
SCHEDULE OF

BENEFITS

For

LABORATORY SERVICES

April 1, 1999

LABORATORY MEDICINE

PREAMBLE:

SPECIFIC ELEMENTS

In addition to the common elements, (see General Preamble to the Schedule of Benefits, Physician Services under the Health Insurance Act), all services listed under Laboratory Medicine from L001 to L699 (including L900 codes), L701 to L799 and under the "*Laboratory Medicine in Private Office*" listings in the Diagnostic and Therapeutic Procedures Section of the Schedule, when performed by a physician for his/her own patients, include the following specific elements:

- A. Carrying out the laboratory procedure, including collecting specimens where not separately billable, and processing of specimens.
- B. Interpreting and/or providing the results of the procedure, where not interpreted by a physician under an L800 code, even where the interpreting physician is another physician.
- C. Discussion with and providing advice and information to the patient or patient's representative(s), whether by telephone or otherwise, on matters related to the service.
- D. Providing premises, equipment, supplies and personnel for the specific elements and for any aspect(s) of the specific elements, of any service(s) covered by a corresponding L800 code that is (are) performed at the place in which the laboratory procedure is performed.

OTHER TERMS AND DEFINITIONS

- 1. The patient documentation and specimen handling benefit (see code L700 below) is applicable to all insured procedures, except for those listed under anatomical pathology, histology and cytology, the fees for which cover any administrative cost. This benefit is not applicable to referred-in samples, since the collecting laboratory will already have claimed the patient documentation and specimen collection benefit.
- 2. The biochemistry section has been condensed so that one listing refers to a procedure for any of amniotic fluid (A), blood (B), CSF (C), faeces (F), gastrointestinal fluid (G), urine (U). Exceptions are indicated by B, U, etc., following the test name. Other specimens will be considered on an 'IC' (independent consideration) basis.
- 3. A number of tests are listed in different sections of Laboratory Medicine, i.e., where more than one method of performing the test is available.

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4. Blood glucose by the dipstick method may be claimed only when assessed by an appropriate instrument such as a reflectance meter. It should not be claimed when used only as a check on the fasting blood sample of a glucose tolerance test. The blood glucose of the fasting sample in a glucose tolerance test is allowable only once even if assessed by two methods.

Note: A standard glucose tolerance test for the diagnosis of diabetes mellitus is performed over 2 hours and includes 5 blood glucose (L104) and one urine glucose determination (L253). If the patient is pregnant, only 4 blood glucose specimens (L103) should be taken at hourly intervals (see CMAJ 126, 473 (1982)). When 5 hour glucose tolerance test is specifically ordered the blood glucose measurements are to be claimed individually (L111). Only one L253 may be claimed with a glucose tolerance test.

5. Code L417 or L418 may not be claimed by a physician in addition to claim(s) for any treatment or assessment. However, Code G481 in the Diagnostic and Therapeutic Procedures Section may be claimed by a physician if a hemoglobin screen (any method or instrument is carried out in the course of an office or home visit. Urinalysis may be claimed with or without an associated visit to a physician's office (except for screening and urinalyses which are not medically necessary).
6. When a screening culture method (e.g., Agar spoon) is used on a urine sample, L641 refers to a culture technique and does not apply to those kits using the nitrite test only. Where a significant growth is obtained and followed up by definitive identification methods, L633 or L634 only should be claimed. The benefits for L633 or L634 include any necessary microscopic examination of the urine. However, urine examination by microscopy may be claimed in addition to L633 or L634 if the authorized practitioner has specifically ordered the former and receives a report from the laboratory.
7. Only those tests which are requested are to be claimed for with the following exceptions. It is intended that if the requested test yields abnormal findings or information which would be incomplete, insufficient or meaningless to the authorized practitioner, the medical director of a laboratory may add further appropriate tests and claim for them with the knowledge he/she may have to substantiate their justification.
8. A test must be completed in accordance with the pertinent schedule listing in order to claim for it. The verbatim listing is intended as the definitive benefit for that test alone, unless otherwise specified, e.g., isoenzymes do not include total enzyme estimation; creatine does not include creatinine (as specified). Notwithstanding the foregoing and recognizing that it is impossible to list all variations in techniques of all listed tests, when there is a modification of the usual technique, the listing most closely approximating it should be used.

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9. This schedule, with the exception of L036, lists actual procedures performed. No claim shall be made for calculated values made and reported, or for control tests or repeat tests on same patient sample.
10. Creatinine is a justifiable addition in the case of tests on 24-hour urine samples, where it is necessary to assess the sample as a complete 24-hour collection. However, if several tests (e.g., steroids) are done on a single such sample, only one creatinine would be claimed for that sample. In those estimations where the test result is expressed in terms of creatinine excretion the performance of a creatinine is mandatory and should be claimed.
11. It is recognized that in requests for a serologic titre, if a screening test is used and would suffice, the lesser benefit for the screening test should be claimed. If positive and followed by serial titration, both the screening and titre fees should be claimed. If the titration is a micro technique using plates, it is the equivalent of a tube titre, the wells being miniature tubes.
12. When a test for trichomonas identification (any method) is carried out in association with L625 or L627, wet preparation (L653) may be claimed in addition. L653 may be claimed when a wet preparation is used for direct examination of a fresh specimen for amoebae or similar parasites. However, the wet preparation used in the faeces concentration technique for parasites and ova is included in L650. The conditions set down in paragraph 7 of this preamble must be adhered to.
13. It is recognized that in all laboratory tests there is a professional component.
14. Complete Blood Count includes WBC Differential (L372), Platelet Count (L396), RBC Count (L397), WBC Count (L399), Hematocrit (L417), and Hemoglobin (L418). When one or more of these tests are ordered, claim L393, not the individual codes. Perform and report results for all six tests. The maximum number of LMS units which can be claimed per patient per day is 16. L700 is not included in this total and should be claimed separately, if appropriate.
15. The maximum number of units which may be claimed for any combination of chemical analyses performed on a single sample by means of an automated chemical analyzer with simultaneously functioning channels is 5 LMS units (L225).

