Approved and current. Effective starting 6/28/2019. 77420.613 (version 3.1) STOP Request/Notification Template Blank copy 3987532. Last reviewed on 6/25/2019. Printed on 7/23/2020 4:12 PM (EDT). Page 2 of 2

STOP Notification	Discontinue use of PROMETHEUS  LABORATORY as reference lab	
When:	Tuesday, August 04, 2020	
What?	Discontinue use of Prometheus reference lab	
Who is Affected:	Affected Location(s)  X Alamance Cancer Center High Point Cancer Center Wesley Long Cancer Center  X Alamance Regional Annie Penn Hospital MedCenter @ High Point  X MedCenter @ Mebane Moses Cone Hospital Wesley Long Hospital Women's Hospital	Department(s)  Blood Bank Cytology Flow Cytometry Histology Microbiology Phlebotomy Point Of Care Rapid Response Lab Respiratory Therapy X Specimen Processing
Why?	Reduce number of reference labs when adequate replacement testing can be met from LabCorp.	
What you will need to do to prepare:	Discard Prometheus shipping containers. Understand Alamance affiliated laboratories will no longer be using Prometheus Laboratories as a reference lab for celiac disease and inflammatory bowel disease profiles.	
	Send Post Live Documentation to IT Manager within 5 days of the effective date for test systems marked with an "X"  Sunguest  WindowPath	
Manager / Supervisor Responsibility:	Sunquest CHL PowerPath	Instrument / Manual Test
Need Help?	Contact your Man	ager / Supervisor

To: Darren Wohl, MD and Rohini Vanga, MD

From: Joshua B. Kish, MD, Alamance Regional Laboratory Medical Director

Date: 7/28/2020

Subject: Discontinuation of the use of Prometheus Laboratories as a reference lab

Effective immediately, Cone Health Laboratories, including the ARMC laboratory, will no longer be using Prometheus Laboratories as a reference laboratory for celiac disease and inflammatory bowel disease profiles. The intent is to help streamline the number of reference laboratories we rely on.

**The LabCorp test menu** offers a number of potential replacement tests (this list is not comprehensive but would cover the evaluation of most patients):

## **Serologic testing for Celiac disease**

LabCorp test number Test title

164047 Celiac antibodies tTG IgA and total IgA with reflex to tTG IgG and DGP IgG

or

165142 Celiac Antibodies tTG IgA, EMA IgA, Total IgA With Reflex to tTG IgG

## Celiac disease genotyping (limited role for diagnosis; reserve for unusual clinical circumstances)

167082 Celiac disease HLA DQ association (genotyping for detection of HLA-DQ2 (DQA1\*05:01 or 05:05 and DQB1\*02:01 or 02:02) and HLA-DQ8 (DQB1\*03:02). Also reports complete DQA and DQB genotypes, homozygosity for DQB1\*02, and genetic risk assessment.)

**Reference:** Husby S, Murray JA, Katzka DA. AGA Clinical Practice Update on Diagnosis and Monitoring of Celiac Disease-Changing Utility of Serology and Histologic Measures: Expert Review. <u>Gastroenterology</u>. 2019;156(4):885. Epub 2018 Dec 19.

## Inflammatory bowel disease (serologic testing not recommended):

164830 Inflammatory bowel disease (IBD) profile (includes atypical perinuclear antineutrophil cytoplasmic antibodies (pANCA); Saccharomyces cerevisiae, IgA; Saccharomyces cerevisiae, IgG)

503800 Thiopurine metabolites

**Reference**: Rubin T, Ananthakrishnan AN, Siegel CA. et al. ACG Clinical Guideline: Ulcerative Colitis in Adults. <u>Am J Gastroenterol</u> 2019; 114:384–413. Published online February 22, 2019

Long MD, Sands BE. What Is the Role of the Inflammatory Bowel Disease Panel in Diagnosis and Treatment? Clinical Gastroenterology and Hepatology 2018; 16:618–620.