

## INDIVIDUAL TEST LISTING

ABO GROUP & RH (BLOOD TYPE)

LAB CODE: 4900

Specimen Requirements: 5mL EDTA Whole Blood  
Collect: Lavender Top Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: Aliquots are not acceptable.

ACE (See Angiotensin Converting Enzyme)

ACID FAST CULTURE & SMEAR (AFB) (See Culture & Smear, Acid Fast, AFB)

ADH (See Antidiuretic Hormone)

ADRENALIN (See Catecholamines, Fractionated)

ADRENOCORTICOTROPIC HORMONE (ACTH)

LAB CODE: 5015

Specimen Requirements: 1mL EDTA Plasma  
Collect: Lavender Top Tube. Centrifuge. Transfer Plasma into transfer tube. Critical Frozen. Must be separated from cells and frozen within 1 hour.  
Storage and Transport: Frozen  
Reported: In 3-5 Days  
Notes: Draw between 7am and 10am. Please submit a separate sample for any additional tests requiring a frozen sample.

AFB (See Culture, Acid Fast)

AFP (See Alpha-Fetoprotein)

ALBUMIN

LAB CODE: 2201

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**ALDOLASE**

LAB CODE: 2440

Specimen Requirements: 2 mL serum.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Remove serum from clot. Transport in plastic tube.

**ALDOSTERONE, SERUM**

LAB CODE: 5019

Specimen Requirements: 2mL Serum.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

**ALDOSTERONE, URINE**

LAB CODE: 5020

Specimen Requirements: 24 Hour Urine. Collection start and completion times must be noted. Must be shipped within 24 hours of collection.  
Collect: 24 Hour Urine Container  
Storage and Transport: Refrigerated during and after collection  
Reported: In 2-9 Days

**ALKALINE PHOSPHATASE**

LAB CODE: 2206

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**ALKALINE PHOSPHATASE ISOENZYMES (HEAT STABLE)**

LAB CODE: 2653

Specimen Requirements: 3mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated. Do not freeze.  
Reported: In 1 Day. Same Day Results available in certain areas.

**ALLERGY TESTING**

For information on Allergy Panels and individual allergens, please contact Client Services.

**ALPHA-1-ANTITRYPSIN (ANTI-TRYPSIN)**

LAB CODE: 5605

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube

Storage and Transport: Refrigerated  
Reported: In 3-5 Days

ALPHA-FETOPROTEIN, TUMOR MARKER

LAB CODE: 5036

Specimen Requirements: 1 mL Serum  
Collected: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days  
Billing Notes: Medicare Limited Coverage Test

ALANINE AMINOTRANSFERASE (See ALT)

ALT (ALANINE AMINOTRANSFERASE)

LAB CODE: 2209

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas

AMINOPHYLLINE (See Theophylline)

AMMONIA

LAB CODE: 2695

Specimen Requirements: 2mL EDTA Plasma. Specimen must be centrifuged immediately and plasma transferred to plastic transfer tube and frozen immediately.  
Collect: Lavender Top Tube  
Storage and Transport: Frozen  
Reported: In 1 Day. Same Day Results available in certain areas.  
Notes: Please submit a separate sample for any additional tests requiring a frozen sample.

AMYLASE

LAB CODE: 2100

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

ANA (See Anti-Nuclear Antibody Screen)

ANAEROBIC CULTURE (See Culture, Anaerobic)

ANDROSTENEDIONE

LAB CODE: 25162

Specimen Requirements: 1 mL Serum  
Collect: Plain Red Top Tube. Centrifuge and transfer serum into transfer tube ASAP.  
Storage and Transport: Refrigerated  
Reported In: In 4-7 Days

ANGIOTENSIN CONVERTING ENZYME (ACE)

LAB CODE: 5049

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated.  
Reported: In 2-4 Days

ANTI-CENTROMERE ANTIBODY

LAB CODE: 2607

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

ANTI-DNA (DOUBLE STRAND)

LAB CODE: 2640

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days

ANTI-HISTONE ANTIBODY

LAB CODE: 5061

Specimen Requirements: 1 mL Serum.  
Collect: Serum Separator Tube.  
Storage and Transport: Refrigerate  
Reported: In 3-7 Days

ANTI-LA (See SSB Antibodies)

ANTI-MICROSOMAL ANTIBODIES (See Anti-Thyroid Peroxidase Antibodies)

**ANTI-MITOCHONDRIAL ANTIBODIES**

LAB CODE: 5063

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days

**ANTI-NUCLEAR ANTIBODY SCREEN (ANA)**

LAB CODE: 2600

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days

**ANA WITH REFLEX CONFIRMATION PANEL**

LAB CODE: 2630

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: A positive result on this ANA Screen reflexes to a confirmation panel including SSA, SSB, SM, RNP, SCL-70, JO-1, DSDNA, Centromere and Histone Antibodies.

**ANTI-RO (See SSA Antibodies)****ANTI-RNP ANTIBODIES**

LAB CODE: 50000

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**ANTI-SCLERODERMA (SCL-70) ANTIBODY**

LAB CODE: 5069

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**ANTI-SMITH (SM) ANTIBODIES**

LAB CODE: 50001

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**ANTI-SMOOTH MUSCLE ANTIBODIES**

LAB CODE: 5070

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

**ANTI-THYROGLOBULIN ANTIBODIES**

LAB CODE: 50014

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days

**ANTI-THYROID PEROXIDASE ANTIBODIES (TPO) (MICROSOMAL AB)**

LAB CODE: 5017

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days

**ANTI-TRYPSIN (See Alpha-1-Antitrypsin)****ARSENIC, BLOOD**

LAB CODE: 5088

Specimen Requirements: 3mL EDTA Whole Blood  
Collect: Dark Blue Top Tube with EDTA  
Storage and Transport: Room Temperature  
Reported: In 3-5 Days

**ASO (See Anti-Streptolysin-O)****ASPARTATE AMINOTRANSFERASE (See AST)**

**AST (ASPARTATE AMINOTRANSFERASE)**

LAB CODE: 2208

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**BENCE-JONES PROTEIN (See Immunoelectrophoresis, Urine)****BETA-2-MICROGLOBULIN, SERUM**

LAB CODE: 5095

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Overnight Fast preferred.

**BETA-HCG, QUALITATIVE**

LAB CODE: 4002

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**BETA-HCG, QUANTITATIVE**

LAB CODE: 2608

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**BICARBONATE (See Carbon Dioxide - CO<sub>2</sub>)****BILIRUBIN, DIRECT**

LAB CODE: 2112

Specimen Requirements: 1 mL Serum. Protect specimen from bright light by wrapping in foil or using amber tube.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

BILIRUBIN, FRACTIONATED (Total, Direct and Indirect)

LAB CODE: 2550

Specimen Requirements: 2mL Serum. Protect specimen from bright light by wrapping in foil or using amber tube.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerate  
Reported: In 1 Day. Same Day Results available in certain areas.

BILIRUBIN, TOTAL

LAB CODE: 2205

Specimen Requirements: 1mL Serum. Protect from light specimen from bright light by wrapping in foil or using amber tube.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

BIOPSIES (See Pathology)

BLOOD CULTURE (See Culture, Blood)

BLOOD TYPE (See ABO GROUP and RH)

BLOOD UREA NITROGEN (BUN)

LAB CODE: 2215

Specimen Requirements: 1mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

BUN (See Blood Urea Nitrogen)

C-PEPTIDE

LAB CODE: 5200

Specimen Requirements: 2mL Serum. Patient should be fasting 12 hours prior to collection.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days



C-REACTIVE PROTEIN (CRP), HIGH SENSITIVITY (CARDIAC)

LAB CODE: 4016

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Not covered by Medicare

C-REACTIVE PROTEIN (CRP), QUANTITATIVE

LAB CODE: 4012

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

CANCER ANTIGEN 15-3 (CA 15-3)

LAB CODE: 5110

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube. Centrifuge. Transfer serum into plastic transfer tube.  
Storage and Transport: Refrigerated  
Reported: 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

CANCER ANTIGEN 19-9 (CA 19-9)

LAB CODE: 5111

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube. Centrifuge. Transfer serum into plastic transfer tube.  
Storage and Transport: Refrigerated  
Reported: In 4-5 Days  
Billing Notes: Not Covered by Medicare

CANCER ANTIGEN 27.29 (CA 27.29)

LAB CODE: 5687

Specimen Requirements: 2mL Serum  
Collect: SST. Centrifuge. Transfer serum into plastic transfer tube.  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

