

Reporting Title: Thyroglobulin Reflex to MS or IA**Performing Location:** Rochester**Specimen Requirements:**

Patient Preparation: For 12 hours before specimen collection do not take multivitamins or dietary supplements containing biotin (vitamin B7), which is commonly found in hair, skin, and nail supplements and multivitamins.

Collection Container/Tube: Red top (serum gel/SST are not acceptable)

Submission Container/Tube: Plastic vial

Specimen Volume: 2 mL

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

1.25 mL

Forms:

If not ordering electronically, complete, print, and send an Oncology Test Request (T729) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum Red	Refrigerated (preferred)	7 days	
	Frozen	30 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
TGABR	Thyroglobulin Antibody, S	Numeric	IU/mL	56536-6

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86800

84432 (if appropriate)

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
HTGT	Thyroglobulin, Tumor Marker, IA, S			No	No
TGMS	Thyroglobulin, Mass Spec., S			No	Yes

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
HTGT	HTGN3	Thyroglobulin, Tumor Marker, IA, S	Numeric	ng/mL	3013-0
HTGT	HTG3I	Thyroglobulin Interpretation	Alphanumeric		69053-7
TGMS	62749	Thyroglobulin, Mass Spec., S	Numeric	ng/mL	3013-0
TGMS	35998	Interpretation	Alphanumeric		59462-2

Reference Values:

Thyroglobulin Antibody: <1.8 IU/mL

THYROGLOBULIN< TUMOR MARKER

Athyrotic: <0.1 ng/mL

Intact thyroid: < or =33 ng/mL