

Reporting Title: Insulin Abs, S**Performing Location:** Rochester**Specimen Requirements:**

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Collection Container/Tube:

Preferred: Red top

Acceptable: Serum gel

Submission Container/Tube: Plastic vial

Specimen Volume: 1.5 mL

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

1 mL

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------------|----------|-------------------|
| Serum | Refrigerated (preferred) | 28 days | |
| | Frozen | 28 days | |
| | Ambient | 72 hours | |

Result Codes:

| Result ID | Reporting Name | Type | Unit | LOINC® |
|-----------|----------------|---------|--------|---------|
| 8666 | Insulin Abs, S | Numeric | nmol/L | 60463-7 |

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86337

Reference Values:

< or =0.02 nmol/L

Reference values apply to all ages.