## CANCER ANTIGEN 125 (CA-125)

LAB CODE: 5112

Specimen Requirements: 2mL Serum  
 Collect: Serum Separator Tube.  
 Storage and Transport: Refrigerate  
 Reported: In 5-7 Days  
 Notes: Transfer serum from SST into transfer tube.  
 Billing Notes: Medicare Limited Coverage Test

## CALCIUM, IONIZED

LAB CODE: 5121

Specimen Requirements: 2mL Serum in unopened SST.  
 Collect: Serum Separator Tube unopened  
 Storage and Transport: Refrigerated  
 Reported: In 3-5 Days  
 Notes: Please submit a separate sample for any additional tests ordered.  
 Billing Notes: Medicare Limited Coverage Test

## CALCIUM, SERUM

LAB CODE: 2203

Specimen Requirements: 1mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerate  
 Reported: In 1 Day. Same Day Results available in certain areas.  
 Billing Notes: Medicare Limited Coverage Test

## CALCIUM, RANDOM URINE

LAB CODE: 2255

Specimen Requirements: 10mL Random Urine  
 Collect: Urine Cup  
 Storage and Transport: Refrigerated  
 Reported: In 1 Day

## CALCIUM, 24 HOUR URINE

LAB CODE: 2231

Specimen Requirements: 24 Hour Urine. Collection start and completion time should be noted.  
 Collect: 24 Hour Urine Container  
 Storage and Transport: Refrigerated during and after collection  
 Reported: In 1 Day

CARBON DIOXIDE (CO<sub>2</sub>, Bicarbonate)

LAB CODE: 2214

Specimen Requirements: 1mL Serum in unopened SST

Collect: Serum Separator Tube unopened  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

CARCINOEMBRYONIC ANTIGEN (CEA)

LAB CODE: 2655

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days  
Billing Notes: Medicare Limited Coverage Test

CARDIOLIPIN ANTIBODIES, IgG, IgM, IgA

LAB CODE: 5862

Specimen Requirements: 1 mL Frozen Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

CATECHOLAMINES, FRACTIONATED, PLASMA

LAB CODE: 25109

Specimen Requirements: 4mL Heparinized Plasma  
Collect: Green Top Tube. Centrifuge specimen, and transfer plasma into plastic vial. Plasma should be separated from cells ASAP. Freeze.  
Storage and Transport: Frozen  
Reported: In 3-5 Days  
Notes: Please submit a separate sample for any additional tests requiring a frozen sample.  
Comment: Patient should be calm and in a supine position for 30 minutes prior to collection. Fractionated Catecholamines includes Epinephrine, Norepinephrine and Dopamine. If possible, patients should discontinue all drugs at least 1 week prior to collection. Medications known to interfere with the assay include: Alpha-methyldopa (Aldomet), Isoproterenol, Labetalol, Mandelamine, Metoclopramide, Acetaminophen (high concentrations only), Cimetidine, and Catecholamine-containing drugs, MAO inhibitors, diuretics and vasodilators. The patient must stop smoking and drinking coffee or tea for a minimum of four hours before sample is drawn.

**CATECHOLAMINES, FRACTIONATED, URINE**

LAB CODE: 25143

Specimen Requirements: 24 Hour Urine. Collection start and completion times should be noted. Must stay Refrigerated during collection.

Collect: 24 Hour Urine Container

Storage and Transport: Refrigerated during and after collection

Reported: In 3-5 Days

Comment: Catecholamines, Fractionated includes Epinephrine, Norepinephrine and Dopamine. If possible, patient should discontinue all drugs at least 1 week prior to collection. Medications known to interfere with this assay include: Alpha-methyldopa (Aldomet), Isoproterenol, Labetalol, Mandelamine, Metaclopramide, Acetaminophen (high concentrations only), Cimetidine, and Catecholamine-containing drugs, MAO inhibitors, diuretics, vasodilators. Other interfering substances include smoking and drinking tea within 4 hours of collecting specimen.

**CBC WITH DIFFERENTIAL & PLATELET COUNT**

LAB CODE: 3000

Specimen Requirements: 4mL EDTA Whole Blood

Collect: Lavender Top Tube. Invert tube 5 times immediately following collection.

Storage and Transport: Refrigerated

Reported: In 1 Day. Same Day Results available in certain areas.

Billing Notes: Medicare Limited Coverage Test

Comment: If abnormal cells are noted on a manual review of peripheral blood smear or if the automated differential information meets specific criteria, a full manual differential will be performed.

**CBC WITHOUT DIFFERENTIAL (See Hemogram)**

LAB CODE: 3000

**CEA (See Carcinoembryonic Antigen)****CELL COUNT and DIFFERENTIAL, BODY FLUID**

LAB CODE: 3042

Specimen Requirements: 1 mL Body Fluid in EDTA

Collect: Lavender Top Tube (with liquid EDTA). Specimen should be placed into lavender top tube and mixed immediately after collection to avoid clotting.

Storage and Transport: Refrigerated

Reported: In 1 Day

Comment: Specimens submitted in syringes with needles are not acceptable. If multiple tubes are drawn, label tubes with the order of drawn (i.e. 1, 2, 3).

CELL COUNT and DIFFERENTIAL, CEREBROSPINAL FLUID (CSF)

LAB CODE: 3045

Specimen Requirements: 1 mL CSF Fluid  
Collect: Sterile Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day  
Comment: Specimens submitted in syringes with needles are not acceptable. If multiple tubes are drawn, label tubes with the order of drawn (i.e. 1, 2, 3).

CEREBROSPINAL FLUID CULTURE (See Culture, Cerebrospinal Fluid)

CERULOPLASMIN

LAB CODE: 5135

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days

CH50 (See Complement Total)

CHLAMYDIA CULTURE (See Culture, Chlamydia)

CHLORIDE

LAB CODE: 2213

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge ASAP.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

CHOLESTEROL, TOTAL

LAB CODE: 2223

Specimen Requirements: 1 mL Serum. Indicate if patient is fasting.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**CLOSTRIDIUM DIFFICILE, TOXIN A/B**

LAB CODE: 6034

Specimen Requirements: 3mL Stool  
Collect: Sterile Cup with leakproof lid.  
Specimens with Formalin, PVA or other preservatives, on swabs, in tissue or dried out are not acceptable. Specimen must be submitted within 24 hours of collection.

Storage and Transport: Refrigerate  
Reported: In 5-7 Days

**CMV (See Cytomegalovirus)****COMPLEMENT C3**

LAB CODE: 2680

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Transfer to plastic transfer tube.

**COMPLEMENT C4**

LAB CODE: 2681

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Transfer to plastic transfer tube.

**COMPLEMENT TOTAL (CH50)**

LAB CODE: 5177

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube. Centrifuge. Transfer serum from SST plastic transfer tube. Freeze plastic tube.

Storage and Transport: Frozen  
Reported: In 3-5 Days  
Notes: Please submit a separate sample for any additional tests requiring a frozen sample.

**COOMBS, INDIRECT (See Antibody Screen)****COPPER, SERUM**

LAB CODE: 5179

Specimen Requirements: 2mL Serum

Collect: Dark Blue Top Tube without Additive. Do not use SST or Plain Red Top Tube. Centrifuge and transfer serum into transfer tube ASAP.  
Storage and Transport: Refrigerate  
Reported: In 3-7 Days

CORTISOL, TOTAL

LAB CODE: 2305

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

CK (Creatine Kinase)

LAB CODE: 2105

Specimen Requirements: 1mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

CPK (See CK)

CREATINE KINASE (See CK)

CREATININE CLEARANCE

LAB CODE: 2245

Specimen Requirements: 24 Hour Urine and 1mL Serum. Note collection start and completion times for 24 Hour Urine.  
Collect: 24 Hour Urine Container and Serum Separator Tube.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day  
Comment: Serum sample should be collected during the same period as the 24 urine sample. Patient's height and weight must be submitted.

CREATININE, SERUM

LAB CODE: 2216

Specimen Requirements: 1mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**CREATININE with GFR, SERUM**

LAB CODE: 2449

Specimen Requirements: 1 mL Serum. Patient's age required.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**CREATININE, URINE, 24 HOUR**

LAB CODE: 2230

Specimen Requirements: 24 Hour Urine. Note collection start and completion times for 24 Hour Urine.  
Collect: 24 Hour Urine Container  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day

**CRP (See C-Reactive Protein)****CRYSTAL ANALYSIS**

LAB CODE: 3800

Specimen Requirements: 1 mL Body Fluid  
Collect: Lavender Top Tube (with Liquid EDTA)  
Storage and Transport: Refrigerated  
Reported: In 1 Day  
Comment: Specimens submitted in syringes with needles are not acceptable.

