

Test Definition: ACASM

Pernicious Anemia Cascade, Serum

Reporting Title: Pernicious Anemia Cascade

Performing Location: Rochester

Ordering Guidance:

Ask patients if they have received a vitamin B12 injection or radiolabeled vitamin B12 injection within the last 2 weeks. Patient results will not reflect deficiency or malabsorption after recent B12 injection. If patient has received such an injection within the past 2 weeks, **this test should not be ordered.**

Specimen Requirements:

Patient Preparation:

- 1. Patient should fast for 8 hours.
- 2. For 12 hours before specimen collection, patient **should not** take multivitamins or dietary supplements (eg, hair, skin, and nail supplements) containing biotin (vitamin B7).
- 3. For 1 week before specimen collection, if medically feasible, patient **should not** be take proton pump inhibitors (omeprazole, lansoprazole, dexlansoprazole, esomeprazole, pantoprazole, and rabeprazole).
- 4. For at least 2 weeks before specimen collection, patient **should not** take or receive drugs that interfere with gastrointestinal motility (eg, opioids).

Collection Container/Tube:

Preferred: Serum gel **Acceptable:** Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 3 mL **Collection Instructions:**

1. Centrifuge, divide specimen into 3 plastic vials:

Vial 1 (B12PA): 1 mL of serum Vial 2 (PAMMA): 1.5 mL of serum Vial 3 (PAGAS): 0.5 mL of serum

2. Band specimens together and send frozen.

Forms:

If not ordering electronically, complete, print, and send a <u>Benign Hematology Test Request Form</u> (T755) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Frozen (preferred)	30 days	
	Refrigerated	24 hours	

Result Codes:

Result ID Reporting Name		Туре	Unit	LOINC®
B12PA	Vitamin B12 Assay, S	Numeric	ng/L	2132-9

LOINC® and CPT codes are provided by the performing laboratory.



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Supplementa	I Report:
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No

CPT Code Information:

82607

82941-(if appropriate)

83921-(if appropriate)

86340-(if appropriate)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
IFBPA	Intrinsic Factor Blocking Ab, S	1	86340	No	Yes, (order IFBA)
MMAPA	Methylmalonic Acid, QN, S	1	83921	No	Yes, (order MMAS)
GASTR	Gastrin, S	1	82941	No	Yes, (order GAST)

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Туре	Unit	LOINC®
MMAPA	33049	Methylmalonic Acid, QN, S	Numeric	nmol/mL	13964-2
IFBPA	IFBLB	Intrinsic Factor Blocking Ab, S	Alphanumeric		31444-3
IFBPA	CMT3B	Comment	Alphanumeric		48767-8
GASTR	GASTR	Gastrin, S	Numeric	pg/mL	2333-3

Reference Values:

180-914 ng/L