

# IRL INFORMS

5361 NW 33rd Avenue  
Fort Lauderdale, FL 33309

APRIL 2008



## WHY WE ARE REQUIRED TO MAKE CRITICAL CALLS

We understand that late night calls from the laboratory can be an annoyance, but we are required by both federal and state law to “immediately alert the individual or entity requesting the test and, if applicable, the individual responsible for using the test results when any test result indicates an imminent life-threatening condition, or panic or alert values”. FS §493.1291(g)

While our technologists are highly skilled, they do not have the full clinical picture of your patient. They cannot exercise medical judgment as to which critical values are exactly that -critical- and which are “expected” abnormal results that might have waited until your office opened in the morning. We hope you will understand and support our commitment to providing the right information in the right hands, at the right time, every time!



## TESTING FOR OVA AND PARASITES

Many clinical laboratories in the U.S., including IRL, have discontinued the practice of routinely performing comprehensive **microscopic** O&P examinations and have substituted a combination screening test for *Giardia lamblia* and *Cryptosporidium parvum*. The screening test **improves the detection** of these two enteropathogens, which are the most common causes of parasitic disease in the United States. **Only patients who have recently traveled to developing countries or who are immunocompromised should be tested by the microscopic exam (ova and parasite comprehensive test).**

A 24-month retrospective study of 13,019 fecal samples tested at IRL during 2006 and 2007 showed that the prevalence of parasitic diseases in our patient population is **exceedingly low**. The study also demonstrated that the screening assay is **considerably more sensitive than the microscopic exam** for the detection of both *G. lamblia* and *C. parvum*. In our study, only 128 (1%) patients harbored significant parasites consisting of 73 *Cryptosporidium* (57%), 43 *Giardia* (34%), and 12 other parasites (9%). The microscopic exam detected only 14% of *Giardia* and none of the *Cryptosporidium* infections. In contrast, all *Cryptosporidium* infections and 86% of *Giardia* parasites were detected by the screening assay.

**Traditional stool microscopy usually miss *Cryptosporidium* infections** because oocysts are very small, they do not stain well with iodine or trichrome, and they are similar in size and shape to yeast forms normally found in stool. Special stains (acid fast) or **screening assays** are usually required to successfully detect *Cryptosporidium* in stool. Remember, when testing stool samples for ova and parasites, *Giardia*/*Cryptosporidium* screen should be the test of choice for most patient populations.

**Routinely order test code: 75180 for the *Giardia*/*Cryptosporidium* screen. Order test code: 75184 for Ova and Parasite Comprehensive ONLY for patients who have a history of foreign travel or are immunocompromised.**

**National Medical Laboratory Professionals Week  
April 20 - 26, 2008  
Delivering Today's Results for a Healthier Tomorrow**

## SPECIAL COAGULATION TESTING

IRL offers an extensive menu of coagulation tests performed on a daily basis. In addition to routine prothrombin time, activated partial thrombin time, and fibrinogen tests, the following tests are also available:

- Protein C and Protein S activity
- Antithrombin III activity
- Von Willebrand antigen and functional level assays
- Full menu of factor assays performed with inhibitor screens
- Circulating anticoagulant and Lupus anticoagulant profiles
- Activated protein C resistance assay is offered that is 99.4% sensitivity in the detection of a factor V Leiden gene mutation
- Factor Xa Assays are available for both unfractionated and low molecular weight heparin.

## WHAT IS AN OSFER?



*“OSFERs are a proactive approach to ensure that claims are submitted right the first time to minimize claim denials due to invalid or missing information.”*

**OSFER** is an acronym for **Off Site Fixable Edit Report**. It is an automated tool by which the Billing Department requests and receives required billing information in order to submit claims for reimbursement. The OSFER process ensures that information received meets established compliance billing edits, such as medical necessity and Limited Coverage policies.

Internal billing review processes are applied to determine if an OSFER needs to be generated. Once that determination is made, a time-sensitive OSFER is sent to your office to request needed information. OSFERs are a proactive approach to ensure that claims are submitted right the first time to minimize claim denials due to invalid or missing information.

**INSURANCE  
PLAN UPDATE**

*IRL now accepts all United Healthcare Products*

**Contact us:**

**[IRLB.IRLINFORMS@HCAHealthcare.com](mailto:IRLB.IRLINFORMS@HCAHealthcare.com)**

For additional information on our laboratory, please visit our website at:

**[www.IRLFL.com](http://www.IRLFL.com)**