**CULTURES**

Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbics tested.

- Check expiration of each swab, culturette, media, or collection device prior to collecting specimen.
- If there is an ampule at the bottom of the culturette, break the ampule to expose swab to transport media once the swab has been replaced into culturette.
- Label the swab with patient name, date, and source of specimen.
- Follow the instructions for each specific test.
- All culture specimens must be submitted within 24 hours of collection.
- Indicate if certain organisms or clinical conditions are suspected (i.e., R/O MRSA, suspect Brucella, etc.)



**CULTURE & SMEAR, ACID FAST (AFB)**

LAB CODE: 25115

Specimen Requirements:	Submit 3 to 5 early morning Sputum specimens in Sterile Container (minimum 1mL each). Other acceptable specimens are aspirates, bronchial washing, urine, stool, spinal fluid, body fluid, tissue and swabs. Do not submit 24 hour or pooled collections. Submit only one specimen per day. Specify source.
Collect:	Sterile Container
Storage and Transport:	Refrigerated
Reported:	In 8 weeks
Notes:	Identification by DNA Probe/Sequencing will be performed at additional charge.

**CULTURE, AEROBIC (ROUTINE)**

LAB CODE: 6000

Specimen Requirements:	Swab in Transport Media. Specify Source.
Collect:	Swab for most sources. When submitting tissue, store tissue in sterile container filled with sterile saline. Do not collect in formalin.
Storage and Transport:	Refrigerated
Reported:	In 2-3 Days
Notes:	Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of antimicrobics tested.

**CULTURE, AEROBIC with GRAM STAIN (ROUTINE)**

LAB CODE: 6010

Specimen Requirements:	Swab in Transport Media or Fluid in sterile container. Specify Source.
Collect:	Swab
Storage and Transport:	Swab - Refrigerated; Fluid - Room Temperature
Reported:	In 2-3 Days
Notes:	Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of antimicrobics tested.

**CULTURE, ANAEROBIC (includes Aerobic Culture and Gram Stain)**

LAB CODE: 6015

Specimen Requirements:	Swab in Transport Media. Specify Source.
Collect:	Swab
Storage and Transport:	Room Temperature
Reported:	In 3-4 Days
Notes:	Organism identifications are performed on all significant isolates. Beta lactamase is tested for appropriate isolates. Anaerobic sensitivities are not performed. Anaerobic cultures will not be performed on inappropriate sources. Additional charges and

CPT coding are dependent on methods and number of anti-microbics tested.

CULTURE, BETA STREP GROUP A

LAB CODE: 6013

Specimen Requirements: Swab  
Collect: Throat Swab  
Storage and Transport: Room Temperature  
Reported: In 2-3 Days

CULTURE, BETA STREP GROUP B

LAB CODE: 6023

Specimen Requirements: Swab  
Collect: Genital Swab  
Storage and Transport: Room Temperature  
Reported: In 2-3 Days

CULTURE, BLOOD, Routine Aerobic and Anaerobic

LAB CODE: 6001

Specimen Requirements: 2 Blood Culture Bottles (1 set of 2 bottles). One bottle is for aerobic, the other for anaerobic. If only one bottle is submitted, aerobic testing will be performed.

Collect: 2 Blood Culture Bottles (1 set). 2-3 sets are recommended in adults (20ml per set). Do not collect more than 3 sets in 24 hours. Label with Collection time and site.

Collection Instructions: 1. Select vein for venipuncture. Aseptically cleanse the skin with alcohol. Wipe the area with alcohol, using a circular motion, wiping out from the "inside" of the circle to the "outside" of the circle for 30 seconds.. Allow to disinfect for 1-2 minutes.  
2. Clean the tops of the blood culture bottles with alcohol pad. Allow to disinfect for 1-2 minutes.  
3. Draw blood without further touching or further palpating the vein or decontaminated area.  
4. Fill each blood culture bottle with a minimum of 10 ml of blood.  
5. Mix bottles, gently. Label specimens with complete patient name, time, date and site.

Storage and Transport: Room Temperature. Do not refrigerate.

Reported: In 7 Days

Notes: Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbial tested.

**CULTURE, CEREBROSPINAL FLUID (CSF)**

LAB CODE: 6002

Specimen Requirements: CSF. Tube 2 or 3 should be used for culture.  
Collect: Sterile Plastic Tubes (without additive)  
Storage and Transport: Room Temperature. Do not Refrigerate  
Reported: In 7 Days  
Notes: Organism identification and sensitivities are automatically performed on all significant isolates. Beta lactamase testing is only performed on Haemophilus and Neisseria sp. For pneumococcus, presumptive Penicillin sensitivity will be determined. Additional charges and CPT coding are dependent on methods and number of anti-microbics tested.

**CULTURE, CHLAMYDIA**

LAB CODE: 5725

Specimen Requirements: M4 Transport Media Swab or Viral Transport Media. Indicate source and patient's date of birth  
Collect: M4 Transport Media Swab or Viral Transport Media.  
Collection Instructions: Do not use swabs with wooden shafts. Collect specimen on a swab in an area where columnar epithelial cells can be found. Place swab immediately in to M4 media.  
Storage and Transport: Refrigerated, if submitted within 24 hours. Otherwise, frozen.  
Reported: In 4-7 Days

**CULTURE, FUNGAL (Nails / Hair / Skin)**

LAB CODE: 6025

Specimen Requirements: Nail, Hair or Skin. Indicate Source on request form.  
Collect: Nails: Cut Nail into fine pieces. Place in dry, sterile container.  
Hair: Place Hair in dry, sterile container.  
Skin Scrapings: Place in sterile container with secured lid or between sterile slides in a sterile container with secured lid.  
Storage and Transport: Room Temperature  
Reported: In 14-28 Days

**CULTURE, FUNGAL (Blood)**

LAB CODE: 6053

Specimen Requirements: Maximum allowable volume of Whole Blood collected in 1 set of blood culture bottles. Use aseptic technique during venipuncture.  
Collect: One Set of Blood Culture bottles  
Storage and Transport: Room Temperature  
Reported: In 28-56 Days

**CULTURE, FUNGAL (Other Sources)**

LAB CODE: 6052

Specimen Requirements: Bone Marrow, Cerebrospinal Fluid, Corneal Scrapings, Tissues, Urine, Respiratory (throat, sputum, ear, nose), Urogenital-Vaginal, stool or other cutaneous (exudates, pus, drainage, foot wound) specimens  
Collect: Sterile (leakproof) Container

Storage and Transport: Please call Client Services for source specific collection instructions.  
Reported: Varies by source

CULTURE, GONORRHEA

LAB CODE: 6003

Specimen Requirements: Swab in Transport Media  
Collect: Swab  
Storage and Transport: Room Temperature. Do not refrigerate after collection.  
Reported: In 3-5 Days  
Notes: Specimen must be received within 24 hours of collection. Organism identification and beta-lactamase testing is automatically performed on all significant isolates. Additional charges apply for these procedures.

CULTURE, GENITAL

LAB CODE: 6008

Specimen Requirements: Swab in Transport Media. Specify Source.  
Collect: Swab  
Storage and Transport: Room Temperature. Do not refrigerate after collection.  
Reported: In 3-5 Days  
Notes: Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbial tested.

CULTURE, HERPES SIMPLEX VIRUS

LAB CODE: 5908

Specimen Requirements: Viral Transport Media  
Collect: Viral Media  
Storage and Transport: Refrigerated  
Reported: In 6-8 Days  
Notes: Unacceptable specimens: Whole blood, urine, stool, wooden swabs, and calcium alginate Specify exact specimen source/origin.

CULTURE, ROUTINE (See Culture, Aerobic)

CULTURE, SPUTUM / RESPIRATORY (includes Gram Stain)

LAB CODE: 6009

Specimen Requirements: Sputum  
Collect: First morning sputum in Sterile Container  
Storage and Transport: Refrigerated  
Reported: In 2-3 Days  
Notes: Do not collect more than one specimen per day. Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbial tested. Beta

lactamase testing will be performed only for Haemophilus, Moraxella and Neisseria.

CULTURE, STOOL (includes Shiga Toxin 1 / 2 and Campylobacter Antigen) LAB CODE: 6005

Specimen Requirements: Stool  
Collect: Sterile Specimen Container or clean vial. Cary-Blair transport swab is acceptable. One stool culture specimen per day is adequate.  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of antimicrobics tested. Routine screening includes Salmonella Shigella, Campylobacter Antigen, Yersinia, Vibrio and Shiga Toxins 1 & 2.

