



Order Name: **GlycA**
Test Number: 5195285
Revision Date: 11/21/2024

TEST NAME	METHODOLOGY	LOINC CODE
GlycA	Nuclear Magnetic Resonance (NMR)	82730-3

SPECIMEN REQUIREMENTS

Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1 mL (0.5 mL)	Serum	Clot Activator (Red Top, No-Gel)	Refrigerated
Alternate 1	1 mL (0.5 mL)	Serum	NMR LipoTube	Refrigerated
Alternate 2	1 mL (0.5 mL)	Plasma	Sodium Heparin (Green Top / No-Gel)	Refrigerated
Alternate 3	1 mL (0.5 mL)	Plasma	EDTA (Lavender Top)	Refrigerated

Instructions
Specimen: 1mL (0.5mL) Serum, shipped refrigerated or plasma
Container: Plain red-top tube (preferred); NMR LipoTube (black-and-yellow-top tube), lavender-top (EDTA-no gel) tube, or green-top (heparin-no gel) tube is acceptable.
Collection: Collect specimen in plain red-top tube, which is the preferred specimen. Hold tube upright at room temperature for 45 minutes and allow to clot. Centrifuge specimen after clotting according to manufacturer's specifications. Transfer to a transport tube for storage at 2°C to 8°C until shipped.

For NMR LipoTube (black-and-yellow-top tube), keep upright at room temperature for 30 minutes and allow to clot. Centrifuge at 1800 to 2200g for 10 to 15 minutes immediately after clotting. If the sample cannot be centrifuged immediately, it must be refrigerated at 2°C to 8°C and centrifuged within 24 hours of collection. The NMR tube should then be stored at 2°C to 8°C until shipped.

Separate plasma from lavender-top (EDTA-no gel) tube or green-top (heparin-no gel) tube immediately after collection and transfer to a plastic transport tube for shipment to the laboratory.

Do not open NMR LipoTube. Serum or plasma drawn in gel-barrier collection tubes other than the NMR LipoTube should not be used.

Storage Instructions: Refrigerate; stable for 14 days. Stable at room temperature for 60 hours or frozen for 24 months. (Freeze/thaw cycles: x3)

Patient Preparation: Patient fasting is not necessary prior to draw.

Causes for Rejection: Unspun LipoTube or unseparated plain red-top or EDTA tube; serum or plasma specimen drawn in gel-barrier collection tube other than the NMR LipoTube; hemolysis (may reduce GlycA concentrations more than 10%)

GENERAL INFORMATION

Expected TAT	3 - 6 days
Clinical Use	As an (1) aid in the identification and stratification of individuals at risk for future cardiovascular (CV) disease, (2) independent marker of prognosis for recurrent cardiovascular events in patients with stable coronary disease or acute coronary syndrome, (3) aid in the assessment of disease activity and risk of CV disease in adult Rheumatoid Arthritis (RA) and psoriasis patients, when used in conjunction with standard clinical assessment and for monitoring of anti-inflammatory treatment. Limitations: Measurements from EDTA plasma specimens are, on average, 3% to 5% lower than from serum samples. Measurements from NMR LipoTube specimens are, on average, 5% to 6% higher than from serum samples collected in red-top tubes. GlycA is an indicator for a wide range of disease processes and should not be interpreted without a complete clinical history. Recent medical events resulting in tissue injury, infections, or inflammation, which may cause elevated GlycA levels, should also be considered when interpreting results. Hemolysis may reduce GlycA concentrations more than 10%. This test was developed, and its performance characteristics determined, by LabCorp. It has not been cleared or approved by the US Food and Drug Administration (FDA).
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