

**Reporting Title:** Phosphorus (Inorganic), S  
**Performing Location:** Rochester

**Necessary Information:**

Patient's age and sex are required.

**Specimen Requirements:**

Patient Preparation: Patient should fast overnight (12-14 hours)

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic 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 a plastic vial within 2 hours of collection.

**Specimen Minimum Volume:**

0.25 mL

**Forms:**

If not ordering electronically, complete, print, and send a Renal Diagnostics Test Request (T830) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum	Frozen (preferred)	365 days	
	Refrigerated	7 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
PHOS	Phosphorus (Inorganic), S	Numeric	mg/dL	2777-1

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

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**CPT Code Information:**

84100

**Reference Values:**

## Males

1-4 years: 4.3-5.4 mg/dL  
5-13 years: 3.7-5.4 mg/dL  
14-15 years: 3.5-5.3 mg/dL  
16-17 years: 3.1-4.7 mg/dL  
> or =18 years: 2.5-4.5 mg/dL

Reference values have not been established for patients that are less than 12 months of age.

## Females

1-7 years: 4.3-5.4 mg/dL  
8-13 years: 4.0-5.2 mg/dL  
14-15 years: 3.5-4.9 mg/dL  
16-17 years: 3.1-4.7 mg/dL  
> or =18 years: 2.5-4.5 mg/dL

Reference values have not been established for patients that are less than 12 months of age.