



Policy for Priority Result Reporting

Purpose/Introduction

The Quest Diagnostics Priority Result Reporting Policy describes the reporting of test results, as designated by the Chief Laboratory Officer and Best Practice Team Medical Advisors, which may require attention by the healthcare provider prior to regular delivery of results. The priority result reporting described in this policy is in addition to the regular reporting procedure for all test results (such as printed reports delivered by mail).

The provider who requested the test is responsible for providing 24-hour reliable contact information for the purpose of priority reporting. The person notified should be the ordering provider or her/his authorized representative as permitted or required by state and federal law, and has the responsibility of interpreting the result in the context of the patient's clinical condition and to take immediate action, if needed. If the person notified is not qualified to make these decisions, he/she has the responsibility to communicate the information to a qualified person immediately.

Priority Level Definitions

Priority-1 test results include, but are not limited to, results considered "critical" according to the Clinical Laboratory Amendments of 1988 (CLIA; CFR 493.1109f) and the College of American Pathologists (CAP) Laboratory Accreditation Program and so designated by the Chief Laboratory Officer or designee.

Because test results cannot be fully interpreted without knowledge of the patient's current clinical condition and treatment, we will use reasonable efforts to promptly communicate Priority-1 results at any hour of the day, 7 days/week so that the healthcare provider can determine the clinical implications and possible need for immediate attention.

Priority-2 test results are those that may require attention prior to the receipt of routine laboratory reports. We will use reasonable efforts to promptly communicate these results the same day (up to 7pm) or the next morning (after 7am), 7 days/week. Tests marked Priority 2WD are called between 7 am and 7 pm weekdays. For facilities that are known to us as a nursing home or hospital, we will use reasonable efforts to promptly communicate these results at any hour of the day, 7 days/week.

Priority-3 reporting applies only to customers whose sole means of obtaining Quest Diagnostics laboratory results is the printed report (i.e., receiving only mailed or courier-delivered reports) and to clients who have requested Priority-3 reporting in writing during the previous 12 months. These are test results that may require attention before receipt of the printed report and will be called during weekday working hours.

The attached Priority Value Table will not be modified (changed, deleted from, or added to) without the signed written request of the client.

Quest Diagnostics National Priority Value Tables by Testing Department

Chemistry / Special Chemistry	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)			
	Analyte	Age	Low	High	Age	Low	High	Age	Low	High
Ammonia [umol/L]								≤ 18 y		> 200
Amylase [U/L]					All		≥ 300			
Glomerular Basement Membrane Antibody IgG [U/mL]								All		> 8
Bilirubin, total [mg/dL]	≤ 2 y		12.1 – 14.9					≤ 2 y		≥ 15.0
Bilirubin, total [mg/dL]	> 2 y		> 20.0							
BUN[mg/dL]					All		≥ 100			
Calcium, Total [mg/dL]								All	≤ 6.0	≥ 13.0
Calcium, Ionized [mg/dL]								All	≤ 3.2	> 6.9
CK – MB					All		> positive cutoff value (varies with assay)			
CK [U/L]					≤ 18 y		≥ 1000			
CK [U/L]					> 18 y		≥ 6000			
Complement levels	< 2 y	None detected								
Creatinine [mg/dL]					All		≥ 8.00			
Galactose, urine [mg/dL]					≤ 2 y		> 70			
Galactose – 1 – Phosphate [mg/dL packed RBC]					≤ 2 y		> 5.0			
Glucose, serum [mg/dL]	All		400 – 499	All	30 – 35	500-599		All	< 30	≥ 600
*Glucose results are flagged P1 – P3 regardless of ordered test (OGTT, random glucose, serum or plasma, etc.). When these results are called to the client, the report title of the test result should be made known to the client.										
Glucose, CSF, [mg/dL]								All	<30	
Iron (serum) [mcg/dL]	≤ 12 y		≥ 500							
Lipase [U/L]					All		≥ 180			
Magnesium serum or plasma [mg/dL]								All	≤ 0.7	≥ 6.1
Phosphate (as phosphorous) serum or plasma [mg/dL]								All	≤ 1.0	

Quest Diagnostics National Priority Value Tables by Testing Department

Chemistry / Special Chemistry	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Potassium serum or plasma [mmol/L]							All	≤ 2.7	≥ 6.5
Sodium serum or plasma [mmol/L]							All	≤ 120	≥ 160
Troponin (I or T)							All		Positive > cutoff value
TSH [mIU/L]				≤ 1 y		≥ 50.00			
Uric Acid, [mg/dL]				All		>12.0			
Viscosity (serum) [relative to water]							All		≥ 3.0

