


Synovial Fluid Routine Exam

Order Name: **SYN COUNT**
Test Number: 0814000
Revision Date: 02/01/2024

| TEST NAME | METHODOLOGY | LOINC CODE |
|--------------------------|-------------|------------|
| Appearance | Visual | 29605-3 |
| Color | Visual | 14664-7 |
| Crystals, Synovial Fluid | Microscopy | 38458-6 |
| RBC Count | Microscopy | 26458-0 |
| Viscosity | Visual | 14950-0 |

| SPECIMEN REQUIREMENTS | | | | |
|-----------------------|---|---------------|-------------------------------------|-----------------------|
| Specimen | Specimen Volume (min) | Specimen Type | Specimen Container | Transport Environment |
| Preferred | 3 mL (1 mL) | | Sodium Heparin (Green Top / No-Gel) | |
| Instructions | This test is for Synovial/Joint Fluids. Invert tube several times to mix well and deliver to laboratory immediately. Specimen Volume: Preferred 3 mL, Minimum 1 mL, NOTE: If shared specimen between other tests/departments within the lab 3 mL is required. Collect 3mL of fluid in a Sodium Heparin (Green Top/ No-Gel) tube. Specimen stability is 24hrs Refrigerated. Mark Specimen DO NOT SPIN..! ?Reject criteria: Specimens received in syringes, urine cups, monovette tubes, red top tubes, gel-barrier tubes, EDTA tubes, or lithium heparin tubes; or specimens that are received frozen, clotted, or have exceeded stability | | | |

| GENERAL INFORMATION | |
|---------------------|--|
| Testing Schedule | Mon - Fri |
| Expected TAT | 1 Day |
| Notes | Result includes a manual differential. |
| CPT Code(s) | 89051 (add 89060 if Crystal Exam is performed) |
| Service Provided By |  labcorp Oklahoma, Inc. |