

DATE:	27 April 2026
TO:	All Zones: Physicians, Nurses and Healthcare Providers, Laboratory Staff
FROM:	Clinical Biochemistry, Alberta Precision Laboratories (APL)
RE:	Reporting Changes for High-Sensitivity C-Reactive Protein (HS-CRP)

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Key Message

- Effective April 30, 2026, reporting changes will be implemented for **high-sensitivity C-reactive protein (HS-CRP)** across Alberta Precision Laboratories (APL).
- These changes are due to the vendor replacing the current HS-CRP reagent with a new formulation.
- The updated reporting aligns HS-CRP results with the intended clinical use of the test.

What Is Changing

- The **reportable range for HS-CRP** will change as follows:
 - **Current:** 0.1 – 300 mg/L
 - **New (effective April 30, 2026):** 0.2 – 20 mg/L
- HS-CRP results above 20 mg/L will be reported as “> 20 mg/L”

Background

- HS-CRP is only indicated to support cardiovascular risk assessment in select patients.
- The test is most useful at low concentrations; Canadian Cardiovascular Society (CCS) guidelines identify hs-CRP ≥ 2.0 mg/L as a cardiovascular risk-enhancing factor
- Higher values often reflect inflammation or infection, where a standard CRP test is more appropriate.
- Limiting the upper reporting range supports appropriate interpretation and utilization of HS-CRP.

Action Required

- Be aware that the HS-CRP reportable range will change effective April 30, 2026.
- HS-CRP results greater than 20 mg/L will display as “> 20 mg/L”.
- Test ordering and specimen requirements remain unchanged.
- Consider ordering standard CRP when assessing inflammation or infection rather than cardiovascular risk.

Questions/Concerns

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Approved by

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