Quest Diagnostics National Priority Value Tables by Testing Department

Hematology / Coagulation / Urinalysis	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Blasts, absolute number [uL]				All		Blasts >0 (new patient only)	All		≥ 50,000 on any patient
Cerebrospinal fluid (CSF)							All		Any abnormal per local Med. Director
Coagulation Factors VIII & IX, Activity [%]				All	< 5				
Coagulation Factor XIII, Activity [%]				All	< 20				
Coagulation Factor VIII, IX and XI Inhibitor [Bethesda Unit]				All		> 2			
Cryoglobulin [%]				All		> 3			
Fibrinogen Clotting Activity, Clauss Method [mg/dL]				All	< 50				
Heparin, unfractionated [IU/mL]				All		> 1.10			
Heparin, low molecular weight [IU/mL]				All		> 2.0			
Heparin – Induced Platelet Antibody				All		Positive			
Serotonin Release Assay [%]				All		≥ 20			
Von Willebrand Factor Protease Cleaving Activity [%]				All	≤ 30				
Glucose (Urinalysis)	≤ 16 y		3+ or higher						
Hemoglobin [g/dL]				≥ 12 y	7.0 – 8.9		≤ 12 y	< 7.0	≥ 22.5
Hemoglobin [g/dL]				> 12 y	6.1 – 7.0		> 12 y	≤ 6.0	≥ 22.5
Malaria parasites or other organisms (Babesia, Ehrlichia, Trypanosomes etc.) [also appears in Microbiology section]				All		Positive for blood parasites or <i>Plasmodium</i> species other than <i>P. falciparum</i>	All		Positive for verified <i>P. falciparum</i> or unidentified " <i>Plasmodium</i> species"
WBC, absolute number [uL]				All	< 1,000				
Neutrophils, absolute number [uL]				All		> 30,000	All	< 400	
Band neutrophils [uL]	All		> 10,000						
Partial Thromboplastin Time,(aPTT) [sec.]	All		60 – 89				All		≥ 90
Platelet Count [uL]	All	20,000 – 50,000	1,000,000 – 1,999,999				All	< 20,000	≥ 2,000,000
Prothrombin Time-International Normalized Ratio (PT-INR)	All		4.0 – 4.9	All		5.0 – 7.9	All		≥ 8.0
Reducing Substance (Urinalysis,Clinitest)	≤ 2 y		Positive						

Quest Diagnostics National Priority Value Tables by Testing Department

Microbiology / Serology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
<i>Bacillus anthracis</i> , culture, nucleic acid, or antigen test							All		Positive
Bacterial meningitis antigens, CSF							All		Positive
<i>Bordetella pertussis</i> , culture, nucleic acid, or antigen				All		Positive			
<i>Bordetella parapertussis</i> , culture, nucleic acid, or antigen				All		Positive			
<i>Brucella</i> sp., culture, nucleic acid or antigen test							All		Positive
<i>Chlamydia trachomatis</i> , culture, nucleic acid or antigen test				< 13 y		Positive			
<i>Clostridium difficile</i> toxin A, B, A+B or toxigenic culture, stool (Note: non-toxigenic strains should not be called)				All		Positive			
<i>Corynebacterium diphtheriae</i> , nasopharynx culture				All		Positive			
<i>Cryptococcus</i> antigen, serum or CSF							All		Detected
Culture: blood, CSF, any tissue or sterile body fluid (excluding urine)				All		FINAL: positive any organism	All		PRELIM: positive any organism
<i>Enterobacteriaceae</i> isolates, Carbapenemase producing (Hodge test positive)				All		Positive for Carbapenemase			
<i>E coli</i> O157, culture, stool				All		Positive			
<i>Francisella tularensis</i> , culture, nucleic acid, or antigen test							All		Positive
Gram or other stain of direct specimen or antigen detection (blood, CSF, sterile body fluid)							All		Positive for any micro-organism
Nucleic acid detection (blood, CSF, sterile body fluid), qualitative FIRST DETECTION ONLY				All		Positive for HBV, HCV, HIV	All		Positive for any micro-organism except HBV, HCV, HIV
Gram or other stain of direct specimen or antigen or nucleic acid detection (tissue)				All except for skin or wound		Positive or detected			
<i>Histoplasma</i> , <i>Blastomyces</i> , <i>Coccidioides</i> , <i>Paracoccidioides</i> , or <i>Cryptococcus neoformans</i> isolated and/or detected by microscopy, nucleic acid or antigen tests				All		Positive			