CULTURE, SYNOVIAL FLUID (includes Gram Stain) LAB CODE: 6010

Specimen Requirements: Synovial Fluid  
Collect: Aseptically aspirated fluid in sterile container or cup. Syringe without needle is acceptable for small quantities. Syringes with needles will not be accepted. Swab is acceptable but not optimal.  
Storage and Transport: Room Temperature  
Reported: In 3-5 Days  
Notes: Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of antimicrobial tested. Beta lactamase testing will be performed only for Neisseria.

CULTURE, THROAT / NOSE / NARES LAB CODE: 6006

Specimen Requirements: Swab in Transport Media  
Collect: Swab  
Storage and Transport: Room Temperature  
Reported: In 2-3 Days  
Notes: Do not collect more than one specimen per day. Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbial tested. Beta lactamase testing will be performed only for Haemophilus, Moraxella and Neisseria. Please indicate suspected MRSA, when applicable.

CULTURE, URINE (with Colony Count) LAB CODE: 6007

Specimen Requirements: First Morning Clean Catch Midstream or Catheterized Urine

Collect: Urine in a sterile, leakproof container. Keep Refrigerated. Swab specimens are undesirable and cannot be used for colony counts.

Storage and Transport: Refrigerated

Reported: In 2-3 Days

Notes: Do not collect more than one specimen per day. Organism identification and sensitivities are automatically performed on all significant isolates. Additional charges and CPT coding are dependent on methods and number of anti-microbial tested.

Billing Notes: Medicare Limited Coverage Test

CULTURE, VIRAL

LAB CODE: 5730

Specimen Requirements: Swab in M4 Viral Transport Media or Viral Transport Media. Specify Source.

Collect: M4 Transport Media

Storage and Transport: Frozen

Reported: In 10-26 Days

CYCLOSPORA (See Cryptosporidium Smear)

CYANOCOBALAMIN (See Vitamin B12)

CYTOLOGY, URINE

LAB CODE: 8110

Specimen Requirements: Urine

Collect: Sterile Container

Collection Instructions: For specimens from males, a midday voided urine is preferred. For specimens from females, a catheterized urine is best in order to avoid vaginal contamination. If this is not possible, a midday mid-stream specimen is satisfactory. If the patient has hematuria, it is best to hydrate him/her before collecting the specimen. This is accomplished by having the patient drink one glass of water every 30 minutes for a 3 hour period. A specimen collected over a period of time is unacceptable. Three urines from the same day or from three consecutive days are satisfactory. The specimen should be refrigerated. All containers must be labeled with patient name, date and time collected.

Storage and Transport: Refrigerated

Reported: In 3-4 Days

CYTOMEGALOVIRUS ANTIBODY, IgG

LAB CODE: 5225

Specimen Requirements: 1 mL Serum

Collect: Serum Separator Tube

Storage and Transport: Refrigerated

Reported: In 3-5 Days

DEHYDROEPIANDROSTERONE (See DHEA)

DEHYDROEPIANDROSTERONE-SULFATE (See DHEA-S)

DEPAKENE (See Valproic Acid)

DHEA (Dehydroepiandrosterone)

LAB CODE: 5234

Specimen Requirements:	2mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Refrigerated
Reported:	In 4-6 Days

DHEA SULFATE

LAB CODE: 5235

Specimen Requirements:	1 mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Refrigerated
Reported:	In 3-5 Days

DIGOXIN (Lanoxin)

LAB CODE: 2000

Specimen Requirements:	1 mL Serum. 6-8 Hours after last dose.
Collect:	Serum Separator Tube or Plain Red Top Tube
Storage and Transport:	Refrigerated
Reported:	In 1 Day. Same Day Results available in certain areas.
Billing Notes:	Medicare Limited Coverage Test

DILANTIN (See Phenytoin)

DOPAMINE (See Catecholamines, Fractionated)

EBV (See Epstein Barr Virus)

EPSTEIN BARR VIRUS (EBV) AB TO EARLY AG, IgG

LAB CODE: 5190

Specimen Requirements:	1 mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Frozen
Reported:	In 3-5 Days

EPSTEIN BARR VIRUS (EBV) AB TO NUCLEAR AG, IgG

LAB CODE: 5195

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Frozen  
Reported: In 3-5 Days

EPSTEIN BARR VIRUS (EBV) AB TO VIRAL CAPSID AG (VCA), IgG

LAB CODE: 5196

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Frozen  
Reported: In 3-5 Days

EPSTEIN BARR VIRUS (EBV) AB TO VIRAL CAPSID AG (VCA), IgM

LAB CODE: 5197

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Frozen  
Reported: In 3-5 Days

ELECTROLYTES (See Profile Section at the end of the Test Listing)

ENA (See Extractable Nuclear Antigen Antibodies)

ENVIRONMENTAL CULTURE (See Culture, Environmental)

EOSINOPHIL COUNT (ABSOLUTE)

LAB CODE: 3506

Specimen Requirements: 2mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert tube 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day

EOSINOPHIL NASAL SMEAR

LAB CODE: 3518

Specimen Requirements: Nasal smear submitted on glass slide.  
Collect: Glass slide submitted in slide holder.  
Storage and Transport: Room Temperature  
Reported: In 1 Day



## ERYTHROPOIETIN

LAB CODE: 5247

Specimen Requirements: 1 mL Serum  
 Collect: Serum Separator Tube. Centrifuge. Transfer Serum from SST into plastic transfer tube.  
 Storage and Transport: Refrigerated  
 Reported: In 3-5 Days  
 Notes: Recommend collection between 7:30am and Noon.

## ESR (See Sedimentation Rate)

## ESTRADIOL

LAB CODE: 2669

Specimen Requirements: 2mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerated  
 Reported: In 1-3 Days

## ESTROGEN, TOTAL

LAB CODE: 5255

Specimen Requirements: 3mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerated  
 Reported: In 2-5 Days

## ESTRONE

LAB CODE: 5257

Specimen Requirements: 1 mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerated  
 Reported: In 3-5 Days

## EXTRACTABLE NUCLEAR ANTIGEN ANTIBODIES (Anti-Sm &amp; Anti-RNP)

LAB CODE: 50006

Specimen Requirements: 1 mL Serum  
 Collect: Serum separator tube  
 Storage and Transport: Refrigerated  
 Reported: In 1-3 Days

## FECAL FAT, QUALITATIVE

LAB CODE: 6031

Specimen Requirements: 0.5mL Random Stool  
 Collect: Airtight Sterile Container  
 Storage and Transport: Refrigerated  
 Reported: In 1-3 Day

FECAL LEUKOCYTES (See Lactoferrin)

FERRITIN

LAB CODE: 2604

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

FINE NEEDLE ASPIRATE (See Cytology, Fine Needle Aspirate)

FLUORESCENT TREPONEMAL ANTIBODY (See FTA-ABS)

FOLIC ACID (Folate)

LAB CODE: 2402

Specimen Requirements: 2mL Serum. Protect from Light.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerate  
Reported: In 1-3 Days  
Notes: Fasting recommended.  
Billing Notes: Medicare Limited Coverage Test

FOLLICLE STIMULATING HORMONE (FSH)

LAB CODE: 2662

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days

FSH (See Follicle Stimulating Hormone)

FTA-ABS (Fluorescent Treponemal Antibody)

LAB CODE: 5276

Specimen Requirements: 2mL Serum. Indicate patient's date of birth.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

FUNGAL CULTURE (See Culture, Fungal)

GAMMA-GLUTAMYLTRANSFERASE (GGT)

LAB CODE: 2210

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

GASTRIN

LAB CODE: 5290

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube. Centrifuge. Transfer Serum from SST into 2 plastic vials ASAP. Freeze immediately.  
Storage and Transport: Frozen  
Reported: In 4-7 Days  
Notes: Patient should fast 12 hours prior to collection. Please submit a separate sample for any additional tests requiring a frozen sample.

GESTATIONAL GLUCOSE CHALLENGE (See Glucose, 50 Gram Screen)

GGT (See Gamma-Glutamyltransferase)

GIARDIA LAMBLIA ANTIGEN

LAB CODE: 5141

Specimen Requirements: 10 g fresh stool refrigerated or Preserved Stool in Ecofix or Unifix  
Collect: Sterile leak-proof specimen container. No more than 1 specimen per day.  
Storage and Transport: Refrigerated.  
Reported: In 3-5 Days  
Notes: PVA not acceptable

GLUCOSE, BODY FLUID

LAB CODE: 3049

Specimen Requirements: 1 mL Body Fluid  
Collect: Plain Red Top Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**GLUCOSE, SERUM**

LAB CODE: 2217

Specimen Requirements: 1 mL Serum or 1 mL Sodium Fluoride Plasma  
Collect: Serum Separator Tube or Gray Top Tube. Indicate if patient is fasting.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test  
Notes: If using a Gray Top Tube, specimen must be centrifuged and plasma transferred into a plastic transfer tube as soon as possible.

