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**Reporting Title:** C-Reactive Protein (CRP), S  
**Performing Location:** Rochester**Ordering Guidance:**

To assess the risk of cardiovascular disease or events using C-reactive protein, order HSCRP / C-Reactive Protein, High Sensitivity, Serum.

**Necessary Information:**

Indicate patient's age and sex

**Specimen Requirements:**

Collection Container/Tube:

Preferred: Serum gel

Acceptable: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 0.5 mL

Collection Instructions:

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

Specimen Type	Temperature	Time	Special Container
Serum	Refrigerated (preferred)	21 days	
	Frozen	365 days	
	Ambient	14 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
CRP	C-Reactive Protein (CRP), S	Numeric	mg/L	1988-5

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code:** 1 × 86140

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**Reference Values:**

<5.0 mg/L

Reference values apply to all ages.