


**Insulin, Serum**

Order Name: **INSULIN**  
Test Number: 2023075  
Revision Date: 05/28/2021

TEST NAME	METHODOLOGY	LOINC CODE
Insulin, Serum	<u>Chemiluminescence Assay</u>	20448-7

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (mL)	Specimen Type	Specimen Container	Transport Environment
Preferred	2mL (0.5mL)	Serum	Clot Activator SST	Frozen
Instructions	<b>Overnight fasting is required.</b> <b>Allow to clot then centrifuge aliquot 2mL(0.5mL) Serum into plastic aliquot tube and freeze ASAP.</b> Stability: Ambient 8 hours, Refrigerated 2 days, Frozen 7 days. Insulin assay not recommended for patients with insulin autoantibody. Use Free Insulin assay if autoantibody positive.			

GENERAL INFORMATION	
Testing Schedule	Mon - Fri
Expected TAT	1-3 days
Clinical Use	Useful for the determination of insulin levels. Along with proinsulin and C-peptide measurements it may be useful in the diagnosis of insulinoma. May also be used in the management of diabetes mellitus.
CPT Code(s)	83525
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.