

**Reporting Title:** Psychosine, RBC**Performing Location:** Rochester**Ordering Guidance:**

This test is recommended for individuals of all ages, infancy through adulthood, for diagnosis or long-term monitoring of patients who have been treated or who are at risk of developing Krabbe disease.

**Shipping Instructions:**

Must be sent refrigerated.

**Necessary Information:**

1. Patient's age is required.
2. Date of hematopoietic stem cell transplantation (HSCT), if performed.

**Specimen Requirements:**

Container/Tube:

Preferred: Lavender top (EDTA)

Acceptable: Green top (sodium heparin, lithium heparin)

Specimen Volume: 2 mL

**Forms:**

If not ordering electronically, complete, print, and send a Biochemical Genetics Test Request (T798) with the specimen.

Specimen Type	Temperature	Time	Special Container
Whole blood	Refrigerated	7 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
606152	Interpretation (PSYR)	Alphanumeric		59462-2
606145	Psychosine, RBC	Alphanumeric	pmol/g Hb	93687-2
606151	Reviewed By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**



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No

**CPT Code Information:**

82542

**Reference Values:**

Normal <5 pmol/g Hb