Overview

Method Name
Multiplex array Electrochemiluminescence

NY State Available
Yes

Specimen

Specimen Type
Serum

Specimen Required
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.

Specimen Minimum Volume
1 mL

Reject Due To

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Hemolysis</td>
<td>NA</td>
</tr>
<tr>
<td>Lipemia</td>
<td>NA</td>
</tr>
<tr>
<td>Icterus</td>
<td>NA</td>
</tr>
<tr>
<td>Other</td>
<td>NA</td>
</tr>
</tbody>
</table>

Specimen Stability Information

<table>
<thead>
<tr>
<th>Specimen Type</th>
<th>Temperature</th>
<th>Time</th>
<th>Special Container</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serum</td>
<td>Frozen</td>
<td>365 days</td>
<td></td>
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</tbody>
</table>

Clinical and Interpretive

Reference Values
<2.0 pg/mL

Performance

PDF Report
No

Day(s) and Time(s) Test Performed
Monday, Wednesday, Friday
### Analytic Time
3 - 5 days

### Maximum Laboratory Time
5 - 11 days

### Performing Laboratory Location
Viracor Eurofins

### Fees and 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 Regional Manager. For assistance, contact [Customer Service](#).

#### Test Classification

This test was developed and its performance characteristics determined by Viracor Eurofins. It has not been cleared or approved by the U.S. Food and Drug Administration.

#### CPT Code Information
83520

#### LOINC® Information

<table>
<thead>
<tr>
<th>Test ID</th>
<th>Test Order Name</th>
<th>Order LOINC Value</th>
</tr>
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<tbody>
<tr>
<td>FIL1S</td>
<td>IL-10, Serum</td>
<td>26848-2</td>
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<table>
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<tr>
<th>Result ID</th>
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