Quest Diagnostics National Priority Value Tables by Testing Department

Microbiology / Serology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)			
	Analyte	Age	Low	High	Age	Low	High	Age	Low	High
Influenza A and/or B (includes positive H1N1 test results), culture, nucleic acid, or antigen test	All		Positive							
<i>Legionella</i> sp., culture, nucleic acid, or antigen test				All		Positive				
Malaria parasites or other organisms (<i>Babesia</i> , <i>Ehrlichia</i> , <i>Trypanosomes</i> etc.) [also appears in Hematology section]				All		Positive for blood parasites or <i>Plasmodium</i> species other than <i>P. falciparum</i>	All			Positive for verified <i>P. falciparum</i> or unidentified “ <i>Plasmodium</i> species”
MRSA culture: Patients in institutional settings ONLY	All		Positive							
MRSA, PCR or other nucleic acid test				All		Detected				
Mucormycosis/Zygomycosis involving sino nasal area				All		Positive				
<i>Mycobacteria</i> all sp., stain or direct specimen nucleic acid test for <i>M. tuberculosis</i> , initial detection							All			Positive
<i>Mycobacteria</i> all sp., culture, initial detection and final identification.				All		Positive				
<i>Mycobacteria tuberculosis</i> , susceptibilities, resistant to 2 or more drugs				All		Resistant \geq 2				
<i>Neisseria gonorrhoeae</i> , culture or nucleic acid test				< 13y		Positive				
<i>Nocardia</i> species				All		Positive				
<i>Pneumocystis jiroveci</i> (<i>carinii</i>), stain or antigen test				All		Positive				
Respiratory syncytial virus (RSV), culture, nucleic acid or antigen test	> 3 y		Positive	\leq 3 y		Positive				
Rotavirus, antigen test				All		Positive				
Shiga Toxin, EIA				All		Detected				
Stool Culture, <i>Shigella</i> sp., <i>Listeria</i> sp., <i>Salmonella</i> sp., <i>Campylobacter</i> sp., <i>Vibrio</i> sp., and/or <i>Yersinia enterocolitica</i>				All		Positive				
Streptococcus, Group A, wound culture				All		Positive				
Streptococcus, Group B, culture or nucleic acid test				< 1 y		Positive				
<i>Ureaplasma urealyticum</i> , culture, respiratory				< 1 y		Positive				

Quest Diagnostics National Priority Value Tables by Testing Department

Microbiology / Serology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Vancomycin Intermediate or Resistant <i>Staphylococcus aureus</i> (VISA or VRSA)				All		Vancomycin I or R			
VRE culture	All		Positive						
VRE PCR or nucleic acid test				All		Detected			
<i>Yersinia pestis</i> , culture, nucleic acid, or antigen test							All		Positive

Quest Diagnostics National Priority Value Tables by Testing Department

TDM / Toxicology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Acetaminophen [mg/L]							All		≥ 50
Acetone [mg/dL]							All		≥ 50
Amikacin, random [mg/L]	All		> 30.0						
Amikacin, peak [mg/L]	All		> 30.0						
Amikacin, trough [mg/L]	All		> 8.0						
Amitriptyline + Nortriptyline total [mcg/L]	All		300 – 599	All		600 – 999	All		≥ 1000
Amobarbital [mg/L]	All		12.1 – 19.9				All		≥ 20.0
Arsenic, Blood [mcg/L]				All		> 60			
Butalbital [mg/L]							All		> 10.0
Cadmium, Blood [mcg/L]				All		10.0 – 29.9	All		≥ 30.0
Cadmium, 24hr Urine [mcg/L]							All		> 10.0
Caffeine [mg/L]	≥ 1 y		30.1 – 49.9	< 1 y		40.0 – 49.9	All		≥ 50.0
Carbamazepine, total [mg/L]	All		12.1 – 19.9				All		≥ 20.0
Carboxyhemoglobin [% of total Hgb]	All		15 – 19				All		≥ 20
Chloramphenicol, random [mg/L]	All		> 25.0						
Chloramphenicol, peak [mg/L]	All		> 25.0						
Chloramphenicol, trough [mg/L]	All		> 20.0						
Chlordiazepoxide and Metabolite and (Desmethylchlordiazepoxide), total [mg/L]	All		> 5.0						
Chlorpromazine [ng/mL]	≥ 18 y		300 – 749				All		≥ 750
Chlorpromazine [ng/mL]	< 18 y		80 – 749				All		≥ 750
Clomipramine and Metabolite, total [ng/mL]							All		≥ 600
Clorazepate as Nordiazepam [mg/L]	All		> 2.0						
Cobalt, Blood [mcg/L]							All		≥ 400
Cobalt, Urine [mcg/L]				All		≥ 250			
Cyanide [mg/L]				All		0.5 – 0.9	All		≥ 1.0
Cyclosporine, as Trough [mcg/L]				All		400 – 599	All		≥ 600
Desethylamiodarone [mcg/mL]							All		> 2.5
Desipramine [mcg/L]	All		301 – 599				All		≥ 600
Diazepam and Nordiazepam, total [mg/L]	All		2.1 – 2.9				All		≥ 3.0
Digitoxin [mcg/L]	All		36 – 44				All		≥ 45
Digoxin [mcg/L]	All		2.1 – 2.9				All		≥ 3.0
Disopyramide [mg/L]	All		5.1 – 6.9				All		≥ 7.0

