

Reporting Title: 11-Deoxycortisol, S
Performing Location: Rochester

Necessary Information:
Indicate if specimen was collection before or after metyrapone administration.

Specimen Requirements:
Supplies: Sarstedt Aliquot Tube, 5 mL (T914)
Collection Container/Tube:
Preferred: Red top
Acceptable: Serum gel
Submission Container/Tube: Plastic vial
Specimen Volume: 0.5 mL
Collection Instructions:
1. Morning (8 a.m.) specimen is preferred.
2. Centrifuge and aliquot serum into a plastic vial.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	28 days	
	Ambient	28 days	
	Frozen	28 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
46923	11-Deoxycortisol, S	Numeric	ng/dL	1657-6

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:
82634

Reference Values:
< or =18 years: <344 ng/dL
>18 years: 10-79 ng/dL

For International System of Units (SI) conversion for Reference Values, see
www.mayocliniclabs.com/order-tests/si-unit-conversion.html.