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16. The following preamble applies to the immunohematology section:
- (a) L471 Antibody identification fee is per specimen regardless of method used. Preparation of eluate and/or antibody absorption is included.
 - (b) L473 Parallel Titration - to be used when two sequential patient serum specimens are tested to detect a change in antibody titre. Includes a repeat antibody identification on the current sample.
 - (c) L490 Blood Group - ABO and RhD. The subgroups of A and weak RhD phenotype are included where indicated. A direct AHGT is also included in L490, therefore L495 may not be claimed on the same patient when this code is claimed.
 - (d) L492 Crossmatch. When an initial crossmatch is requested, the appropriate claim is for L490 x 1, L482 x 1 plus L492 for each unit ordered. L490 and L482 may not be claimed more than once on the same day of service. L490 and L493 may not be claimed when these procedures are carried out as a confirmatory test on the units of blood to be transfused.
 - (e) L493. This code includes L490 [see Preamble, paragraph 16(c)] and Rh phenotype as well as antigens C, D, E, c, e, and weak RhD phenotype when indicated. Any other antigen is to be claimed under L494.
 - (f) L494 Blood Group per antigen. Antigens stated in L490 and L493 are excluded from this code.
 - (g) L495 Direct AHGT - can be used when ordered as a single procedure, or in addition to L482 when the latter is requested as a single procedure. L495 may not be claimed when L490 or L493 is claimed with L482 on the same patient, on the same visit.
17. Code L623 refers to a specific request for the minimal inhibitory concentration (MIC) of an antimicrobial agent required to inhibit or kill a micro-organism, expressed in units or $\mu\text{g/ml}$, using multiple/serial dilutions of the antimicrobial agent. L623 must not be used as a routine antibiotic sensitivity test and does not include breakpoint susceptibility testing using manual kit or automated methodologies.
18. The use of Nickersons Medium as a screening test for yeast is not a benefit.

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19. The carcinoembryonic antigen test (CEA) L690 is an insured service only when carried out in accordance with Cancer Care Ontario guidelines for following established malignancies, and not as a general cancer screen.
20. The benefit for seminal fluid examination (complete) is to include sperm count, volume estimation, motility, morphology and viscosity.
21. Fees for laboratory medicine testing are not to be paid (in whole or in part) to the referring practitioner by the laboratory performing the tests.
22. The benefits for patient documentation and specimen collection and each test are calculated by multiplying the individual LMS Unit values by 51.7 cents effective October 1, 1989.
23. Laboratory tests on specimens sent outside Ontario are not an insured benefit unless prior approval is obtained from the Ministry of Health.
24. Secondary laboratories receiving specimens for additional (secondary) tests from another laboratory that normally would be claimed as L303, L319, L500 or L544 should be claimed as L903, L919, L900 or L944 respectively.
25. When a pregnancy test is requested, L655 should be performed. L318 should only be performed, when H.C.G. or Beta sub-units are specifically requested by the authorized practitioner.
26. The maximum number of units which can be claimed for the combination of L055, L153 and L243 is 30 units per patient per day. The maximum of 30 units applies on a per patient basis, regardless of the number of specimens submitted and regardless of the number of laboratories involved performing the test. Code L700 is not included in this maximum and should be claimed separately if appropriate.
27. The following codes cannot be claimed when the tests are done, either individually or in any combination, for fetal assessment: L311, L318, L691.
28. Codes L319 and/or L919 cannot be claimed when done for prenatal assessment.
29. The fee for L575 must include a gammopathy screen using antisera to the individual immunoglobulins (IgG, IgA, IgM) as well as both Kappa and Lambda Light Chains. In the event that further antisera are required to type the paraprotein, the fees for these extra antisera are included in the 120 units for L575. L080/L085/L086 are not justifiable add-ons to code L575. Code L575 should not be used for qualitative determinations of acute phase proteins. Requests of this type should utilize code L085 - Protein Electrophoresis or specific protein determinants as requested, e.g., Transferrin (L554), Ceruloplasmin (L553), Alpha₁ antitrypsin (L555). In appropriate cases when clinically indicated based on the results of the immunoelectrophoresis test, and with written approval of the medical director of the laboratory, code L550 Immunoglobulin quantitation may be a justifiable add-on to L575.

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30. L720 surgical pathology billable per block of tissue processed to a maximum of 8 per patient per day, regardless of the number of specimens received. The laboratory must meet the standard of practice that the number of blocks processed is the minimum required. Normally additional blocks would be required only if the amount of tissue exceeds the available space in the cassette or the pieces of tissue must be separately identified. Additional work required is not billable, e.g.,

Special Stains,
Deeper Sections,
Block Rotation,
Block Retrieval,
Decalcification.

NOTE: Claims for laboratory services, when referred by a Dentist, Osteopath, Chiropracist or Chiropractor are not insured services.

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Code	LMS Units
L700 PATIENT DOCUMENTATION AND SPECIMEN COLLECTION FEE	
(see Preamble, paragraphs 1, 14 & 26)	15
<ol style="list-style-type: none"> 1. Limited to 1 per patient, per day. 2. Not allowed to the recipient of a referred sample from another laboratory. 3. Not allowed to the attending physician. 4. Not applicable to a patient visit solely to receive instructions or collection containers. 5. When multiple tests are ordered for the same patient, for the same day, only one L700 may be claimed even though all specimens may not be available on any one day. 6. Not applicable to items under anatomical pathology, histology and cytology sections (Fee Codes L701 to L731 inclusive, L800 - L848 or L900 - L944 inclusive). 	
BIOCHEMISTRY	
<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L059 Acetaminophen	25
L001 Acetone, qualitative.....	3
L002 Acetone, quantitative	35
L003 Addis count -U	32
L004 Albumin, qualitative.....	3
L005 Albumin, quantitative (excluded if globulin and/or protein electrophoresis done)	5
L006 Alcohol, ethyl - quantitative	25
L008 Alcohols, fractionation and quantification	45
L009 Aldolase	30
L010 Aldosterone	120
L011 Amino acids - one way chromatography - B.U.	15
L012 Amino acids - two way chromatography – U	30
L013 Amino acids, fractionation and quantitation	200
L014 Amino acid nitrogen	33
L044 Acid profile - organic (by GC-MS)	200

