

**Reporting Title:** Aspartate Aminotransferase (AST), S  
**Performing Location:** Rochester

**Necessary Information:**  
Patient's age and sex are required.

**Specimen Requirements:**  
**Collection Container/Tube:**  
**Preferred:** Serum gel  
**Acceptable:** Red top  
**Specimen Volume:** 0.5 mL  
**Submission Container/Tube:** Plastic vial  
**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.

**Forms:**

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	7 days	
	Frozen	30 days	
	Ambient	7 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
AST	Aspartate Aminotransferase (AST), S	Numeric	U/L	30239-8

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

**Supplemental Report:**  
No

**CPT Code Information:**  
84450

**Reference Values:**  
Males  
0-11 months: not established  
1-13 years: 8-60 U/L  
> or =14 years: 8-48 U/L  
Females

# Test Definition: AST

Aspartate Aminotransferase (AST) (GOT),  
Serum

0-11 months: not established  
1-13 years: 8-50 U/L  
> or =14 years: 8-43 U/L