

**Reporting Title:** Alternative Complement Path Func, S  
**Performing Location:** Rochester

**Ordering Guidance:**  
COM / Complement, Total, Serum and this test are the most appropriate primary assays to use as screening methods for complement deficiencies. Abnormal results in one or the other, neither or both assays will help direct further testing.

This test is rarely useful when ordered in isolation.

**Specimen Requirements:**  
**Patient Preparation:** Patient should be fasting.  
**Supplies:** Sarstedt 5 mL Aliquot Tube (T914)  
**Collection Container/Tube:** Red top (serum gel/SST are **not acceptable**)  
**Submission Container/Tube:** Plastic vial  
**Specimen Volume:** 1 mL  
**Collection Instructions:**  
1. Immediately after specimen collection, place the tube on wet ice.  
2. Centrifuge at 4 degrees C and aliquot serum into 5 mL plastic vial.  
3. Freeze specimen within 30 minutes.

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

Specimen Type	Temperature	Time	Special Container
Serum Red	Frozen	14 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
88676	Alternative Complement Path Func, S	Numeric	%of norm	74520-8

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

**Supplemental Report:**  
No

**CPT Code Information:**  
86161

**Reference Values:**  
> or =46% normal