TECHNICAL NOTICE
THE MEDICAL FOUNDATION

This memo is to advise you of changes in the testing methodology for Legionella. Effective **December 4, 2017**, The Medical Foundation is adopting the use of TRU® Legionella for testing of human urine samples.

TRU® Legionella is a rapid immunoassay for the detection of *Legionella pneumophila* Serogroup 1 Antigens in preserved or unpreserved human urine specimens. TRU® Legionella provides rapid qualitative results, in comparison to our current ELISA method, without compromising performance. Rapid, same-day results can help drive proper patient treatment and positively impact overall patient outcome.

Please note that test code 28177 has been discontinued.

Order Information

Test Name	*Legionella pneumophila* 1 Antigen, Urine
Test Number	28333
CPT	87899

Related changes

	Current	**New**
Sample type	Urine, random (unpreserved)	Urine, random (unpreserved or preserved boric acid)
Sample stability	24 hours room temperature (20-30°C) 2 weeks refrigerated (2-8°C) 1 month frozen (-20°C) (avoid repeated freeze/thaw cycles)	24 hours room temperature (20-30°C) 1 week refrigerated (2-8°C) 1 month frozen (-20°C) (≤ 2 freeze/thaw cycles)
Testing method	microtiter ELISA	rapid, lateral-flow immunoassay
Reporting	OD ratio	Positive or Negative
Day run	Tue, Thu, Sat	Mon through Sat
Time Run	8:00 am	8:00 am
Time reported	5:00 pm	5:00 pm

Legionnaires' disease (LD) is an important cause of community-acquired and hospital-acquired pneumonia that can occur both sporadically or in outbreak settings. Early clinical diagnosis and prompt initiation of appropriate antibiotics for *Legionella* spp. in all patients with community-acquired or hospital-acquired pneumonias is a crucial measure for management of the disease. Over 90% of the cases of LD are attributed to *Legionella pneumophila* serogroup 1 when the organism is isolated in culture. The pneumonia associated with LD cannot readily be distinguished from pneumonia caused by other microorganisms based solely on clinical parameters; hence clinicians rely on laboratory tests for the detection of LD. Urine antigen detection is highly specific, sensitive and rapid. It has become the most common assay used for the detection of LD.

As your laboratory experts, we are committed to providing superior service to our customers.
Please direct any questions, or comments regarding this notice to
Brett Colter (bcolter@sbmf.org) at extension 4484, Qing Li, Ph.D. (QLiPh.D@sbmf.org)
at extension 4584, Mary Youngs (myoungs@sbmf.org) at extension 4452,
or The Medical Foundation at (574) 234-4176 or (800) 544-0925.