

Reporting Title: Bilirubin, Direct**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)	24 hours	LIGHT PROTECTED
	Frozen	30 days	LIGHT PROTECTED
	Ambient	6 hours	LIGHT PROTECTED

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
BILID	Bilirubin, Direct Also used by tests: LIVPR	Numeric	mg/dL	1968-7

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

82248

Reference Values:

> or =12 months: 0.0-0.3 mg/dL

Reference values have not been established for patients who are <12 months of age.