
Reporting Title: Interleukin 2**Performing Location** ARUP Laboratories**Specimen Requirements:****Serum**

Draw blood in a plain red-top tube(s), serum gel tube(s) is acceptable. Spin down and send 1 mL of serum frozen in a plastic vial.

Separate specimens must be submitted when multiple tests are ordered.

Note: Cytokine levels may demonstrate diurnal variation. For longitudinal comparison, it is recommended that cytokine levels be determined at the same time of day.

Specimen Type	Temperature	Time	Special Container
Varies	Frozen (preferred)	365 days	

Supplemental Report:

No

CPT Code Information:

83520

Reference Values:

2.1 pg/mL or less