## Gastrin

Order Name:GASTRINTest Number:3601300Revision Date:12/10/2022

TEST NAME			METHODOLOGY	LOINC CODE
Gastrin			Immunochemiluminometric (ICMA)	2333-3
SPECIMEN REQU	IREMENTS			
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	0.5 mL (0.3 mL)	Serum	Clot Activator SST	Frozen
Instructions	<ul> <li>Notes: 0.3 mL (Note: This volume Does NOT allow for repeat testing.)</li> <li>Specimen Type: Red-top tube or gel-barrier tube</li> <li>Container Detail: LC PP</li> <li>Specimen Storage: FREEZE immediately.</li> <li>Specimen Collection: Separate serum from cells. Transfer the serum into a LabCorp PP transpak frozen purple tube with screw cap (LabCorp ID 49482). Freeze immediately and maintain frozen until tested. To avoid delays in turnaround time when requesting multiple test on frozen samples, PLEASE SUBMIT SEPARATE FROZEN SPECIMENS FOR EACT TEST REQUESTED.</li> <li>Special Instructions: This test may exhibit interference when sample is collected from a person who is consuming a supplement with a high dose of biotin (also termed as vitamin B7 or B8, vitamin H, or coenzyme R). It is recommended to ask all patients who may be indicated for Specimen Stability: Ambient: Not Available, Refrigerated : Not Available, Frozen: 14 days</li> </ul>			
GENERAL INFORMATION				

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Expected TAT	2-4 Days	
Clinical Use	Aids in diagnosis of carcinoid and gastrinoma tumors.	
Performing Labcorp Test Code	004390	
Notes	Labcorp Test Code: 004390	
CPT Code(s)	82941	
Lab Section	Reference Lab	
Code Notes CPT Code(s)	Labcorp Test Code: 004390 82941	