

Reporting Title: Glucose, BF  
Performing Location: Rochester

Ordering Guidance:  
For spinal fluid specimens, order GLSF / Glucose, Spinal Fluid. Testing will be changed to GLSF if this test is ordered on that specimen type.

- Necessary Information:
- 1. Date and time of collection are required.
  - 2. Specimen source is required.

- Specimen Requirements:
- Specimen Type: Body fluid
- Preferred Source:
- Peritoneal fluid (peritoneal, abdominal, ascites, paracentesis)
  - Pleural fluid (pleural, chest, thoracentesis)
  - Drain fluid (drainage, JP drain)
  - Peritoneal dialysate (dialysis fluid)
  - Pericardial
  - Amniotic Fluid
  - Synovial Fluid

Acceptable Source: Write in source name with source location (if appropriate)

Collection Container/Tube: Sterile container

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL

- Collection Instructions:
- 1. Centrifuge to remove any cellular material and transfer into a plastic vial.
  - 2. Indicate the specimen source and source location on label.

Specimen Type	Temperature	Time	Special Container
Body Fluid	Refrigerated (preferred)	7 days	
	Frozen	30 days	
	Ambient	24 hours	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
GLBF	FLD12	Fluid Type, Glucose	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
GL_BF	Glucose, BF	Numeric	mg/dL	2344-0
FLD12	Fluid Type, Glucose	Alphanumeric		14725-6

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

**Supplemental Report:**

No

**CPT Code Information:**

82945

**Reference Values:**

An interpretive report will be provided.