

Overview

Useful For

Detecting disease states or syndromes of the white blood cells, red blood cells, or platelet cell lines of a patient's peripheral blood

Additional Tests

| Test Id | Reporting Name | Available Separately | Always Performed |
|---------|------------------|----------------------|------------------|
| PBPC | Peripheral Blood | No, (Bill Only) | Yes |

Method Name

Only orderable as a reflex. For more information see SPSM / Morphology Evaluation (Special Smear), Blood.

Manual-Microscopic Examination

NY State Available

No

Specimen

Specimen Type

Whole Blood EDTA

Specimen Required

Only orderable as a reflex. For more information see SPSM / Morphology Evaluation (Special Smear), Blood.

Container/Tube: Slides

Specimen Volume: 5 Unstained, well-made peripheral blood smears (fingerstick blood)

Collection Instructions: If peripheral blood smears (fingerstick blood) is not available, a smear from EDTA blood will be accepted.

Additional Information: Include complete blood count results (if available) and reason for referral.

Reject Due To

No specimen should be rejected.

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|------------------|---------------------|------|-------------------|
| Whole Blood EDTA | Ambient (preferred) | | |
| | Refrigerated | | |

Clinical & Interpretive

Clinical Information

Under normal conditions, the morphology and proportion of each blood cell type is fairly consistent in corresponding age groups. The morphology and proportion of each blood cell type may change in various hematologic diseases. Differential leukocyte count/special smear evaluation is helpful in revealing the changes in morphology or proportion of each cell type in the peripheral blood.

Reference Values

Only orderable as a reflex. For more information see SPSM / Morphology Evaluation (Special Smear), Blood.

Interpretation

[The laboratory will provide an interpretive report of percentage of white cells and, if appropriate, evaluation of white cells, red cells, and platelets.](#)

Cautions

A poorly feathered peripheral smear may result in less than optimal interpretation.

Clinical Reference

1. Lotspeich-Steininger CA, Steine-Martin EA, Koepke JA: Clinical Hematology: Principles, procedures, correlations. JB Lippincott Company; 1998:88-106:317-356
2. Rose G, Reinhard HH, Kahwash SB: Is this a blast? An illustrated practical review on peripheral blood smear examination in the paediatric patient. Malays J Pathol. 2020 Apr;42(1):37-49

Performance

Method Description

Microscopic examination of a Wright-stained smear.(Unpublished Mayo method)

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

1 day

Performing Laboratory Location

Rochester

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

Not Applicable

CPT Code Information

85060

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|---------------------------------|--------------------|
| PINTP | Peripheral Smear Interpretation | 14869-2 |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|------------------------------------|---------------------|
| 71442 | Participated in the Interpretation | No LOINC Needed |
| 71443 | Report electronically signed by | 19139-5 |
| 71447 | Interpretation | 14869-2 |
| 71832 | Case Number | 80398-1 |