

Reporting Title: Iohexol, Plasma  
Performing Location: Rochester

Specimen Requirements:  
Supplies: Sarstedt Aliquot Tube, 5 mL (T914)  
Collection Container/Tube: Green top (heparin)  
Submission Container/Tube: Plastic vial  
Specimen Volume: 1 mL  
Collection Instructions: Centrifuge and aliquot plasma into a plastic vial.

Forms:  
If not ordering electronically, complete, print, and send a [Renal Diagnostics Test Request](#) (T830) with the specimen.

Specimen Type	Temperature	Time	Special Container
Plasma Heparin	Refrigerated (preferred)	7 days	
	Frozen	35 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
61713	Iohexol, P	Numeric	mcg/mL	93974-4

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

Supplemental Report:  
No

CPT Code Information:  
82542

Reference Values:  
Not applicable