**GLUCOSE, 50 GRAM SCREEN**

LAB CODE: 2101

Specimen Requirements: 1 mL Serum or 1 mL Sodium Fluoride Plasma  
Collect: Serum Separator Tube or Gray top tube. Remove plasma from Gray Top tube and submit in plastic transfer tube. Collect specimen one hour after giving patient 50 grams of Glucola. Patient does not need to be fasting.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**GLUCOSE TOLERANCE TEST (GTT)**

This test requires that a series of specimens be drawn. The first specimen collected is a fasting glucose. The patient is then given 100 grams of Glucola to drink within 5 minutes. 30 minutes after consumption, the second sample (½ Hour Glucose) is drawn. 30 minutes later the third (1 Hour) specimen is drawn. Thereafter, one specimen is drawn every hour for the duration of the testing period. Each specimen must be labeled with the time drawn. If this test is to be drawn at an IML Patient Service Center, please call for an appointment.

**GLUCOSE TOLERANCE (1 HOUR)**

LAB CODE: 1501

Includes: Fasting Glucose, ½ Hour Glucose, 1 Hour Glucose  
Specimen Requirements: 2mL Serum or Sodium Fluoride Plasma (each specimen)  
Collect: Serum Separator Tube or Gray Top Tube (each specimen)  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**GLUCOSE TOLERANCE (2 HOUR)**

LAB CODE: 1506

Includes: Fasting Glucose, ½ Hour Glucose, 1 Hour Glucose, 2 Hour Glucose  
Specimen Requirements: 2mL Serum or Sodium Fluoride Plasma (each specimen)  
Collect: Serum Separator Tube or Gray Top Tube (each specimen)  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**GLUCOSE TOLERANCE (3 HOUR)**

LAB CODE: 1511

Includes: Fasting Glucose, ½ Hour Glucose, 1 Hour Glucose, 2 Hour Glucose, 3 Hour Glucose  
Specimen Requirements: 2mL Serum or Sodium Fluoride Plasma (each specimen)  
Collect: Serum Separator Tube or Gray Top Tube (each specimen)  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**GLYCOHEMOGLOBIN (See Hemoglobin A<sub>1</sub>C)****GLYCOSYLATED HEMOGLOBIN (See Hemoglobin A<sub>1</sub>C)****GONORRHEA CULTURE (See Culture, Gonorrhea)****GRAM STAIN**

LAB CODE: 6011

Specimen Requirements: Culturette Swab, direct smear or specimen in sterile container  
Collect: Swab, Smear, Sterile Container.  
Storage and Transport: Room Temperature  
Reported: In 1 Day

**GROWTH HORMONE**

LAB CODE: 5300

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Note: Patient should fast for 12 hours and rested for 30 minutes prior to collection

**H & H (See Hemoglobin & Hematocrit)****HAPTOGLOBINS**

LAB CODE: 5302

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

HBSAB (See Hepatitis B Surface Antibody)

HBSAG (See Hepatitis B Surface Antigen)

HCG (See Beta-HCG)

HDL CHOLESTEROL

LAB CODE: 2110

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

HPV (See Human Papillomavirus)

HEMATOCRIT

LAB CODE: 3001

Specimen Requirements: 2 mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

HEMOGLOBIN

LAB CODE: 3004

Specimen Requirements: 2 mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

HEMOGLOBIN & HEMATOCRIT

LAB CODE: 3009

Specimen Requirements: 2 mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**HEMOGLOBIN A<sub>1</sub>C (Glycohemoglobin) (Glycosylated Hemoglobin)**

LAB CODE: 190

Specimen Requirements: 1 mL EDTA Whole Blood  
Collect: Lavender Top Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**HEMOGLOBIN A<sub>1</sub>C with Mean Plasma Glucose (estimated Average Glucose)**

LAB CODE: 197

Specimen Requirements: 1 mL EDTA Whole Blood  
Collect: Lavender Top Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**HEMOGRAM WITH PLATELETS (CBC without Differential)**

LAB CODE: 3002

Specimen Requirements: 3 mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert tube 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**HEPATITIS A ANTIBODY, TOTAL**

LAB CODE: 2707

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days

**HEPATITIS A ANTIBODY, IgM**

LAB CODE: 2705

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days

**HEPATITIS B CORE, TOTAL**

LAB CODE: 2634

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days

HEPATITIS B CORE, IgM

LAB CODE: 2710

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days

HEPATITIS B SURFACE ANTIBODY (IMMUNE STATUS), Quantitative

LAB CODE: 2702

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days  
Billing Notes: Medicare Limited Coverage Test

HEPATITIS B SURFACE ANTIGEN

LAB CODE: 2700

Specimen Requirements: 3 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days  
Notes: Positive screens will be automatically reflexed to Hepatitis B Surface Antigen Confirmation at an additional charge.  
Billing Notes: Medicare Limited Coverage Test

HEPATITIS BE ANTIGEN

LAB CODE: 5796

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

HEPATITIS C ANTIBODY

LAB CODE: 2667

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-5 Days

HEPATITIS PROFILE (See Profile Section)

HERPES CULTURE (See Culture, Herpes)



## HERPES SIMPLEX VIRUS 1 &amp; 2, IgG

LAB CODE: 5321

Specimen Requirements: 1 mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerated  
 Reported: In 2-4 Days

## HERPES SIMPLEX 1 / 2, IgG and IgM

LAB CODE: 5746

Specimen Requirements: 2mL Serum  
 Collect: Serum Separator Tube  
 Storage and Transport: Refrigerated  
 Reported: In 2-4 Days

## HISTOLOGY (See Pathology)

## HIV 1 ANTIGEN/ANTIBODY COMBINATION SCREEN

LAB CODE: 4020

Specimen Requirements: 4mL Serum  
 Collect: Unopened Serum Separator Tube. Tube must be labeled with patient's complete name and date of birth.  
 Storage and Transport: Refrigerated  
 Reported: In 2-5 Days for screen, 7-10 Days if confirmation is required  
 Notes: Positive Screens will automatically be reflexed to HIV 1/2 Ab Differentiation Assa6 and HIV1 RNA Qualitative for additional charge.

## HLA B27

LAB CODE: 5330

Specimen Requirements: 10mL Heparinized Whole Blood. Include patient's race and diagnosis on requisition.  
 Collect: Green Top Tube  
 Storage and Transport: Refrigerated  
 Reported: In 2-4 Days  
 Billing Notes: Medicare Limited Coverage Test

## HOMOCYSTEINE, QUANTITATIVE

LAB CODE: 25182

Specimen Requirements: 2ml EDTA Plasma.  
 Collect: Lavender Top Tube. Centrifuge and transfer plasma to transfer tube.  
 Storage and Transport: Refrigerated  
 Reported: In 3-5 Days  
 Billing Notes: Not covered by Medicare for Cardiac Screening

HPV (See Human Papillovirus)

HUMAN CHORIONIC GONADOTROPIN BETA CHAIN (HCG) (See Beta-HCG)

HUMAN PAPILLOMAVIRUS PROBE, High Risk

LAB CODE: 25219

Specimen Requirements: Digene Hybrid Capture or Cytoc ThinPrep<sup>®</sup> transport media  
Collect: Collect cervical specimen with cytology brush and place in Digene or Cytoc ThinPrep<sup>®</sup> test kit.  
Storage and Transport: Room temperature  
Reported: In 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

IgA, IgD, IgE, IgG, IgM (See Immunoglobulins)

IMMUNOELECTROPHORESIS, SERUM (See Immunofixation)

IMMUNOELECTROPHORESIS, URINE (RANDOM OR 24 HOUR)

LAB CODE: 5339

Specimen Requirements: 10mL Urine  
Collect: Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

IMMUNOFIXATION, SERUM with Pathologist's Interpretation

LAB CODE: 25205

Includes: Quantitative IgG, IgA, IgM and Immunofixation Interpretation.  
Specimen Requirements: 3 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

IMMUNOGLOBULIN A (IgA)

LAB CODE: 2683

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**IMMUNOGLOBULIN E (IgE)**

LAB CODE: 2663

Specimen Requirements: 1 ml Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days  
Billing Notes: Medicare Limited Coverage Test

**IMMUNOGLOBULIN G (IgG)**

LAB CODE: 2682

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**IMMUNOGLOBULIN M (IgM)**

LAB CODE: 2684

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**INDIRECT COOMBS (See Antibody Screen)****INR (See Prothrombin Time)****INSULIN**

LAB CODE: 25184

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge. Transfer serum into plastic transfer tube.  
Storage and Transport: Refrigerated  
Reported: In 7 Days  
Notes: Patient should be fasting.

