

Reporting Title: Albumin, S
Performing Location: Rochester

Specimen Requirements:
Only orderable as part of profile. For more information see: SFIG / Cerebrospinal Fluid (CSF) IgG Index Profile, Serum and Spinal Fluid.

Collection Container/Tube:
Preferred: Serum gel
Acceptable: Red top
Submission Container/Tube: Plastic vial
Specimen Volume: 1 mL
Collection Instructions:
1. Serum gel tubes should be centrifuged within 2 hours of collection.
2. Red-top tubes should be centrifuged, and the serum aliquoted into a plastic vial within 2 hours of collection.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	14 days	
	Frozen	120 days	
	Ambient	7 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
ALB_S	Albumin, S	Numeric	mg/dL	1751-7

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

Supplemental Report:
No

CPT Code Information:
82040

Reference Values:
Only orderable as part of profile. For more information see: SFIG / Cerebrospinal Fluid (CSF) IgG Index Profile, Serum and Spinal Fluid.

> or =12 months: 3500-5000 mg/dL
Reference values have not been established for patients who are <12 months of age.