

Occult Blood x3

Order Name: OCC BL 3
Test Number: 3501340
Revision Date: 01/10/2019

TEST NAME	METHODOLOGY	LOINC CODE
Occult blood #1 Screen	Guaiac Colormetric Reaction (GUIAC)	14563-1
Occult blood #2	Guaiac Colormetric Reaction (GUIAC)	14564-9
Occult blood #3	Guaiac Colormetric Reaction (GUIAC)	14565-6

		Guaiac Colormetric Reaction (GUIAC)	14565-6
REMENTS			
Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
0.5 mL (0.1)	Stool, Random	Fecal Occult Blood Card	Room Temperature
SPECIAL DIET REQUIRED: Do not eat red meat, any blood Some medications may interfe medication changes that may The patient's full name and of Stability: Specimen should be	d-containing food, cantaloupe, usere with this test. These include be necessary. Medication should date/time of collection should immediately transferred to the page of the p	uncooked broccoli, turnip, radish, or horseradish vitamin C and aspirin. The health care provider d not be stopped or decreased without consulting be noted on the cards. brovided sample card by the patient or provider	should be consulted regarding ng the health care provider. at time of specimen collection. Occult
	Specimen Volume (min) 0.5 mL (0.1) Specimens cards should be SPECIAL DIET REQUIRED: Do not eat red meat, any blood Some medications may interfer medication changes that may The patient's full name and Stability: Specimen should be	Specimen Volume (min) Specimen Type 0.5 mL (0.1) Stool, Random Specimens cards should be collected on consecutive box SPECIAL DIET REQUIRED: Do not eat red meat, any blood-containing food, cantaloupe, use Some medications may interfere with this test. These include medication changes that may be necessary. Medication should The patient's full name and date/time of collection should Stability: Specimen should be immediately transferred to the patient.	Specimen Volume (min) Specimen Type Specimen Container 0.5 mL (0.1) Stool, Random Fecal Occult Blood Card Specimens cards should be collected on consecutive bowel movements.

GENERAL INFORMATION	
Testing Schedule	Mon-Fri
Expected TAT	1-3 Days
Clinical Use	Colon cancer screening
CPT Code(s)	82270
Service Provided By	labcorp Oklahoma, Inc.