**INSULIN-LIKE GROWTH FACTOR I (See Somatomedin-C)**

**IRON BINDING CAPACITY, TOTAL (TIBC) (Includes Total Iron)**

LAB CODE: 2106

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge within 1 hour of collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**IRON, TOTAL**

LAB CODE: 2219

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge within 1 hour of collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**ISOSPORIDIA (See Cryptosporidium Smear)****KIDNEY STONE ANALYSIS (See Stone Analysis)****KOH PREP**

LAB CODE: 6012

Specimen Requirements: Hair, Skin or Nails  
Collect: Sterile Container  
Storage and Transport: Room Temperature  
Reported: In 1-2 Days

**LACTIC ACID**

LAB CODE: 5359

Specimen Requirements: 2mL Sodium Fluoride Plasma  
Collect: Gray Top Tube. Specimen should be collected without use of tourniquet or immediately after tourniquet has been applied. Patient should avoid any exercise of arm or hand 30 minutes before or during specimen collection. Mix blood well and centrifuge immediately. Transfer Plasma into plastic transfer tube and refrigerate.  
Storage and Transport: Refrigerate  
Reported: In 3-5 Days

**LACTOFERRIN**

LAB CODE: 6035

Specimen Requirements: Non-Preserved Stool. No more than one specimen per day.  
Collect: Sterile Container  
Storage and Transport: Refrigerated

Reported:

In 1-2 Days

LANOXIN (See Digoxin)

LD (LACTATE DEHYDROGENASE)

LAB CODE: 2207

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Separate serum from cells ASAP.  
Storage and Transport: Refrigerate.  
Reported: In 1 Day

LDL CHOLESTEROL (DIRECT)

LAB CODE: 2238

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

LDL CHOLESTEROL (CALCULATION) (See Profile Listing, Lipid Profile)

LEAD, BLOOD

LAB CODE: 5368

Specimen Requirements: 5mL EDTA Whole Blood  
Collect: Dark Blue Top Tube with EDTA. Collect with lead free materials.  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

LIPASE

LAB CODE: 2102

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

LITHIUM

LAB CODE: 2020

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Collect at least 6 to 12 hours after last dose. Centrifuge after collection.  
Storage and Transport: Refrigerated  
Reported: In 2-4 Days.

LUMINAL (See Phenobarbital)

LUTEINIZING HORMONE (LH)

LAB CODE: 2664

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days

LYME DISEASE ANTIBODIES with Reflex to Blot)

LAB CODE: 5381

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: 3-5 Days  
Notes: Immunoblot will be performed at additional charge on positive results.  
Billing Notes: Not covered by Medicare

MAGNESIUM, SERUM

LAB CODE: 2228

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge ASAP.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

MAGNESIUM, URINE

LAB CODE: 2237

Specimen Requirements: 24 Hour Urine. Indicate collection time.  
Collect: 24 Hour Urine Container  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day  
Billing Notes: Medicare Limited Coverage Test

MEASLES ANTIBODY, IgG (RUBEOLA)

LAB CODE: 5249

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

MERCURY, BLOOD

LAB CODE: 25216

Specimen Requirements: 5mL EDTA Whole Blood

Collect: Dark Blue Top Tube with EDTA  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

MICROSPORIDIUM (See Cryptosporidium Smear)

MUMPS ANTIBODY, IgG

LAB CODE: 5406

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

MYCOBACTERIA CULTURE (See Culture & Smear, Acid Fast)

MYCOPLASMA PNEUMONIAE, IgG, IgM

LAB CODE: 5408

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

MYOGLOBIN, SERUM

LAB CODE: 5411

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

N. GONORRHEAE (See Gonorrhoeae)

NAPA (See Procainamide & NAPA)

**OCCULT BLOOD, FECAL by Immunoassay**

LAB CODE: 4633

Specimen Requirements: HemoSure Fecal Occult Blood Test Device  
Collect: Follow instructions in testing kit. Patients whose insurance restricts which lab may perform testing may require a different kit.  
Storage and Transport: Room Temperature  
Reported: In 1 Day  
Billing Notes: Medicare Limited Coverage Test

**OSMOLALITY, SERUM**

LAB CODE: 5415

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

**OSMOLALITY, URINE**

LAB CODE: 5416

Specimen Requirements: 1 mL Random Urine  
Collect: Sterile Urine Container  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

**OVA & PARASITES (O & P) Cryptosporidium/Giardia Antigen**

LAB CODE: 6030

Specimen Requirements: Stool in Ecofix or Unifix. No more than one specimen per day.  
Collect: O & P Container with Ecofix or Unifix  
Collection Instructions: Collect specimen in a clean, dry container. Transfer specimen to Ecofix container. Do not pass specimen into the toilet, or directly into the Ecofix container. Do not urinate into the specimen or allow any water to mix with the specimen. Label container.  
Storage and Transport: Room Temperature  
Reported: 3-7 Days



**PAP SMEAR, Conventional Methodology**

LAB CODE: 25218

Specimen Requirements: Cervical / Vaginal Pap Smear  
Collect: Pap Pack Collection Instructions  
Collection Instructions:

Label slide with patient name. Spray immediately with cytology fixative. The specimen should be obtained from the site nearest to the lesion if one is present. The smear must be fixed immediately. Do not use lubricant. The patient should be advised not to douche or have intercourse 24-48 hours prior to taking the smear. For optimal results, specimen should be collected 3 weeks following the first day of the Last Menstrual Period. Specimen should not be collected during any bleeding.

A completed requisition form needs to accompany the specimen. The following information is required: Patient's full name, Patient's date of birth, Date of last menstrual period, Date smear collected, Source, Pertinent clinical history i.e. BCP, pregnant, hysterectomy, etc.

Storage and Transport: Room Temperature  
Reported: In 5-7 Days  
Billing Notes: Medicare Limited Coverage Test

**PAP SMEAR, ThinPrep® (Monolayer) Methodology**

LAB CODE: 25217

Specimen Requirements: Cervical / Vaginal Pap Smear Specimen  
Collect: Cytoc Thin Prep® specimen container  
Collections Instructions:

Label container with patient name. The specimen should be obtained from the site nearest to the lesion if one is present. Do not use lubricant. The patient should be advised not to douche or have intercourse 24-48 hours prior to taking the smear. Collect with spatula followed by brush. Swirl brush and spatula in vial. For optimal results, specimen should be collected 3 weeks following the first day of the Last Menstrual Period. Specimen should not be collected during any bleeding.

A completed requisition form needs to accompany the specimen. The following information is required: Patient's full name, Patient's date of birth, Date of last menstrual period, Date smear collected, Source, Pertinent clinical history i.e. BCP, pregnant, hysterectomy, etc.

Storage and Transport: Room Temperature  
Reported: In 5-7 Days  
Billing Notes: Medicare Limited Coverage Test

**PARATHYROID HORMONE, INTACT**

LAB CODE: 5847

Specimen Requirements: 2 mL Serum.  
Collect: Serum Separator Tube. Centrifuge.  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days  
Notes: Please submit a separate sample for any additional tests requiring a frozen sample.

## PARTIAL THROMBOPLASTIN TIME (PTT)

LAB CODE: 4303

Specimen Requirements:	Complete Tube Citrated Whole Blood 3.2%
Collect:	Light Blue Top Tube. Invert tube 5 times after collection. Tube must be completely filled to "fill" line. Tubes not entirely filled or overfilled will be rejected.
Storage and Transport:	Refrigerated
Reported:	In 1 Day. Same Day Results available in certain areas.

## PATHOLOGY

Specimen submitted for pathology examination are categorized by Level in accordance with the specimen source and type as outlined by the American Medical Association in their Current Procedure Terminology (CPT) Book by the examining pathologist. Each separately identified or submitted specimen is processed as an individual sample and is charged as such. Additional procedures such as decalcification or special stains will be ordered as required by the pathologist to aid in diagnosis.

Tissue should be submitted in a sterile, leakproof formalin-filled container at Room Temperature, labeled with patient's name, source and site. Tissue containers with formalin fixative are available from the IML Supply Department.

