Test Definition: MPSBS Mucopolysaccharidosis, Blood Spot

Reporting Title: Mucopolysaccharidosis, BS **Performing Location:** Rochester

MAYO CLINIC

BORATORIES

Specimen Requirements:

Patient Preparation: Do not administer low-molecular-weight heparin prior to collection Supplies: Card-Blood Spot Collection (Filter Paper) (T493) Collection Container: Preferred: Blood Spot Collection Card Acceptable: Whatman Protein Saver 903 paper, PerkinElmer 226 filter paper, Munktell filter paper, local newborn screening card, postmortem screening card, or blood collected in tubes containing ACD or EDTA and dried on filter

paper

Specimen Volume: 2 Blood spots

Collection Instructions

1. An alternative blood collection option for a patient older than 1 year is a fingerstick. For detailed instructions, see How

to Collect Dried Blood Spot Samples.

- 2. Completely fill at least 2 circles on the filter paper card (approximately 100 microliters blood per circle).
- 3. Let blood dry on filter paper at ambient temperature in a horizontal position for a minimum of 3 hours.
- 4. Do not expose specimen to heat or direct sunlight.
- 5. Do not stack wet specimens.
- 6. Keep specimen dry.

Additional Information:

- 1. For collection instructions, see Blood Spot Collection Instructions
- 2. For collection instructions in Spanish, see Blood Spot Collection Card-Spanish Instructions (T777)
- 3. For collection instructions in Chinese, see Blood Spot Collection Card-Chinese Instructions (T800)

Specimen Minimum Volume:

See Specimen Required

Forms:

1. Biochemical Genetics Patient Information (T602)

2. 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	Ambient (preferred)	100 days	FILTER PAPER	
	Frozen	100 days	FILTER PAPER	
	Refrigerated	100 days	FILTER PAPER	



Mucopolysaccharidosis, Blood Spot

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
43695	Interpretation (MPSBS)	Alphanumeric		59462-2
43693	Dermatan Sulfate	Numeric	nmol/L	90233-8
43694	Heparan Sulfate	Numeric	nmol/L	90235-3
BA2869	Total Keratan Sulfate	Alphanumeric	nmol/L	90236-1
43696	Reviewed By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

83864

Reference Values:

DERMATAN SULFATE (DS) Newborn-< or =2 weeks: < or =200 nmol/L >2 weeks: < or =130 nmol/L

HEPARAN SULFATE (HS) Newborn-< or =2 weeks: < or =96 nmol/L >2 weeks: < or =95 nmol/L

TOTAL KERATAN SULFATE (KS) < or =5 years: < or =1,900 nmol/L 6-10 years: < or =1,750 nmol/L 11-15 years: < or =1,500 nmol/L >15 years: < or =750 nmol/L