


pH Blood Venous

Order Name: **PH VENOUS**
Test Number: 2005625
Revision Date: 12/19/2013

TEST NAME	METHODOLOGY	LOINC CODE
pH Blood Venous		2746-6

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1 mL (0.5)	Whole Blood	Blood gas syringe	See Instructions
Instructions	Patient should be at rest. Fill blood gas syringe completely . Place specimen on ice and deliver to lab immediately. Specimen stability: 1 hour on ice.			

GENERAL INFORMATION	
Testing Schedule	Daily
Expected TAT	1-2 days
Clinical Use	Useful in assessing acid-base balance.
CPT Code(s)	82800
Service Provided By	 labcorp Oklahoma, Inc.