The Urea Breath Test (UBT) is recommended by both the American Gastroenterological Association (AGA) and the American College of Gastroenterology (ACG) as a non-invasive test for diagnosis and confirmation of eradication.1,2

Bringing Accuracy, Simplicity, and Convenience to H. pylori Detection

A non-invasive, non-radioactive breath test for effective, proactive H. pylori management to:

- Accurately detect active H. pylori infection using patient breath samples3,4
- Determine whether treatment for an H. pylori infection has been successful4
- Provide cost-effective testing relative to other diagnostic methods4

Urea Breath Test provides the ability to confirm between active and resolved infections when compared to antibody testing3,4

- Minimizes false positive results since antibody testing cannot distinguish between current infection and recent exposure to infection3,4,5
- Accuracy of blood antibody tests differs based on geography and varying local H. pylori strains5
- Reduces the number of patients inappropriately treated3

The Urea Breath Test is Accurate and Easy to Use for Diagnosis and Post-Treatment Testing

<table>
<thead>
<tr>
<th>Urea Breath Test: Increased Predictive Values Over Antibody Testing*</th>
<th>Urea Breath Test3</th>
<th>Serum IgG Antibody (serology)3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensitivity for Active Infection</td>
<td>&gt;94.7%</td>
<td>85%</td>
</tr>
<tr>
<td>Specificity for Active Infection</td>
<td>&gt;95.7%</td>
<td>79%</td>
</tr>
</tbody>
</table>

*Data are weighted mean values compiled from multiple published clinical trials
Clinical Background of *Helicobacter pylori* Urea Breath Test

- A baseline breath sample is collected prior to ingesting $^{13}$C-urea (a naturally occurring, non-radioactive carbon isotope) prepared in Pranactin® - Citric solution
- A second breath sample is then collected after ingestion of $^{13}$C-urea
  - $^{13}$C-urea is degraded by *H. pylori*-associated urease, producing ammonia and $^{13}$CO$_2$
  - The $^{13}$CO$_2$ is absorbed in the blood and then exhaled in a post-dose breath sample
- An increase in the ratio of $^{13}$CO$_2$ to $^{12}$CO$_2$ between pre- and post-ingestion samples indicates presence of *H. pylori*-associated urease

Administration of *Helicobacter pylori* Urea Breath Test.
\textit{Exhale, Drink, Exhale, Done...It’s That Simple.}

Simple steps for specimen collection
\textit{Supply Order #19846}

<table>
<thead>
<tr>
<th>Test Name</th>
<th>Test Code</th>
<th>CPT Code</th>
<th>Specimen Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Helicobacter pylori</em> Urea Breath Test</td>
<td>902147</td>
<td>83013</td>
<td>Human breath from patients 18 years of age and above; Paired breath samples (pre and post) collected in BreathTek™ UBT kit bags which must be submitted together. Follow instructions provided with kit (supply #19846).</td>
</tr>
<tr>
<td><em>Helicobacter pylori</em> Urea Breath Test - Pediatric</td>
<td>906542</td>
<td>83013</td>
<td>Human breath from patients 3-17 years of age; Paired breath samples (pre and post) collected in BreathTek™ UBT kit bags which must be submitted together. Follow instructions provided with kit (supply #19846). For patients 3-17 years of age: Gender, height, weight, and age, must be provided on the pediatric UHR card included in the BreathTek™ UBT Collection Kit.</td>
</tr>
</tbody>
</table>

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.


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