St. John Health System
Lab Catalog

Calcitonin

Order Name: CALCITONI
Test Number: 3600550
Revision Date: 12/12/2022

TEST NAME	METHODO		HODOLOGY	LOINC CODE
Calcitonin		Qua	ntitative Chemiluminescent Immunoassay	1992-7
SPECIMEN REQUIREM	MENTS			
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1 mL (0.4)	Serum	Clot Activator SST	Frozen
Instructions	Notes: 0.4 mL (Note: This volume Does NOT allow for repeat testing.)  Specimen Type: Red-top tube or gel-barrier tube  Container Detail: LC PP  Specimen Storage: Freeze  Specimen Collection: Separate serum from cells. Transfer the serum into a LabCorp PP transpak frozen purple tube with screw cap (LabCorp No 49482). Freeze immediately and maintain frozen until tested. To avoid delays in turnaround time when requesting multiple tests on frozen samples, PLEASE SUBMIT SEPARATE FROZEN SPECIMENS FOR EACH TEST REQUESTED.  Special Instructions: State on the request form if calcium infusion or pentagastrin injection tests are part of the patient preparation. Values obtained with different assay methods should not be used interchangeably in serial testing. It is recommended that only one assay method be used consistently to monitor each patient's course of therapy. This procedure does not provide serial monitoring; it is intended for one-time use only.			

GENERAL INFORMATION		
Expected TAT	3 - 5 days	
Notes	Labcorp Test Code: 004895	
CPT Code(s)	82308	
Service Provided By	Oklahoma, Inc.	

Specimen Stability: Ambient: Unstable, Refrigerated : Unstable, Frozen: 90 days