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Code	LMS Units
BIOCHEMISTRY (Cont'd)	
<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L071 Aminoglycosides (e.g., gentamicin, tobramycin)	40
L015 Ammonia	39
L016 Amniotic fluid scan	20
L017 Amniotic fluid L/S ratio	50
L018 Amylase	5
L021 Androstenedione	75
L019 Ascorbic acid (ascorbate)	25
L225 Automated chemical analyzers with simultaneously functioning channels, single Sample (see Preamble, paragraph 15)	5
L026 Barbiturates, quantitative	35
L027 Barbiturates, fractionation and quantification (serum) - includes other drugs requiring similar methodology, e.g. tricyclic antidepressants.....	60
L028 Bile microscopy	4
L029 Bilirubin, qualitative – F.....	3
L030 Bilirubin, total.....	5
L031 Bilirubin, conjugated	
Blood gases (see listings on pages 11-12).....	10
L037 Blood volume - excluding injection of dye.....	20
L038 Bromides	15
L039 Bromosulphthalein (BSP) excluding injection of dye	14
L045 Calcium	5
L046 Calcium ionized.....	20
L047 Calculus analysis - chemical, qualitative	15
L048 Calculus analysis, qualitative and quantitative	25
L040 Carbamazepine, quantitative (Tegretol)	35
L049 Carotene	16
L050 Catecholamines, total	60
L051 Catecholamines, fractionated	80
L052 Ceruloplasmin	19
L041 Chlordiazepoxide, quantitative (Librium)	40
L053 Chloride.....	5
L054 Chloride (sweat)	33
L055 Cholesterol, total - not to be claimed with L156 (see Preamble, paragraph 26)	5
L056 Cholesterol, ester - not to be claimed with L156.....	14
L057 Cholinesterase - pseudo or true.....	30

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Code	LMS Units
BIOCHEMISTRY (Cont'd)	
<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L058	Cholinesterase genotyping (includes pseudo, dibucaine and fluoride) 50
L060	Carboxyhemoglobin 15
L061	CO ₂ content, CO ₂ combining power, bicarbonate (measured, not calculated)..... 5
L062	Chymotrypsin 22
L063	Copper 40
L064	Cortisol 35
L065	Creatine (see Preamble, paragraph 8) 26
L066	Creatine phosphokinase 5
L070	Creatine phosphokinase, fractionation 34
L067	Creatinine - not with L068 (see Preamble, paragraph 10)..... 5
L068	Creatinine clearance 15
L075	Crystal identification (x-ray powder diffraction analysis)..... 30
L069	Cystine screening – U 8
L199	Delta-aminolevulinic acid (ALA), quantitative – U 25
L074	Diazepam, quantitative (Valium, Vivol) 40
L072	Digoxin 45
L077	Diphenylhydantoin, quantitative (Phenytoin, Dilantin) 35
L076	Disopyramide 35
L078	Drugs of abuse screen, urine..... 68
L079	Broad spectrum toxicology screen, urine - includes confirmatory testing..... 72
L085	Electrophoresis, serum - including total protein..... 36
L086	Electrophoresis, other than serum - including total protein 50
L080	Electrophoresis, serum – alone 26
L092	Ethosuximide, quantitative (Zarontin) 35
L095	Fat, total- F 72
L096	Fat, differential – F 92
L097	Fat and/or meat fibres (microscopic) – F 6
L098	Fat (microscopic) – U 6
L099	Fatty acids, free..... 25
L094	Flurazepam, quantitative (Dalmane)..... 40
L105	Galactose (per sample) 16
L106	Galactose-l-phosphate uridyl transferase (quantitative) 65
L113	Galactose-l-phosphate uridyl transferase (screening) 10
L107	Gamma glutamyl transpeptidase 5
L109	Gastric analysis titration (per sample)..... 7

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Code		LMS Units
	BIOCHEMISTRY (Cont'd)	
	<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L110	Globulin (excluded if albumin and/or protein electrophoresis done).....	10
L111	Glucose, quantitative - not by dipstick (see Preamble, paragraph 4)	5
L112	Glucose, semi-quantitative (dipstick if read with reflectance meter).....	3
L104	Glucose tolerance test (see Preamble, paragraph 4)	30
L103	Glucose tolerance test in pregnancy (see Preamble, paragraph 4)	24
L114	Glutathione.....	20
L115	Glycoproteins	60
L093	Glycosylated hemoglobin - HgbA ₁	22
L116	Gold.....	40
L119	Hexosaminidase A	15
L132	Hemoglobin A ₂ by chromatography	25
L121	5HIAA screening – U	9
L122	5HIAA quantitation – U	50
L117	High density lipoprotein cholesterol	18
L118	Histamine	90
L123	Homogentisic acid (homogentisate) - qualitative	9
L101	Homovanillic acid (homovanillate), HVA.....	60
L124	Hydroxybutyrate dehydrogenase	10
L125	17-Hydroxycorticosteroids – U.....	34
L126	17-Ketogenic steroids – U.....	40
L127	17-Ketosteroids, total – U	34
L128	17-Ketosteroids, fractionated – U	80
L129	Hydroxyproline – B.....	25
L130	Hydroxyproline, total – U.....	90
L131	Hydroxyproline, total and free – U	150
L135	Inulin clearance test	40
L136	Inulin.....	40
L142	Intestinal enzymes – qualitative	6
L143	Intestinal enzymes – quantitative.....	22
L137	Iodine protein bound	21
L139	Iron, total -with iron binding capacity and per cent saturation - not to be claimed with L329	34
L141	Iso-citric dehydrogenase.....	15
L145	Lactic acid (lactate)	27
L146	Lactic dehydrogenase (L.D.H.), total	10

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Code		LMS Units
	BIOCHEMISTRY (Cont'd)	
	<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L147	Lactic dehydrogenase fractionation	29
L148	Lead	40
L149	Leucine aminopeptidase	15
L153	Lipoprotein, electrophoresis - not to be claimed with L156	20
	(see Preamble, paragraph 26)	
L154	Lipoprotein, ultracentrifugation.....	50
L155	Lipoprotein lipase	100
L156	Lipoprotein phenotyping (includes sample appearance, cholesterol, triglycerides, Lipopro	40
L157	Lithium.....	10
L165	Magnesium.....	5
L166	Malic acid (malate) dehydrogenase	15
L167	Melanin – U	10
L168	Mercury	30
L169	Metanephrines, total – U.....	75
L170	Metanephrines, fractionated – U.....	90
L171	Methemalbumin.....	21
L172	Methemoglobin.....	21
L160	Methotrexate (amethopterin).....	35
L175	Methylphenidate, quantitative (Ritalin).....	40
L173	Mucopolysaccharides – U.....	25
L174	Myoglobin, qualitative – U.....	30
L161	N-acetylprocainamide	35
L180	5' – Nucleotidase.....	25
L181	Occult blood	3
L182	Ornithine carbamoyl transferase.....	15
L183	Osmolality (osmolarity)	10
L184	Oxalic acid (oxalate) – U.....	40
L185	P.A.H. clearance	40
L032	pCO ₂	8

