

**Reporting Title:** Bilirubin Total, S**Performing Location:** Rochester**Shipping Instructions:**

Ship specimen in amber vial to protect from light.

**Necessary Information:**

Patient's age and sex are required.

**Specimen Requirements:**

Supplies: Amber Frosted Tube, 5 mL (T915)

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Amber 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 an amber vial within 2 hours of collection.

**Specimen Minimum Volume:**

0.25 mL

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	7 days	LIGHT PROTECTED
	Frozen	30 days	LIGHT PROTECTED
	Ambient	24 hours	LIGHT PROTECTED

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
BILIT	Bilirubin Total, S	Numeric	mg/dL	1975-2
	Also used by tests: LIVPR			

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

82247

**Reference Values:**

0-6 days: Refer to [www.bilitool.org](http://www.bilitool.org) for information on age-specific (postnatal hour of life) serum bilirubin values.

7-14 days: 0.0-14.9 mg/dL

15 days to 17 years: 0.0-1.0 mg/dL

> or =18 years: 0.0-1.2 mg/dL