
Reporting Title: Cytochrome b5 Reductase, B
Performing Location: Rochester**Specimen Requirements:**

Collection Container/Tube:

Preferred: Yellow top (ACD)

Acceptable: Lavender top (EDTA)

Specimen Volume: 6 mL

Collection Instructions: Send whole blood specimen in original tube. Do not aliquot.

Specimen Minimum Volume:

1 mL

Forms:

If not ordering electronically, complete, print, and send a Benign Hematology Test Request (T755) with the specimen

Specimen Type	Temperature	Time	Special Container
Whole Blood ACD-B	Refrigerated	18 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
METRB	Cytochrome b5 Reductase, B	Numeric	U/g Hb	32703-1

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

82657

Reference Values:

> or =12 months of age: 7.8-13.1 U/g Hb

Reference values have not been established for patients who are younger than 12 months.