MAYO CLINIC LABORATORIES

Test Definition: FPAN2

Pancreastatin, Plasma

Overview

Method Name
Direct Radioimmunoassay

NY State Available
Yes

Specimen

Specimen Type
Z-Tube Plasma

Shipping Instructions
Ship Frozen

Specimen Required
Patient Preparation:
1. Fasting: 10 hours, recommended; water, but no other liquid, may be taken as needed
2. Patient should not be on any medications that may influence insulin levels, if possible, for at least 48 hours prior to collection.
Collection Container/Tube: Z tube (T701)
Submission Container/Tube: Plastic vial
Specimen Volume: 3 mL plasma
Collection Instructions:
1. Draw 10 mL of blood in a pre-chilled Z-tube.
2. Immediately after collection, centrifuge in a refrigerated centrifuge and aliquot 3 mL of plasma into a plastic vial.
3. Freeze immediately.
4. Send frozen.

Specimen Minimum Volume
Plasma: 1 mL

Reject Due To

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject
Specimens not collected in Z	Reject

tube	

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Z-Tube Plasma	Frozen	60 days	

Clinical & Interpretive

Clinical Information
Refer to www.interscienceinstitute.com/individual-assays/

Reference Values
10-135 pg/mL

Cautions
The reference interval has been established using the ISI preservative indicated for this test. No other sample types are acceptable.

Performance

PDF Report
Referral

Day(s) Performed
Monday through Friday

Report Available
5 to 9 days

Performing Laboratory Location
Inter Science Institute

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.

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Test Classification

This test has not been cleared or approved by the US Food and Drug Administration.
This test was developed and its characteristics determined by Inter Science Institute. Values obtained with different methods, laboratories, or kits cannot be used interchangeably with the results on this report. The results cannot be interpreted as absolute evidence of the presences or absence of malignant disease.

CPT Code Information

83519

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FPAN2	Pancreastatin, Plasma	Not Provided

Result ID	Test Result Name	Result LOINC® Value
FPAN2	Pancreastatin, Plasma	49013-6