines. Please refer to the QuantiFERON®-TB Gold Plus FAQ link (https://www.questdiagnostics.com/healthcare- rofessionals/clinical-education-center/faq/faq204) for more detailed information on the latest CDC guidelines regarding TB testing and COVID-19 vaccines.	<u>36970</u>
-SPOT® .TB Includes: The Centers for Disease Control and Prevention (CDC) has provided guidance on clinical considerations for tuberculosis (TB) testing such as T-SPOT®.TB in onjunction with COVID-19 mRNA vaccines. Please refer to the T-SPOT®.TB FAQ (https://education.questdiagnostics.com/faq/FAQ215) for more detailed information in the latest CDC guidelines regarding TB testing and COVID-19 vaccines.	<u>37737</u>
leasles, Mumps, and Rubella	

[°]This test was developed, and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

Clinical drug monitoring

Help protect your patients and your practice with clinical drug monitoring. With an extensive drug testing menu and state-of-the-art testing technologies, we can help you protect your patients and optimize their care. Healthcare providers may consider a variety of testing approaches based on the needs of individual patients. Below are some of the commonly ordered tests providers may find helpful in developing a better understanding of your patient's health.

	Test code
Drug Monitoring, Panel 6 with Confirmation, Urine°	
Includes: Alcohol Metabolites/EtG (39366 Presumptive with Definitive reflex; 39384 Definitive); Amphetamines (39344 Presumptive; 39367 Presumptive with Definitive reflex; 39385 Definitive); Barbiturates (39350 Presumptive; 39369 Presumptive with Definitive reflex; 39387 Definitive); Benzodiazepines (39352 Presumptive; 39371 Presumptive with Definitive reflex; 39389 Definitive); Cocaine Metabolite (39354 Presumptive; 39374 Presumptive with Definitive reflex; 39392 Definitive); Heroin Metabolite (393557 Presumptive; 39376 Presumptive with Definitive reflex; 39394 Definitive); Marijuana Metabolite (39358 Presumptive; 39377 Presumptive with Definitive reflex; 39395 Definitive); Methadone Metabolite (39360 Presumptive; 39379 Presumptive with Definitive reflex; 39398 Definitive); Oxycodone (39363 Presumptive; 39381 Presumptive with Definitive reflex; 39399 Definitive); Oxycodone (39363 Presumptive; 39381 Presumptive with Definitive reflex; 39399 Definitive); Phencyclidine (39364 Presumptive; 39382 Presumptive with Definitive reflex; 39401 Definitive). If you require medMATCH® for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39428</u>
Antidepressants, with Confirmation, Urine ^c Includes: Amitriptyline; Amoxapine; Citalopram/Escitalopram, Clomipramine; Desipramine; Doxepin; Desmethyldoxepin, Duloxetine, Fluoxetine; Fluvoxamine, Hydroxybupropion, Imipramine; Maprotiline, Mirtazapine, Nortriptyline; Paroxetine, Protriptyline, Sertraline, Trazodone, Trimipramine, Venlafaxine, Vilazodone, Vortioxetine.	<u>94032</u>
If screening drug class result is equal to or greater than the cutoff, then confirmation testing will be performed at an additional charge (CPT code(s): dependent on the confirmation(s) performed).	
Antipsychotics, with Confirmation, Urine ^c Includes: Aripiprazole, Brexpiprazole, Cariprazine, Chlorpromazine, Clozapine, Fluphenazine, Haloperidol, Loxapine, Lurasidone, Mesoridazine, Molindone, Olanzapine, Quetiapine, Risperidone, Thioridazine, Thiothixene, Trifluoperazine, Ziprasidone	<u>94528</u>
If screening drug class result is equal to or greater than the cutoff, then confirmation testing will be performed at an additional charge (CPT code(s): 80342 or 80343 or 80344).	
Fentanyl, Screen, Urine Includes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39356</u>
Fentanyl, with Confirmation, Urine ^c Includes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd. If the presumptive (screen) is positive, a confirmation will be performed at an additional charge (CPT code(s): 80354). Confirmation includes the following analytes: Fentanyl, Norfentanyl	<u>39375</u>
Fentanyl, Quantitative, Urine Includes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39393</u>
Buprenorphine, Screen, Urine Includes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39353</u>
Buprenorphine, with Confirmation, includes Naloxone, Urine° ncludes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.Initial screen of the Buprenorphine drug class. If screen is positive, a confirmation will be performed at an additional charge (CPT code(s): 80348, 80362; HCPCS: G0480). Confirmation includes the following analytes: Buprenorphine, Norbuprenorphine, Naloxone	<u>39373</u>
Buprenorphine and Naloxone, Quantitative, Urine ^c ncludes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39391</u>
Gabapentin, Quantitative, Urine Buprenorphine and Naloxone, Quantitative, Urine Includes: If you require medMATCH for this order code, you must also order code 39158 - Prescribed Drugs, medMATCH. If 39158 is ordered, all Drug Monitoring order codes will be treated as medMATCH. If this test code is not ordered with 39158, all medMATCH result codes will be DNR'd.	<u>39407</u>

 $\label{panel} \mbox{Panel components may be ordered separately.}$

^cThis test was developed, and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.



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COVID-19 testing statements for molecular diagnostic tests and COVID-19, flu, and RSV cotests

- The Cepheid SARS-CoV-2, Influenza A/B and RSV test, the cobas® SARS-CoV-2 & Influenza A/B Test and the Quest SARS-CoV-2 RT-PCR test and other molecular tests ("Tests") have not been FDA-cleared or approved.
- The Roche® test has been authorized only for the detection of RNA from SARS-CoV-2 virus, Influenza A virus, and Influenza B virus and not any other viruses or pathogens.
- The Cepheid SARS-CoV-2, Influenza A/B and RSV test has been authorized only for the simultaneous qualitative detection and differentiation of nucleic acids from SARS-CoV-2, influenza A, influenza B, and respiratory syncytial virus (RSV), and not for any other viruses or pathogens;
- The Cepheid SARS-CoV-2, Influenza A/B and RSV test is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is terminated as ranging the declaration of the declaration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is
- The Roche test is only authorized for the duration of the declaration that circumstances exist justifying the authorized of the emergency use of in vitro diagnostics for detection and differentiation of SARS-CoV-2 virus, Influenza A, and Influenza B under section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorized is terminated or revoked sooner.
- The Tests have been authorized by the FDA under an EUA for use by laboratories certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. § 263a, to perform moderate and high complexity tests.
- The Quest test and other molecular tests have been authorized only for the detection of nucleic acid from SARS-CoV-2, not for any other viruses or pathogens.
- The Quest test and other molecular tests are only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner.

Test codes may vary by location. Please contact your local laboratory for more information.

The CPT® codes provided are based on American Medical Association guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.

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