

Reporting Title: Albumin, S
Performing Location: Mayo Clinic Laboratories - Rochester Main Campus

Necessary Information:
Patient's age and sex are required.

Specimen Requirements:
Collection Container/Tube:
Preferred: Serum gel
Acceptable: Red top
Specimen Volume: 0.5 mL
Submission Container/Tube: Plastic vial
Collection Instructions:

- 1. Serum gel tubes should be centrifuged within 2 hours of collection.
- 2. Red-top tubes should be centrifuged, and the serum aliquoted into a plastic vial within 2 hours of collection.

Forms:
If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:
[-Kidney Transplant Test Request](#)
[-Renal Diagnostics Test Request](#) (T830)

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	150 days	
	Frozen	120 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
ALB	Albumin, S	Numeric	g/dL	1751-7

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:
82040

Reference Values:
> or =12 months: 3.5-5.0 g/dL

Reference values have not been established for patients who are <12 months of age.

For SI unit Reference Values, see <https://www.mayocliniclabs.com/order-tests/si-unit-conversion.html>