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Code	LMS Units
BIOCHEMISTRY (Cont'd)	
<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L033	8
L034	7
L035	17
L036	3
L187	6
L188	30
L189	15
L190	15
 NOTE: L190 - no additional claim may be made for a repeat test using an Inhibitor (such as for prostatic acid phosphatase determination).	
L191	5
L192	29
L193	30
L194	5
L195	35
L196	15
L197	10
L198	25
L200	10
L201	60
L202	75
L203	90
L204	5
L205	70
L206	80
L211	35
L212	35
L213	35
L208	5
L209	15

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Code	LMS Units
BIOCHEMISTRY (Cont'd)	
<i>(Applicable to all specimens except as denoted by B-blood, U-urine, F-faeces, C-CSF, A-amniotic fluid).</i>	
L210	27
L215	18
L216	30
L220	5
L221	12
L222	5
L223	5
L226	5
L227	20
L228	21
L229	27
L073	17
L240	15
L243	5
L244	22
L250	15
L251	5
L252	5
L253	5
L254	2
L267	7
L256	15
L257	35
L260	30
L261	60
L265	6
L266	25
L299	IC

NOTE: Biochemical assays other than specifically listed are not a benefit as such until approved by the Ministry of Health.

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Code		LMS Units
IMMUNOASSAYS		
The following listings are to be used if the assay involves the use of a radioisotope, enzyme or fluorescent label.		
L307	ACTH (adrenocorticotrophic hormone).....	120
L300	Aldosterone	120
L691	Alphafetoprotein	45
L304	Aminoglycosides (e.g., gentamicin, tobramycin)	40
L321	Aminophylline (theophylline)	28
L305	Androstenedione	75
L322	Anti-DNA	45
L323	Anti-RNA	45
L301	Calcitonin	120
L302	C-AMP (cyclic adenosine monophosphate).....	60
L346	C-peptide immunoreactivity	60
L690	Carcinoembryonic antigen (CEA) (see Preamble, paragraph 19)	IC
L303	Cortisol (see Preamble, paragraph 24).....	35
L903	Cortisol, secondary laboratory (see Preamble, paragraph 24).....	35
L347	Dehydroepiandrosterone sulphate (DHEAS).....	40
L306	Digoxin	28
L324	Diphenylhydantoin (phenytoin), quantitative (Dilantin)	35
L310	Estradiol	55
L311	Estriol	75
L312	Estrogens - total -U	50
L313	Estrone	75
L329	Ferritin	28
L309	Folate in red cells, to include hematocrit and if requested, serum folate.....	60
L315	FSH (pituitary gonadotrophins)	28
L316	Gastrin	75
L317	Growth hormone	40
L318	HCG (human chorionic gonadotrophins) - (see also Preamble, paragraphs 25 & 27).....	30
L693	Hormone receptors for carcinoma (to include estrogen and/or progesterone assays)	IC
L320	HPL (human placental lactogen).....	50
L334	IgE - not to be billed for RAST test	28
L688	Immune complexes by C ₁ q binding	60
L689	Immune complexes by Raji cell assay.....	100
L325	Insulin.....	40
L326	Insulin antibodies	80
L327	Iron binding capacity - not to be claimed with L329	24

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Code		LMS Units
IMMUNOASSAYS (Cont'd)		
L328	LH (luteinizing hormone)	28
L330	Parathyroid hormone	120
L343	Phenobarbitone	35
L348	Proinsulin immunoassay	500
L331	Progesterone	28
L333	17-OH progesterone	60
L332	Prolactin	28
L335	Renin	75
L336	T-3, total (triiodothyronine)	0
L337	T-3 uptake	0
L607	T-3, free	28
L338	T-4, total (thyroxine)	0
L339	T-4, free-absolute (includes T-4 total)	0
L340	Testosterone	28
L608	Testosterone, free	50
L341	TSH (thyroid stimulating hormone)	28
L609	Thyroglobulin	40
L342	Thyroxine binding globulin (T.B.G.)	50
L345	Vitamin B ₁₂	28
L605	1,25-dihydroxy Vitamin D	150
L606	25-hydroxy Vitamin D	100
L585	Ligand assays - not included above	IC

HEMATOLOGY

The following listings include assays using clotting, chromogenic, radioisotopic or immunologic labels or technique

L373	Antithrombin III assay	55
L370	Assay of Factors, II, V, VII, VIII, IX, X, XI and XII (each)	55
L371	Autohemolysis test	24
L374	Blood film - buffy coat preparation - not to be claimed with L430	18
L375	Blood film - special stain	11
L376	Bleeding time - Duke method	8
L377	Bleeding time - Ivy method	15
L378	Bone marrow - film preparation	15

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Code		LMS Units
	HEMATOLOGY (Cont'd)	
L379	Bone marrow - staining (Romanowski and iron).....	23
L385	Capillary fragility.....	7
L386	Circulating anticoagulant (e.g., lupus anticoagulant).....	10
L387	Clot observation for lysis.....	7
L388	Clot lysis, dilute whole blood.....	10
L389	Clot retraction.....	6
L390	Clotting time (Lee and White)	8
L393	Complete Blood Count (any method, see Preamble paragraph 14).....	16
L391	C.S.F. cell count (to include differential)	18
L395	Eosinophil count.....	8
L400	Euglobulin clot lysis.....	20
L403	Factor XIII (urea solubility test)	5
L401	Fibrinogen, semi-quantitative.....	6
L402	Fibrinogen, quantitative.....	28
L404	Fibrinolysis (plate method).....	16
L405	Fibrin split products, quantitative	30
L406	Fibrin split products, latex screening.....	5
L410	G-6-PD screen	10
L411	G-6-PD quantitative assay	65
L415	Haptoglobin	15
L417	Hematocrit (see Preamble paragraphs 5 & 14)	0
L418	Hemoglobin (see Preamble paragraphs 5 & 14)	0
L419	Hemoglobin electrophoresis or chromatography to include Hb A ₂ fraction	34
L420	Hemoglobin, foetal	20
L421	Hemoglobins, unstable	6
L422	Hemolysins - Ham's acid serum test.....	18
L423	Hemolysins - cold (Donath-Lansteiner).....	18
L424	Hemosiderin in urine	11
L416	Heinz bodies	15
L425	Heparin assay	55
L431	Kleihauer stain	18
L430	L.E. cell prep - not to be claimed with L374	18
L432	Malaria smear or other parasites	15
L450	Osmotic fragility.....	45
L462	Partial thromboplastin time	14
L435	Plasmapheresis.....	50
L433	Plasminogen assay	55
L434	Plasmin assay	55