Specimen Requirements:	Formalin Fixed Tissue
Collect:	Leakproof Container with Formalin Fixative
Storage and Transport:	Room Temperature
Reported:	In 4-7 Days
Billing Notes:	Medicare Limited Coverage Test

## PHENYTOIN

LAB CODE: 2005

Specimen Requirements:	1 mL Serum
Collect:	Serum Separator Tube or Plain Red Top Tube
Storage and Transport:	Refrigerated
Reported:	In 1 Day. Same Day Results available in certain areas.

## PHOSPHORUS, INORGANIC, SERUM

LAB CODE: 2204

Specimen Requirements:	1 mL Serum
Collect:	Serum Separator Tube. Centrifuge within 2 hours of collection.
Storage and Transport:	Refrigerated
Reported:	In 1 Day. Same Day Results available in certain areas.
Billing Notes:	Medicare Limited Coverage Test

**PHOSPHORUS, INORGANIC, URINE**

LAB CODE: 2232

Specimen Requirements: 24 Hour Urine  
Collect: 24 Hour Urine Container. Record collection time.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day

**PLATELET COUNT**

LAB CODE: 3005

Specimen Requirements: 3mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert tube 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Notes: If patient shows platelet clumping with EDTA, draw Light Blue Top Tube or indicate on order.  
Billing Notes: Medicare Limited Coverage Test

**POTASSIUM, SERUM**

LAB CODE: 2212

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge ASAP.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**POTASSIUM, URINE**

LAB CODE: 2251

Specimen Requirements: 10mL Random Urine  
Collect: Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**POTASSIUM, 24 HOUR URINE**

LAB CODE: 2235

Specimen Requirements: 24 Hour Urine  
Collect: 24 Hour Urine Container. Record collection time.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day  
Billing Notes: Medicare Limited Coverage Test

**PREGNANCY TEST, QUALITATIVE, SERUM (See Beta-hCG, Qualitative)****PREGNANCY TEST, QUANTITATIVE, SERUM (See Beta-hCG, Quantitative)**

PRO TIME (See Prothrombin Time)

PROGESTERONE

LAB CODE: 2668

Specimen Requirements: 2mL Serum. Patient's age and sex required.  
Collect: SST or Plain Red Top Tube (preferred)  
Storage and Transport: Refrigerated.  
Reported: In 3-7 Days

PROLACTIN

LAB CODE: 2660

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days

PRONESTYL (See Procainamide)

PROSTATIC ACID PHOSPHATASE (PAP)

LAB CODE: 51050

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube.  
Storage and Transport: Refrigerated  
Reported: In 5-7 Days  
Billing Notes: Medicare Limited Coverage Test

PROSTATIC SPECIFIC ANTIGEN (PSA)

LAB CODE: 2650

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube.  
Storage and Transport: Refrigerate. Freeze if not submitted to laboratory on same day specimen is collected.  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

PROSTATIC SPECIFIC ANTIGEN, FREE (includes PSA )

LAB CODE: 2048

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

PROTEIN ELECTROPHORESIS, SERUM

LAB CODE: 25204

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: Test includes Total Protein  
Billing Notes: Medicare Limited Coverage Test

PROTEIN ELECTROPHORESIS, SERUM w/ Pathologist's Interpretation

LAB CODE: 25206

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: Test includes Total Protein  
Billing Notes: Medicare Limited Coverage Test

PROTEIN ELECTROPHORESIS, SERUM w Reflex to IFE and Interpretation

LAB CODE: 25203

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: Test includes Total Protein  
Billing Notes: Medicare Limited Coverage Test

PROTEIN ELECTROPHORESIS, URINE (Includes Total Protein)

LAB CODE: 5929

Specimen Requirements: 10mL Random Urine  
Collect: Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Billing Notes: Medicare Limited Coverage Test

PROTEIN TOTAL, BODY FLUID

LAB CODE: 3046

Specimen Requirements: 1 mL Body Fluid  
Collect: Plain Red top tube  
Storage and Transport: Refrigerate  
Reported: In 1 Day  
Billing Notes: Medicare Limited Coverage Test

PROTEIN TOTAL, SERUM

LAB CODE: 2200

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge within 4 hours of collection.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

PROTEIN TOTAL, URINE 24 HOUR

LAB CODE: 2254

Specimen Requirements: 24 Hour Urine  
Collect: 24 Hour Urine Container. Record collection time.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

PROTEIN TOTAL, URINE RANDOM

LAB CODE: 2253

Specimen Requirements: 10 mL Urine  
Collect: Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

PROTHROMBIN TIME (PROTIME)(PT) with INR

LAB CODE: 4300

Specimen Requirements: Complete Tube Sodium Citrated Whole Blood  
Collect: Light Blue Top Tube. Invert 5 times after collection. Tube must be completely filled to "fill" line for testing. Tubes not completely filled or overfilled will be rejected.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

PROTOPORPHYRIN, RBC (See Porphyrins, RBC)

PSA (See Prostatic Specific Antigen)

PSA FREE (See Prostatic Specific Antigen Free)

PT (See Prothrombin Time)

PTH (See Parathyroid Hormone)

PTT (See Partial Thromboplastin Time)

RA (See Rheumatoid Factor)

RAPID PLASMA REAGIN (See RPR)

RAST TESTING (See Allergy Testing)

RBC COUNT (Red Blood Cell)

LAB CODE: 3006

Specimen Requirements: 2mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert 5 times after collection.  
Storage and Transport: Refrigerated. Same Day Results available in certain areas.  
Reported: In 1 Day

RENIN (PLASMA)

LAB CODE: 5458

Specimen Requirements: 2mL EDTA Plasma. Patient should not be on medications for at least 48 hours prior to collection of specimen. Note patient's posture.  
Collect: Lavender Top Tube. Centrifuge. Transfer plasma into 2 plastic transfer tubes. Freeze immediately.  
Storage and Transport: Frozen  
Reported: In 4-6 Days  
Notes: Please submit a separate sample for any additional tests requiring a frozen sample.

RETICULOCYTE COUNT (RETIC)

LAB CODE: 3505

Specimen Requirements: 2mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert tube 5 times immediately after collection.  
Storage and Transport: Refrigerated  
Reported: In 1-2 Days  
Billing Notes: Medicare Limited Coverage Test

RETINOL (See Vitamin A)

**RHEUMATOID FACTOR (RA), QUANTITATIVE**

LAB CODE: 4004

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days  
Billing Notes: Medicare Limited Coverage Test

**ROUTINE CULTURE (See Culture, Aerobic)****RPR (RAPID PLASMA REAGIN)**

LAB CODE: 4000

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Notes: Positive results on this test will automatically reflex to a titer at an additional charge. FTA is not reflexed automatically.  
Billing Notes: Medicare Limited Coverage Test

**RUBEOLA (See Measles)****SEDIMENTATION RATE, Westergren (ESR)**

LAB CODE: 3500

Specimen Requirements: 2mL EDTA Whole Blood  
Collect: Lavender Top Tube. Invert tube 5 times immediately after collection. Specimen must be submitted for testing on the day it is collected.  
Storage and Transport: Refrigerated  
Reported: In 1 Day  
Billing Notes: Medicare Limited Coverage Test

**SEMEN ANALYSIS, COMPLETE (Fertility evaluation)**

LAB CODE: 3030

Specimen Requirements: Semen Sample  
Collect: Sterile Urine Cup  
Storage and Transport: Body Temperature  
Reported: In 1 Day  
Notes: This test requires a fresh specimen; therefore, this procedure is available only by appointment. Please book appointment online at [www.internationalmedicallab.com](http://www.internationalmedicallab.com) or call Client Services for availability. Patient should have between two and seven days of sexual abstinence before producing the specimen. The World Health Organization experts (WHO) recommend that two ejaculates be evaluated initially. These samples should be



collected at least seven days apart and not more than three months apart. If any of the major parameters are abnormal, additional ejaculates should be evaluated. Specimen should be collected at home in a clean, dry container by masturbation or coitus interruptus. Patient should not collect specimen in a condom or use a condom, lubricant or other contaminant as this will affect results. Entire collected specimen should be submitted in a container labeled with patient name and time of collection. Specimen must be kept warm (close to the body) and dropped off at the lab within 20 minutes of collection.

