

Reporting Title: Albumin, S
Performing Location: Rochester

Necessary Information:

Patient's age and sex are required.

Specimen Requirements:

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Specimen Volume: 0.5 mL

Submission Container/Tube: Plastic vial

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

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	150 days	
	Frozen	120 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
ALB	Albumin, S Also used by tests: LIVPR	Numeric	g/dL	1751-7

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

82040

Reference Values:

> or =12 months: 3.5-5.0 g/dL

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

For SI unit Reference Values, see <https://www.mayocliniclabs.com/order-tests/si-unit-conversion.html>