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Code		LMS Units
HEMATOLOGY (Cont'd)		
L396	Platelet (thrombocyte) count (see Preamble paragraph 14).....	0
L436	Platelet (thrombocyte) function - aggregation, per additive	12
L437	Platelet (thrombocyte) function - adhesiveness	25
L438	Platelet (thrombocyte) function - thromboplastic function (PF-3)	28
L439	Preparation of cryoprecipitate (per treatment)	17
L440	Preparation of platelet (thrombocyte) concentrates (per treatment).....	25
L441	Preparation of washed red cells.....	35
L442	Preparation of leukocyte-poor blood.....	20
L443	Protamine titration	15
L444	Protamine sulphate test	10
L445	Prothrombin time.....	12
L446	Prothrombin consumption	10
L412	Pyruvate kinase quantitative assay.....	65
L397	R.B.C. (erythrocyte) count, excluding manual method (see Preamble paragraph 14).....	0
L398	Reticulocyte count.....	13
L447	Reptilase time	10
L451	Sedimentation rate	3
L452	Sickle cell preparation.....	14
L453	Sickle cell solubility test (screen)	5
L455	Special stains for acute leukemia	75
L454	Sucrose hemolysis.....	18
L456	Terminal transferase by immunofluorescence.....	75
L460	Thrombin time	10
L461	Thromboplastin generation test	71
L465	Vitamin B ₁₂ , microbiologic, not isotopic.....	45
L372	W.B.C. differential count, any method(s) includes R.B.C. (Erc) morphology and platelet (thrombocyte) estimate, where indicated (see Preamble, paragraph 14).....	0
L399	W.B.C. (leukocyte) count, excluding whole blood manual method (see Preamble, paragraph 14).....	0
IMMUNOHEMATOLOGY		
L471	Antibody identification, per specimen (see Preamble, paragraph 16(a)).....	45
L481	Antibody titre per antibody, per specimen - to be claimed only if L471 yields a positive identification	15
L482	Antibody screening (see Preamble, paragraph 16)	20
L473	Parallel titration on two specimens to include confirmation of previously detected antibody (see Preamble, paragraph 16b)	75

LABORATORY MEDICINE

Code		LMS Units
IMMUNOHEMATOLOGY (Cont'd)		
L490	Blood Group - ABO and RhD (see Preamble, paragraph 16)	18
L493	Blood Group - ABO and Rh phenotype (see Preamble, paragraph 16)	40
L494	Blood Group per antigen (see Preamble, paragraph 16).....	8
L492	Crossmatch per unit of blood (see Preamble, paragraph 16).....	10
L495	Direct anti-human globulin test (see Preamble, paragraph 16).....	4
 IMMUNOLOGY		
L567	C ₁ esterase inactivator screen.....	5
L665	C-Reactive protein	6
L660	Cold agglutinins- screen	6
L661	Cold agglutinins – titre	15
L560	Complement proteins - C ₁ q.....	12
L551	Complement proteins - C ₃ (B ₁ C).....	12
L552	Complement proteins - C ₄ (B ₁ E)	12
L557	Complement proteins - C ₅	12
L558	Complement proteins - C ₃ proactivator.....	12
L561	Complement proteins - C ₁ esterase inactivator	12
L553	Miscellaneous proteins - Ceruloplasmin	12
L554	Miscellaneous proteins – Transferrin	12
L555	Miscellaneous proteins - Alpha ₁ antitrypsin	12
L556	Miscellaneous proteins - Alpha ₂ macroglobulin	12
L576	Cryoglobulin characterization.....	30
L568	Double gel diffusion, qualitative (Ouchterlony) per antigen: antibodies to food antigens (milk, wheat proteins) or fungal antigens (allergic alveolitis screening series) - maximum of 4 antisera per patient screen.....	5
L575	Gammopathy Screen by immunoelectrophoresis or immunofixation	
	Serum.....	120
	Urine.....	120
NOTE:	Maximum one serum and one urine per patient (see Preamble, paragraph 29)	
L655	Pregnancy test (see Preamble, paragraph 25).....	6
L550	Single gel diffusion and nephelometric quantitative assays Immunoglobulin G, A, D, M	15

NOTE: 15 LMS units applies to each of the listed immunoglobulins

LABORATORY MEDICINE

Code		LMS Units
IMMUNOLOGY (Cont'd)		
L500	Screen for miscellaneous agglutination reactions (see Preamble, paragraph 24), e.g., Rheumatoid factor Antithyroid (thyroglobulin or microsomal Streptolysin screen.....	6
L900	Screen by secondary laboratory (see Preamble, paragraph 24).....	6
L501	Titre - serial tube single antigen	15
L502	Serial tube 4 or more antigens.....	30
L596	Sperm antibodies – screen	20
L597	Sperm antibodies – titre	40
Cellular Assays		
L528	Antibody dependent cellular cytotoxicity	200
L533	ATP depletion test.....	275
L532	Caffeine - halothane contracture test.....	300
L521	Intracellular leukocyte bacterial killing capacity	100
L522	Leukocyte chemotactic activity	150
L523	Leukocyte phagocytic capacity	40
L524	Lymphocyte activation (transformation) by isotope incorporation (limited..... to 3 mitogens and/or antigens)	200
L525	Lymphocyte surface immunoglobulins by immunofluorescence	200
L526	Lymphocyte T and B cell rosettes.....	200
L527	Mixed lymphocyte reaction	300
L529	Naturally occurring cell cytotoxicity	200
L520	Nitroblue tetrazolium test - screen for enzyme deficiency	30
Complement - kinetic (activity) assays		
L530	Total hemolytic complement (CH ₅₀ non-kit)	40
L531	Complement components (activity assays)	60

Fluorescent Antibody Tests (Immunofluorescent Studies)

Tests for serum antibodies to tissue and cell components (Codes L535 and L544) should be claimed per type of tissue section examined and per serum dilution used, irrespective of number of antibodies identified, maximum, four slides.

