

Reporting Title: Sodium, S**Performing Location:** Rochester**Necessary Information:**

Patient's age and sex are required.

Specimen Requirements:

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 0.5 mL

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.

Specimen Minimum Volume:

0.25 mL

Forms:

If not ordering electronically, complete, print, and send a Cardiovascular Test Request Form (T724) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	14 days	
	Ambient	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
NAS	Sodium, S Also used by tests: ELPSR, NAKS	Numeric	mmol/L	2951-2

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

84295

Reference Values:

<1 year: not established
> or =1 year: 135-145 mmol/L