

## Overview

### Special Instructions

- [Neurochemistry and Metabolic Test Request Form](#)

### Method Name

HPLC/Electrochemistry/Fluorescence

### NY State Available

Yes

## Specimen

### Specimen Type

CSF

### Shipping Instructions

Ship samples frozen on dry ice

### Specimen Required

Medical Neurogenetics collection kit (MCL T657) required.

#### NOTE:

One set of tubes is required per patient.

Total CSF volume required is 4.5 milliliters

Each collection kit contains 5 micro centrifuge tubes.

Tube #3 contains antioxidants necessary to perform this test.

#### COLLECTION PROTOCOL:

CSF should be collected from the first drop into the tubes **in the numbered** order.

1) Fill each tube to the marked line with the required volumes.

Tube 1: 0.5 mL

Tube 2: 1.0 mL

Tube 3: 1.0 mL (contains antioxidants necessary to protect the sample integrity)

Tube 4: 1.0 mL

Tube 5: 1.0 mL

- If sample's not blood contaminated, the tubes should be placed on dry ice at bedside

- If sample's are blood contaminated, the tubes should immediately be centrifuged (prior to freezing) and the clear CSF transferred to new similarly labeled tubes, then frozen

- Store samples at -80 until they can be shipped

2) Complete Medical Neurogenetics, LLC request form.

Include test required, sample date and date of birth.

3) Label tubes with patient name and ID number, leaving the tube number viewable.

4) Place samples inside a specimen transport bag and the Medical Neurogenetics, LLC request form inside the pouch of the transport bag.

5) Ship samples frozen on dry ice.

### Reject Due To

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	Specimens other than CSF in special collection kit (MCL T657)

### Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
CSF	Frozen		CSF KIT

### Clinical and Interpretive

#### Reference Values

30-80 nmol/L 0 to <3 months

23-65 nmol/L 3 months to <1 years

15-51 nmol/L 1 year to <4 years

10-37 nmol/L 4 years to adult

### Performance

#### PDF Report

No

#### Day(s) and Time(s) Test Performed

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Monday through Friday; Varies

**Analytic Time**

10-14 days

**Maximum Laboratory Time**

16 - 18 days

**Performing Laboratory Location**

Medical Neurogenetics, LLC

**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 Medical Neurogenetics, LCC. It has not been cleared or approved by the U.S. FDA.

**CPT Code Information**

82542

**LOINC® Information**

Test ID	Test Order Name	Order LOINC Value
FP5PC	Pyridoxal 5-phosphate Conc., CSF	Not Provided

Result ID	Test Result Name	Result LOINC Value
Z4918	Pyridoxal 5-Phosphate Concentration	Not Provided
Z4919	Interpretation	Not Provided