LABORATORY MEDICINE

Code		LMS Units
Fluorescent Antibody Tests (Immunofluorescent Studies) (Cont'd)		
L544	Antinuclear (see Preamble, paragraph 24).....	35
L944	Antinuclear by secondary laboratory (see Preamble, paragraph 24)	35
L535	Other antibody tests	50
	Antimitochondrial	
	Antithyroid	
	Antiadrenal	
	antismooth muscle	
	Antiparietal	
	Antiskin	
	Antisperm	
L545	Protein deposition in tissues (per tissue examined, any number of antisera, e.g., Immunoglobulin, complement component, fibrinogen and pathogens, etc.)	75
Histocompatibility Testing		
L582	Antibody screening (per panel of 15 antigens)	150
L581	Crossmatch	50
L583	HLA 27 typing.....	50
L580	Tissue typing.....	200
Microbial Immunology		
L659	Antistreptolysin O, or anti-DNaseB, titre or micro-technique	25
L662	Complement fixation, screen	20
L663	Complement fixation, titre, single antigen	30
L664	Complement fixation, multiple antigens	50
L503	Febrile agglutinins, slide or tube agglutination	25
L668	Heterophile antibodies-screen (slide or single tube) with or without absorption	5
L670	Heterophile antibodies - with absorption by guinea pig kidney or ox cells, multiple tube titres (Paul Bunnell).....	30
L667	Non-cultural direct bacterial antibody or antigen assays by fluorescence, agglutination or ELISA techniques. Not to be claimed with any of the codes listed under cultures and not to include Group A streptococcus or chlamydia	12
L682	For each additional antibody	add 4
L683	Non-cultural indirect antibody or antigen assays by fluorescence, agglutination or ELISA techniques.....	15
L684	For each additional antibody	add 5

LABORATORY MEDICINE

L319	Hepatitis associated antigen or antibody immunoassay - per assay, e.g., hepatitis B surface antigen or antibody, hepatitis B core antibody, hepatitis A antibody (see Preamble, paragraphs 24 & 28).....	28
L919	Hepatitis associated antigen or antibody immunoassay by secondary Laboratory per assay (see Preamble, paragraphs 24 & 28)	28
N.C.	Serology HIV Antibody	NAB
L685	Leukocyte phenotyping by monoclonal antibodies - first antibody	200
L686	Leukocyte phenotyping by monoclonal antibodies - each additional antibody, to a maximum of 20 antibodies	15
L658	Trichinella antibody	6
N.C.	VDRL (patient out of the Province)	5
L680	Virus antibodies - neutralization test.....	40
L681	Virus antibodies - sucrose gradient separation of IgM plus inhibition test.....	90
L679	Virus antibodies - hemagglutination inhibition or ELISA technique	30

NOTE: not to be used for AIDS testing

Miscellaneous

L599	Cryofibrinogen – qualitative	5
L600	Cryoglobulin – qualitative.....	5
L601	Cryoglobulin – quantitative.....	30
L602	Pyroglobulin – qualitative	5
L604	Serum viscosity – relative	10
L603	Serum viscosity – quantitative	20

Radioimmunoassay - see listings under Immunoassays modifiers (units in addition to units for the basic test where applicable - immunologic procedures)

L610	Concentration of sample before testing (any method).....	2
L611	Radio-modification of standard technique utilizing isotope labelled reagents, e.g., anti-insulin, anti-diphtheria, anti-tetanus	50
	- immunoelectrophoresis	
	- double diffusion	
	- radial diffusion	

NOTE: Radio-modifications other than specifically listed under code L611 are not a benefit as such until approved by the Ministry of Health

N.C.	Preparation of special antigens or antisera	NAB
N.C.	Special investigations	NAB

LABORATORY MEDICINE

MICROBIOLOGY

L620	Antibiotic level, serum	40
L623	Antibiotic sensitivity - M.I.C. - one antibiotic, tube or agar dilution (see Preamble, paragraph 17).....	25
Cultures		
L624	Blood (including aerobic, anaerobic, subcultures, smears) per bottle.....	30
L625	Cervical, vaginal, including GC culture, Gram smear, yeast identification (e.g., Germ tube) - not to be charged with L627 (see Preamble, paragraph 12).....	25
L622	Chlamydia culture isolation or non-cultural assays	30
L640	Culture - throat swab, for streptococcus screen only	6
L639	Fluids (CSF, joint, pleural etc., not exudates).....	28
L626	Fungus, including KOH preparation and smear - not to be charged with L625	20
L627	GC culture and smear - not to be charged with L625 (see Preamble, paragraph 12)	20
L628	Other swabs or pus - culture and smear (includes screening)	25
L629	Sputum - culture and smear.....	22
L630	Stool culture including the necessary agglutinations and culture for campylobacter	34
L635	Pathogenic E. coli (as sole procedure in infants only, such as fluorescent staining, not with L630).....	5
L631	Tuberculosis, including ZN or fluorescent smear.....	55
L641	Urine, screening, actual culture without identification (see Preamble, paragraph 6)	7
L633	Urine, pour plate or Miles-Misra quantitative (see Preamble, paragraph 6).....	20
L634	Urine calibrated volume to include plate, turbidimetric or photometric techniques (See Preamble, paragraph 6).....	25
L637	Virus isolation	50

NOTE: The above fee codes include cultures and antibiotic sensitivity testing when indicated.

