

Reporting Title: Immunoglobulin Free Light Chains, 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 a plastic vial.

Forms:

If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:

-[General Request](#) (T239)

-[Hematopathology/Cytogenetics Test Request](#) (T726)

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	28 days	
	Frozen	28 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
LFLCS	Lambda Free Light Chain, S	Numeric	mg/dL	33944-0
KLRS	Kappa/Lambda FLC Ratio	Numeric		48378-4
KFLCS	Kappa Free Light Chain, S	Numeric	mg/dL	36916-5

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

Supplemental Report:

No

Components:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
KFLCS	Kappa Free Light Chain, S	1	83521	Yes	No
LFLCS	Lambda Free Light Chain, S	1	83521	Yes	No
KLRS	Kappa/Lambda FLC Ratio			Yes	No

CPT Code Information:

83521 x 2

Reference Values:

KAPPA-FREE LIGHT CHAIN
0.33-1.94 mg/dL

LAMBDA-FREE LIGHT CHAIN
0.57-2.63 mg/dL

KAPPA/LAMBDA FLC RATIO
0.26-1.65