

89060

labcorp Oklahoma, Inc.

Crystals, Synovial Fluid

CPT Code(s)

Service Provided By

Order Name: CRYSTL SYN Test Number: 0801850 Revision Date: 02/01/2024

TEST NAME			METHODOLOGY	LOINC CODE
Crystals, Synovial Fluid			Microscopy	38458-6
SPECIMEN REQUIR	EMENTS			
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Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	3 mL (1)	Synovial Fluid	Sodium Heparin (Green Top Gel)	/ No- Room Temperature
Instructions	Note body location that the specimen was drawn from on the request Stability is 24hrs Room temperature and 24hrs Refrigerated. Rejection Criteria: Specimens received in improper containers, collected in a crystalline anticoagulant tube, or specimens that are received frozen, clotted, or have exceeded stability.			
GENERAL INFORMATION				
Testing Schedule	Daily			
Expected TAT	1 Day			