

Overview

Special Instructions

- [DIL Test Requisition Form](#)

Method Name

Automated microfluidics immunoassay method

NY State Available

Yes

Specimen

Specimen Type

Plasma EDTA

Specimen Required

REQUIRED: Completed Cincinnati Children's Diagnostic Immunology Laboratory test requisition form.

Collection Container/Tube: Lavender top (EDTA)

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL plasma

Collection Instructions:

1. Within 8 hours of collection, centrifuge and aliquot plasma into a plastic vial and freeze immediately.
2. Send frozen.

REQUIRED to accompany all specimens (testing will not proceed until all requirements are met):

1. Completed Cincinnati Children's Diagnostic Immunology Laboratory test requisition form.
2. See Special Instructions for a copy of the form.

Specimen Minimum Volume

Plasma: 0.3 mL

Reject Due To

All specimens will be evaluated by the processing and performing laboratories for test suitability.

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Plasma EDTA	Frozen	180 days	

Clinical & Interpretive

Clinical Information

Refer to <https://www.testmenu.com/cincinnatichildrens>

Reference Values

< or =647 pg/mL

Performance

PDF Report

No

Day(s) Performed

Batched 1 time per week

Report Available

6 to 13 days

Performing Laboratory Location

Cincinnati Children's Hosp Med Ctr Core Laboratories

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by the Cancer and Blood Diseases Institute Clinical Laboratories at CCHMC. It has not been cleared or approved by the FDA. This laboratory is regulated under CLIA as qualified to perform high-complexity clinical laboratory testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

CPT Code Information

83520

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
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FCXCL	CXCL9	Not Provided
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Result ID	Test Result Name	Result LOINC® Value
Z6271	CXCL9	Not Provided
Z6272	Electronically signed by:	Not Provided