Quest Diagnostics National Priority Value Tables by Testing Department

TDM / Toxicology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Doxepin + Nordoxepin, total [mcg/L]	All		300 – 599				All		≥ 600
Ethanol [mg/dL]							All		≥ 250
Ethosuximide [mg/L]	All		101 – 149				All		≥ 150
Ethylene glycol [mg/L]							All		≥ 100
Flecainide [mg/L]							All		≥ 1.0
Fluoxetine [mcg/L]	All		> 469						
Fluphenazine [mcg/L]	All		18 – 49				All		≥ 50
Norfluoxetine [mcg/L]	All		> 446						
Gentamicin, random [mg/L]	All		> 10.0						
Gentamicin, peak [mg/L]	All		> 10.0						
Gentamicin, trough [mg/L]	All		> 2.0						
Haloperidol, Serum [ng/mL]				All		> 20			
Ibuprofen [mg/L]	All		75 – 99				All		≥ 100
Imipramine or Desipramine, total [mcg/L]	All		301 – 599				All		≥ 600
Isopropanol [mg/dL]							All		≥ 50
Lead, blood [mcg/dL]	≥ 6 y		> 40	< 6 y		20 – 44	< 6 y		≥ 45
Lead, 24hr Urine [mcg/L]				All		≥ 120			
Levetiracetam, peak [mg/L]				All		> 70			
Levetiracetam, trough [mg/L]				All		> 37			
Lidocaine [mg/L]	All		5.1 – 5.9				All		≥ 6.0
Lithium [mEq/L]	All		1.6 – 1.9				All		≥ 2.0
Mephobarbital [mg/L]	All		40.1 – 59.9				All		≥ 60.0
Mercury, Blood [mcg/L]	All		> 13						
Mercury, Urine, 24 hr [mcg/L]	All		36 – 149				All		≥ 150
Mercury, Urine, Random [mcg/g creatinine]	All		36 – 149				All		≥ 150
Mesoridazine [mg/L]	All		> 1.4						
Methanol [mg/dL]							All		≥ 5
Methemoglobin [% of total Hgb]	All		12.0 – 69.9				All		≥ 70.0
Methotrexate at 24 h [µmol/L]							All		≥ 5.00
Methsuximide, as Normethsuximide [mg/L]							All		> 40.0
Mexiletine [mg/L]				All		2.0 – 4.9	All		≥ 5.0
Mycophenolic Acid [mcg/mL]				All	0.5 - 1.0	> 3.5	All	< 0.5	
Mycophenolic Acid Glucuronide [mcg/mL]				All	< 35.0				

