

**Reporting Title:** Amylase, Pancreatic Cyst**Performing Location:** Rochester**Ordering Guidance:**

For other body fluid specimens (eg, peritoneal, pleural), order AMBF / Amylase, Body Fluid. Testing will be changed to AMBF if this test is ordered on any fluid other than pancreatic fluid.

**Specimen Requirements:**

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Container/Tube: Plain vial

Specimen Volume: 1 mL

Additional Information: A minimum of 0.5 mL is required for testing; specimens less than 0.5 mL may be rejected.

**Specimen Minimum Volume:**

0.5 mL

**Forms:**

If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:

-Oncology Test Request (T729)

-Gastroenterology and Hepatology Test Request (T728)

Specimen Type	Temperature	Time	Special Container
Pancreatic Cyst Fluid	Frozen (preferred)	30 days	
	Ambient	7 days	
	Refrigerated	7 days	

**Ask at Order Entry (AOE) Questions:**

Test ID	Question ID	Description	Type	Reportable
AMLPC	SITE6	Site	Plain Text	Yes

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
AMYPE	Amylase, Pancreatic Cyst	Numeric	U/L	48996-3
SITE6	Site Also used by tests: 199PC, CEAPC	Alphanumeric		39111-0

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

82150

**Reference Values:**

An interpretive report will be provided.