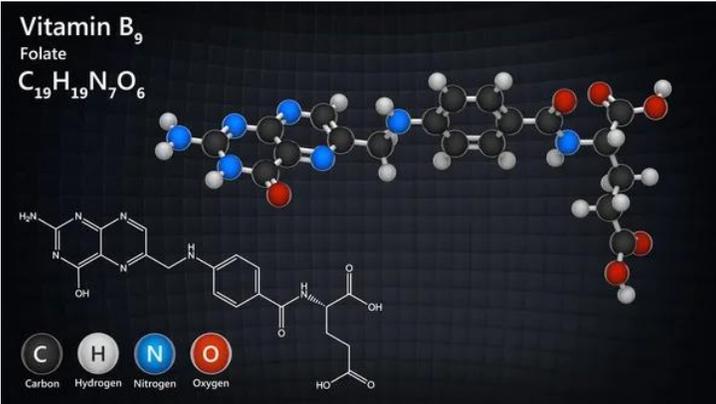


Folate Testing

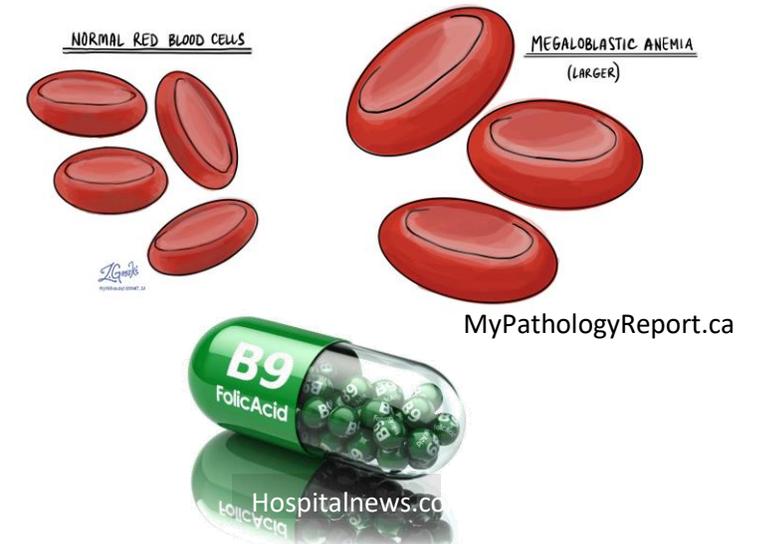


- Folate is an important vitamin essential for many cells
- Folate deficiency classically is associated with anemia and altered mental status
- Folate supplementation of common foods makes folate deficiency very rare in the US
- Testing for folate deficiency in most patients is unnecessary

➤ Some patients **may** require Folate testing. Common indications and ideal frequencies are indicated below:

- Patients with malabsorption, known poor nutrition, or on medications affecting folate (e.g. Methotrexate): an **initial** folate testing is appropriate if the clinical setting suggests potentially low folate levels (megaloblastic anemia, altered mental status with other etiologies ruled out, etc)
- Patients with newly diagnosed celiac disease: an **initial** folate testing level is appropriate to evaluate for deficiency
- Patients with chronic hemolysis, unless known to be taking supplemental folate: an **initial** folate testing level is appropriate to evaluate for deficiency
- Patients actively being supplemented with Folate: **once daily testing** is reasonable while the patient is **receiving supplementation**

➤ Based on the low need for folate testing, the **serum folate test (Epic order LAB69)** will be transitioned to a **Tier 2 assay** for in-patient testing and thus will require an attending second sign



New Orders

Folate

ONCE, today at 1433, For 1 occurrence

Tier 2 (requires a second signature for order entry by a trainee)

This Lab requires Second Sign from attending, nurse practitioner or physician assistant.

For any questions, please contact the Core Laboratory (315-464-4459)