L632	Animal inoculation	100
L642	Lysozyme inhibition test	13
L656	Penicillinase production	8
L636	Streptococcus grouping, Lancefield or equivalent with extractions	18
L638	Streptococcus grouping, coagglutination method.....	18

LABORATORY MEDICINE

Microscopy

L645	Darkfield (spirochetes)	10
L646	Electron- direct, for viruses	40
L647	Electron- immunoelectron microscopy.....	60
L648	Electron- after ultracentrifugation.....	65
L649	Electron- thin section, for virus.....	130
L650	Parasites and ova - faeces concentration (see Preamble, paragraph 12)	25
L654	Parasites and ova, smear only, special stain(s)	25
L651	Pinworm (Scotch tape prep)	5
L643	Smear only, Gram or Papanicolaou stain, as sole procedure (not with L624 to L634)	5
L652	Smear only, special stain, e.g., ZN, inclusions, spores, diphtheria	14
L653	Wet preparation - for fungus, trichomonas, parasites (see Preamble, paragraph 12)	3

ANATOMICAL PATHOLOGY, HISTOLOGY AND CYTOLOGY

NOTE: Do not claim L700 in addition to codes L701 to L731, or L800 - L848, or L900 - L944 inclusive. The items listed in this section include only the technical component of the various items listed. The professional component for each item where applicable is listed in the Schedule of Benefits for Physicians Services (refer to paragraph 30 in Preamble)

Chromosome Analysis

L701	Chromosome banding.....	70
L702	Karyotype of blood or bone marrow.....	300
L703	Karyotype of skin or amnion cells	475

Cytology and Histology

L704	Amniotic fluid for fetal maturation.....	8
L726	Analytical electron microscopy - elemental detection, mapping or electron diffraction per specimen.....	40
L705	Aspiration biopsy (lung, breast, thyroid, etc.)	32
L706	Bronchial washings or brushings, per specimen	14
L707	Buccal or vaginal smear for Barr body.....	8
L713	Cervicovaginal specimen (including all types of cellular abnormality, assessment of flora and/or cytohormonal evaluation)	20
L710	Direct smears - oral, larynx, nipple discharge, vulvar.....	13
L717	Electron microscopy.....	225

LABORATORY MEDICINE

L708	Esophageal, gastric or endometrial washings or brushings	14
L709	Esophageal and gastric washings (including collection)	33
L711	Fluids (pleural, ascitic, cystic, aspirate, pericardial, joint, CSF, and urine).....	13
L712	Fluorescent Y chromosome	8
L728	Histochemistry of muscle- 1 to 3 enzymes	40
L729	Histochemistry of muscle- each additional enzyme, per label	13
L731	Immunoperoxidase technique - per label (maximum of 3 per patient)	75
L723	Metabolic bone study - morphologic and morphometric assessment.....	250
L724	Metabolic bone study - kinetic assessment including fluorescent label studies	30
L730	Morphometry, e.g., muscle fibre, nerve fascicles, cells	75
L727	Nerve teasing for demyelination	50
L721	Operative consultation - with or without frozen section (up to three specimens)	15
L722	For each specimen over three	add 8
L714	Smear for inclusion bodies	8
L715	Smear for eosinophils (nasal, sputum, ocular, etc.).....	3
L718	Seminal fluid examination (complete) - (see Preamble, paragraph 20)	22
L719	Smear for spermatozoa only (post-operative)	7
L716	Sputum per specimen for general and/or specified assessment,.....	14
L720	Surgical pathology - (see Preamble, paragraph 30)	32
L725	X-ray diffraction analysis of calculi.....	75

L-CODES

NUMERIC LISTING

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L001	3	1,7	L047	15	8
L002	35	7	L048	25	8
L003	32	7	L049	16	8
L004	3	7	L050	60	8
L005	5	7	L051	80	8
L006	25	7	L052	19	8
L008	45	7	L053	5	8
L009	30	7	L054	33	8
L010	120	7	L055	5	5, 8, 11
L011	15	7	L056	14	8
L012	30	7	L057	30	8
L013	200	7	L058	50	9
L014	33	7	L059	25	7
L015	39	8	L060	15	9
L016	20	8	L061	5	9
L017	50	8	L062	22	9
L018	5	8	L063	40	9
L019	25	8	L064	35	9
L021	75	8	L065	26	9
L026	35	8	L066	5	9
L027	60	8	L067	5	9
L028	4	8	L068	15	9
L029	3	8	L069	8	9
L030	5	8	L070	34	9
L031	10	8	L071	40	8
L032	8	11	L072	45	9
L033	8	12	L073	17	13
L034	7	12	L074	40	9
L035	17	12	L075	30	9
L036	3	3, 12	L076	35	9
L037	20	8	L077	35	9
L038	15	8	L078	68	9
L039	14	8	L079	72	9
L040	35	8	L080	26	6, 9
L041	40	8	L085	36	6, 9, 12
L044	200	7	L086	50	6, 9, 12
L045	5	8	L092	35	9
L046	20	8	L093	22	10

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L094	40	9	L136	40	10
L095	72	9	L137	21	10
L096	92	9	L139	34	10
L097	6	9	L141	15	10
L098	6	9	L142	6	10
L099	25	9	L143	22	10
L101	60	10	L145	27	10
L103	24	2, 10	L146	10	10
L104	30	2, 10	L147	29	11
L105	16	9	L148	40	11
L106	65	9	L149	15	11
L107	5	9	L150	22	11
L109	7	9	L151	16	11
L110	10	10	L152	30	11
L111	5	2, 10	L153	20	5, 11
L112	3	10	L154	50	11
L113	10	9	L155	100	11
L114	20	10	L156	40	8, 11, 13
L115	60	10	L157	10	11
L116	40	10	L159	35	11
L117	18	10	L160	35	11
L118	90	10	L161	35	11
L119	15	10	L165	5	11
L121	9	10	L166	15	11
L122	50	10	L167	10	11
L123	9	10	L168	30	11
L124	10	10	L169	75	11
L125	34	10	L170	90	11
L126	40	10	L171	21	11
L127	34	10	L172	21	11
L128	80	10	L173	25	11
L129	25	10	L174	30	11
L130	90	10	L175	40	11
L131	150	10	L180	25	11
L132	25	10	L181	3	11
L135	40	10	L182	15	11