**SEMEN ANALYSIS, POST VASECTOMY**

**LAB CODE: 3035**

Specimen Requirements:  
Collect:  
Storage and Transport:  
Reported:  
Notes:

Semen Sample  
Sterile Urine Cup  
Body Temperature  
In 1 Day

This test requires a fresh specimen; therefore, this procedure is available only by appointment. Please book appointment online at [www.internationalmedicallab.com](http://www.internationalmedicallab.com) or call Client Services for availability. Patient should have between two and seven days of sexual abstinence before producing the specimen. The World Health Organization experts (WHO) recommend that two ejaculates be evaluated initially. These samples should be collected at least seven days apart and not more than three months apart. If any of the major parameters are abnormal, additional ejaculates should be evaluated. Specimen should be collected at home in a clean, dry container by masturbation or coitus interruptus. Patient should not collect specimen in a condom or use a condom, lubricant or other contaminant as this will affect results. Entire collected specimen should be submitted in a container labeled with patient name and time of collection. Specimen must be kept warm (close to the body) and dropped off at the lab within 20 minutes of collection.

**SJÖGRENS'S ANTIBODIES (SSA & SSB)**

**LAB CODE: 50004**

Specimen Requirements:  
Collect:  
Storage and Transport:  
Reported:  
Billing Notes:

1 mL Serum  
Serum Separator Tube  
Refrigerated  
In 3-7 Days  
Medicare Limited Coverage Test

**SODIUM, SERUM**

LAB CODE: 2211

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube. Centrifuge ASAP.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**SODIUM, RANDOM URINE**

LAB CODE: 2250

Specimen Requirements: 10 mL Random Urine  
Collect: Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 1 Day

**SODIUM, 24 HOUR URINE**

LAB CODE: 2234

Specimen Requirements: 24 Hour Urine  
Collect: 24 Hour Urine Container. Record collection time.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day

**SSA ANTIBODIES (ANTI-RO)**

LAB CODE: 50002

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**SSB ANTIBODIES (ANTI-LA)**

LAB CODE: 50003

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-7 Days  
Billing Notes: Medicare Limited Coverage Test

**STONE (CALCULI) ANALYSIS**

LAB CODE: 5358

Specimen Requirements: Stone. Do not attach to Cellulose Tape. Do not submit in liquid. Indicate type of stone submitted.  
Collect: Sterile Container or transfer tube  
Storage and Transport: Room Temperature  
Reported: In 3-5 Days

STOOL CULTURE (See Culture, Stool)

STOOL FOR WBCs (See Fecal Leukocytes)

SURGICAL PATHOLOGY PROCEDURES (See Pathology)

T3 (See Triiodothyronine)

T4 (See Thyroxine)

TESTOSTERONE, FREE

LAB CODE: 5497

Specimen Requirements:	2mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Refrigerated
Reported:	In 3-5 Days

TESTOSTERONE, TOTAL

LAB CODE: 2656

Specimen Requirements:	2mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Refrigerated
Reported:	In 1-3 Days

THC SCREEN (See Cannabinoid Screen)

THIAMINE (See Vitamin B1)

THROAT CULTURE (See Culture, Throat)

THYROCALCITONIN (See Calcitonin)

THYROGLOBULIN (includes Anti-Thyroglobulin Antibodies)

LAB CODE: 5620

Specimen Requirements: 3mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

THYROGLOBULIN ANTIBODIES (See Anti-Thyroglobulin Antibodies)

THYROID ANTIBODIES (See Anti-Thyroid Antibodies)

THYROID PEROXIDASE ANTIBODIES (See Anti-Thyroid Peroxidase Antibodies)

THYROID STIMULATING HORMONE (TSH)

LAB CODE: 2610

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

THYROXINE (T4)

LAB CODE: 2226

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

THYROXINE (T4) FREE

LAB CODE: 2261

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

TISSUE EXAMINATIONS (See Pathology)

TOCOPHEROL (See Vitamin E)

TOXOPLASMA ANTIBODIES, IgG

LAB CODE: 5511

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 4-6 Days

TRANSFERRIN

LAB CODE: 5513

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days  
Notes: Fasting specimen preferred  
Billing Notes: Medicare Limited Coverage Test

TREPONEMA PALLIDIUM ANTIBODIES (See MHA-TP)

TRIGLYCERIDES

LAB CODE: 2224

Specimen Requirements: 1 mL Serum. Patient should be fasting 8-12 hours prior to collection.  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

TRIIODOTHYRONINE (T3) FREE

LAB CODE: 5487

Specimen Requirements: 2 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerate  
Reported: In 1-3 Days  
Billing Notes: Medicare Limited Coverage Test

**TRIIODOTHYRONINE (T3) TOTAL**

LAB CODE: 2260

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days  
Billing Notes: Medicare Limited Coverage Test

**TRIIODOTHYRONINE (T3) UPTAKE**

LAB CODE: 2225

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1-3 Days  
Billing Notes: Medicare Limited Coverage Test

**TSH (See Thyroid Stimulating Hormone)****UREA NITROGEN, BLOOD (See Blood Urea Nitrogen)****UREA NITROGEN, URINE**

LAB CODE: 2297

Specimen Requirements: 24 Hour Urine. Record collection time.  
Collect: 24 Hour Urine Container  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day

**URIC ACID, SERUM**

LAB CODE: 2218

Specimen Requirements: 1mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**URIC ACID, 24 HOUR URINE**

LAB CODE: 2233

Specimen Requirements: 24 Hour Urine. Record collection time.  
Collect: 24 Hour Urine Container  
Storage and Transport: Refrigerated during and after collection  
Reported: In 1 Day

**URINALYSIS (microscopic performed on positives)**

LAB CODE: 4600

Specimen Requirements: 15mL Random Urine (minimum volume 3mL)  
Collect: Clean catch urine specimen in Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**URINALYSIS (with microscopic)**

LAB CODE: 4620

Specimen Requirements: 15mL Random Urine (minimum volume 5mL)  
Collect: Clean catch urine specimen in Sterile Urine Cup  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

**URINE CULTURE (See Culture, Urine)****VALPROIC ACID**

LAB CODE: 2009

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**VANCOMYCIN**

LAB CODE: PEAK 2004, TROUGH 2001, RANDOM 2007

Specimen Requirements: 1 mL Serum  
Collect: Plain red top tube. Centrifuge. Transfer serum into transport tube. Label tube as "peak", "trough" or "random." Draw Peak 1-2 hours after completion of infusion. Draw Trough 10 minutes before next infusion.  
Storage and Transport: Refrigerated  
Reported: In 1 Day. Same Day Results available in certain areas.

**VANILLYLMANDELIC ACID (VMA)**

LAB CODE: 5531

Specimen Requirements: 24 Hour Urine  
Collect: 24 Hour Urine Container. Record collection time. Patient should discontinue all medications, if possible, for 1 week prior to collection.  
Storage and Transport: Refrigerated during and after collection  
Reported: In 4-6 Days

VARICELLA ANTIBODY IgG (IMMUNE STATUS)

LAB CODE: 5532

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

VARICELLA ANTIBODY IgM

LAB CODE: 5031

Specimen Requirements: 1 mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerated  
Reported: In 3-5 Days

VDRL (See RPR)

VIRAL CULTURE (See Culture, Viral)

VITAMIN B12

LAB CODE: 2400

Specimen Requirements: 2mL Serum  
Collect: Serum Separator Tube  
Storage and Transport: Refrigerate  
Reported: In 1 Day. Same Day Results available in certain areas.  
Billing Notes: Medicare Limited Coverage Test

VITAMIN D, 1,25 DIHYDROXY (Calcifidol)

LAB CODE: 5543

Specimen Requirements: 2mL Serum  
Collect: Plain Red Top Tube  
Storage and Transport: Refrigerate  
Reported: In 3-5 Days  
Notes: This assay is used to monitor certain conditions, such as acquired and inherited disorders of Vitamin D and Phosphate Metabolism. Allow to clot at Room Temperature. Centrifuge and submit serum in transfer tube.



VITAMIN D, 25 HYDROXY (Calciferol)

LAB CODE: 5544

Specimen Requirements:	1 mL Serum
Collect:	Serum Separator Tube
Storage and Transport:	Refrigerated
Reported:	In 1-2 Days
Notes:	This assay is recommended to evaluate patients' Vitamin D status.

VMA (See Vanillylmandelic Acid)

WBC COUNT (White Blood Cell Count only)

LAB CODE: 3010

Specimen Requirements:	4mL EDTA Whole Blood
Collect:	Lavender Top Tube. Invert tube 5 times after collection.
Storage and Transport:	Refrigerated
Reported:	In 1 Day. Same Day Results available in certain areas.
Billing Notes:	Medicare Limited Coverage Test