

Reporting Title: Cholesteryl Esters, S
Performing Location: Rochester

Specimen Requirements:
Collection Container/Tube:
Preferred: Serum gel
Acceptable: Red top
Submission Container/Tube: Plastic vial
Specimen Volume: 1 mL
Collection Instructions: Centrifuge and aliquot serum into plastic vial. Send refrigerated.

Forms:
If not ordering electronically, complete, print, and send a [Cardiovascular Test Request Form](#) (T724) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	7 days	
	Frozen	60 days	
	Ambient	24 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
CHLES	Cholesteryl Esters, S	Numeric	% total chol	21197-9

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

Supplemental Report:
No

CPT Code Information:
84311

Reference Values:
> or =18 years: 60-80% of total cholesterol
Reference values have not been established for patients who are less than 18 years of age.