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L183	10	11	L225	5	3, 8
L184	40	11	L226	5	13
L185	40	11	L227	20	13
L187	6	12	L228	21	13
L188	30	12	L229	27	13
L189	15	12	L240	15	13
L190	15	12	L243	5	5, 11, 13
L191	5	12	L244	22	13
L192	29	12	L250	15	13
L193	30	12	L251	5	13
L194	5	12	L252	5	13
L195	35	12	L253	5	2, 13
L196	15	12	L254	2	13
L197	10	12	L256	15	13
L198	25	12	L257	35	13
L199	25	9	L260	30	13
L200	10	12	L261	60	13
L201	60	12	L265	6	13
L202	75	12	L266	25	13
L203	90	12	L267	7	13
L204	5	12	L299	IC	13
L205	70	12	L300	120	14
L206	80	12	L301	120	14
L208	5	12	L302	60	14
L209	15	12	L303	35	5, 14
L210	27	13	L304	40	14
L211	35	12	L305	75	14
L212	35	12	L306	28	14
L213	35	12	L307	120	14
L215	18	13	L309	60	14
L216	30	13	L310	55	14
L220	5	13	L311	75	5, 14
L221	12	13	L312	50	14
L222	5	13	L313	75	14
L223	5	13	L315	28	14

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L316	75	14	L373	55	15
L317	40	14	L374	18	15, 16
L318	30	5, 14	L375	11	15
L319	28	5, 21	L376	8	15
L320	50	14	L377	15	15
L321	28	14	L378	15	15
L322	45	14	L379	23	16
L323	45	14	L385	7	16
L324	35	14	L386	10	16
L325	40	14	L387	7	16
L326	80	14	L388	10	16
L327	24	14	L389	6	16
L328	28	15	L390	8	16
L329	28	10, 14, 15	L391	18	16
L330	120	15	L393	16	3, 16
L331	28	15	L395	8	16
L332	28	15	L396	0	3, 17
L333	60	15	L397	0	3, 17
L334	28	14	L398	13	17
L335	75	15	L399	0	3, 17
L336	0	15	L400	20	16
L337	0	15	L401	6	16
L338	0	15	L402	28	16
L339	0	15	L403	5	16
L340	28	15	L404	16	16
L341	28	15	L405	30	16
L342	50	15	L406	5	16
L343	35	15	L410	10	16
L345	28	15	L411	65	16
L346	60	14	L412	65	17
L347	40	14	L415	15	16
L348	500	15	L416	15	16
L370	55	15	L417	0	2, 3, 16
L371	24	15	L418	0	2, 3, 16
L372	0	2, 17	L419	34	16

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L421	6	16	L471	45	4, 17
L422	18	16	L473	75	4, 17
L423	18	16	L481	15	17
L424	11	16	L482	20	4, 17
L425	55	16	L490	18	4, 18
L430	18	15, 16	L492	10	4, 18
L431	18	16	L493	40	4, 18
L432	15	16	L494	8	4, 18
L433	55	16	L495	4	4, 18
L434	55	16	L500	6	5, 19
L435	50	16	L501	15	19
L436	12	17	L502	30	19
L437	25	17	L503	25	20
L438	28	17	L520	30	19
L439	17	17	L521	100	19
L440	25	17	L522	150	19
L441	35	17	L523	40	19
L442	20	17	L524	200	19
L443	15	17	L525	200	19
L444	10	17	L526	200	19
L445	12	17	L527	300	19
L446	10	17	L528	200	19
L447	10	17	L529	200	19
L450	45	16	L530	40	19
L451	3	17	L531	60	19
L452	14	17	L532	300	19
L453	5	17	L533	275	19
L454	18	17	L535	50	19, 20
L455	75	17	L544	35	5, 19, 20
L456	75	17	L545	75	20
L460	10	17	L550	15	6, 18
L461	71	17	L551	12	18
L462	14	16	L552	12	18

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L554	12	6, 18	L624	30	22, 23
L555	12	6, 18	L625	25	3, 22
L556	12	18	L626	20	22
L557	12	18	L627	20	3, 22
L558	12	18	L628	25	22
L560	12	18	L629	22	22
L561	12	18	L630	34	22
L567	5	18	L631	55	22
L568	5	18	L632	100	22
L575	120	5, 6, 18	L633	20	2, 22
L576	30	18	L634	25	2, 22, 23
L580	200	20	L635	5	22
L581	50	20	L636	18	22
L582	150	20	L637	50	22
L583	50	20	L638	18	22
L585	IC	15	L639	28	22
L596	20	19	L640	6	22
L597	40	19	L641	7	2, 22
L599	5	21	L642	13	22
L600	5	21	L643	5	23
L601	30	21	L645	10	23
L602	5	21	L646	40	23
L603	20	21	L647	60	23
L604	10	21	L648	65	23
L605	150	15	L649	130	23
L606	100	15	L650	25	3, 23
L607	28	15	L651	5	23
L608	50	15	L652	14	23
L609	40	15	L653	3	3, 23
L610	2	21	L654	25	23
L611	50	21	L655	6	5, 18
L620	40	22	L656	8	22
L622	30	22	L658	6	21

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<u>Code</u>	<u>LMS</u>	<u>Page(s)</u>	<u>Code</u>	<u>LMS</u>	<u>Page(s)</u>
L659	25	20	L707	8	23
L660	6	18	L708	14	24
L661	15	18	L709	33	24
L662	20	20	L710	13	23
L663	30	20	L711	13	24
L664	50	20	L712	8	24
L665	6	18	L713	20	23
L667	12	20	L714	8	24
L668	5	20	L715	3	24
L670	5	20	L716	14	24
L679	30	21	L717	225	23
L680	40	21	L718	22	24
L681	90	21	L719	7	24
L681	90	21	L719	7	24
L682	4	20	L720	32	6, 24
L683	15	20	L721	15	24
L684	5	20	L722	8	24
L685	200	21	L723	250	24
L686	15	21	L724	30	24
L688	60	14	L725	75	24
L689	100	14	L726	40	23
L690	IC	5, 14	L727	50	24
L691	45	5, 14	L728	40	24
L693	IC	14	L729	13	24
L700	15	1, 3, 5, 7	L730	75	24
L701	70	1,7,23	L731	75	7,24
L702	300	23	L900	6	5,7,19,23
L703	475	23	L903	35	5.14
L704	8	23	L919	28	5,21
L705	32	23	L944	35	5,7,20,24
L706	14	23	NC(VDRL)	5	21