

Overview

Method Name

Reversed-phase UPLC-MS/MS

NY State Available

Yes

Specimen

Specimen Type

Serum

Specimen Required

Collection Container/Tube: Red top (serum gel/SST are not acceptable)

Submission Container/Tube: Plastic vial

Specimen Volume: 1 mL Serum

Collection Instructions:

1. Centrifuge and aliquot 1 mL of serum into a plastic vial.
2. Send frozen.

Specimen Minimum Volume

Serum: 0.5 mL

Reject Due To

Gross hemolysis:	Reject
Thawing:	Cold OK; Warm OK
Gross lipemia:	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Serum	Frozen (preferred)	30 days	
	Ambient	14 days	
	Refrigerated	14 days	

Clinical & Interpretive

Clinical Information

Refer to www.eurofins-viracor.com/test-menu/

Reference Values

The assay range is 0.1-10 mcg/mL. The therapeutic range has not been established.

Performance**PDF Report**

No

Day(s) Performed

Monday through Saturday

Report Available

3 to 5 days

Performing Laboratory Location

Eurofins Viracor

Fees & 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 account representative. For assistance, contact [Customer Service](#).

Test Classification

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

CPT Code Information

80299

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FIVCZ	Isavuconazole	Not Provided
Result ID	Test Result Name	Result LOINC® Value
FIVCZ	Isavuconazole	Not Provided