Quest Diagnostics National Priority Value Tables by Testing Department

TDM / Toxicology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Nortriptyline [mcg/L]	All		250 – 499				All		≥ 500
Phenobarbital [mg/L]	All		40.1 – 59.9				All		≥ 60.0
Phenytoin [mg/L]	All		35.1 – 39.9				All		≥ 40.0
Phenytoin, free [mg/L]							All		> 3.0
Primidone [mg/L]	All		12.1 – 15.0				All		> 15.0
Procainamide [mg/L]	All		12.0 – 13.9				All		≥ 14.0
Procainamide + NAPA total [mg/L]							All		> 30.0
Protriptyline [mcg/L]	All		261 – 499				All		> 500
Propafenone [mg/L]							All		> 2.0
Quinidine [mg/L]	All		5.1 – 9.9				All		≥ 10.0
Salicylates [mg/L]							All		≥ 400
Sirolimus (Rapamycin) [mcg/L] Immunoassay				All		≥ 35.0	All	<3.0	
Tacrolimus (FK 506) [mcg/L]				All	3.0 – 4.9	> 20.0	All	< 3.0	
Theophylline [mg/L]							< 6 m		> 10.0
Theophylline [mg/L]	≥ 6 m		20.1 – 39.9				≥ 6 m		≥ 40.0
Thioridazine [mg/L]	All		> 2.6						
Tobramycin, random [mg/L]	All		> 10.0						
Tobramycin, peak [mg/L]	All		> 10.0						
Tobramycin, trough [mg/L]	All		> 2.0						
Thallium, Blood [mcg/L]	All		6 – 79				All		≥ 80
Thallium, Urine, 24 hr [mcg/L]	All		6 – 199				All		≥ 200
Trazodone [mcg/L]	All		> 2,100						
Valproic Acid [mg/L]	All		100.1 – 149.9				All		≥ 150.0
Vancomycin, random [mg/L]	All		40.1 – 79.9				All		≥ 80.0
Vancomycin, peak [mg/L]	All		40.1 – 79.9				All		≥ 80.0
Vancomycin, trough [mg/L]	All		> 20.0				All		≥ 80.0
Zonisamide [mg/L]	All		> 40						

Quest Diagnostics National Priority Value Tables by Testing Department

Genetic Testing	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2WD (called 7am – 7pm weekdays ONLY)			Priority 1 (called 24 hrs 7 days)			
	Analyte	Age	Low	High	Age	Low	High	Age	Low	High
Ashkenazi Jewish Panel (8 test or 11 test)										
Bloom Syndrome DNA Mutation Analysis										
Canavan Disease Mutation Analysis										
Cystic Fibrosis Screen										
Familial Dysautonomia Mutation Analysis										
Fanconi's Anemia DNA Mutation Analysis										
Gaucher Disease, DNA Mutation Analysis										
Glycogen Storage Disease Type Ia Mutation Analysis										
Maple Syrup Disease (MSUD) Mutation Analysis (Ashkenazi Jewish)										
Mucopolipidosis Type IV Mutation Analysis										
Niemann-Pick Disease Mutation Analysis										
Tay-Sachs Disease Mutation Analysis										
Amniotic fluid open neural tube defect screen										
XSense®, Fragile X with Reflex										
Maternal Serum Biochemical Screening										

Heterozygous for mutation
or
not interpretable

Note: Homozygous disease states are
directly called by the performing
laboratory

MOM value \geq 2.0 MOM

Gray zone, pre-mutation or affected
result

MSS Interpretation- Screen positive for
ONTD, Down syndrome and/or trisomy
18 or High risk for Down syndrome
and/or trisomy 18

Quest Diagnostics National Priority Value Tables by Testing Department

Pathology / Hematopathology	Priority 3 (called 7am – 7pm M – F) (For clients without electronic reporting)			Priority 2 (called 7am – 7pm 7 days)			Priority 1 (called 24 hrs 7 days)		
	Age	Low	High	Age	Low	High	Age	Low	High
Gyn Cytology (Pap)						<ul style="list-style-type: none"> • HSV, if pregnancy indicated in LIS • Adenocarcinoma in situ • Suspicious for malignancy • Positive for malignancy** 			
Non – Gyn Cytology						<ul style="list-style-type: none"> • Suspicious for malignancy • Positive for malignancy** 			
Hematopathology (including Flow Cytometry, FISH, and Molecular)						<ul style="list-style-type: none"> • Positive for acute leukemia (initial or recurrence) 			<ul style="list-style-type: none"> • First time diagnosis of acute promyelocytic leukemia
Tissue Biopsy						<ul style="list-style-type: none"> • POC without identifiable placental villi or fetal parts • Suspicious for malignancy** • Positive for malignancy** • Significant unexpected surgical pathology findings as determined by pathologist 			<ul style="list-style-type: none"> • Frozen section results • Presence of adipose tissue in an endometrial biopsy
						<p>** Excluding squamous/basal cell skin carcinomas and/or re–excision of known recently diagnosed malignancy but includes cases in which biopsy is a follow-up to cytologic report. It is not intended that pre-malignant conditions such as CIN3, high grade PIN, complex endometrial hyperplasia, etc. be considered "Suspicious for Malignancy" unless the pathologist has made an additional comment to that effect. The BU Medical Director may add additional case findings to the list (e.g., bcc/scc with positive margins on an excisional biopsy).</p>			