

**Reporting Title:** Phenylalanine and Tyrosine, SC, BS**Performing Location:** Rochester**Ordering Guidance:**

For follow-up of an abnormal newborn screen for potential phenylketonuria, order PKU / Phenylalanine and Tyrosine, Plasma

**Necessary Information:**

1. Patient's age is required.
2. Patient's street address, city, state, ZIP (postal) code, country, and home phone are required (post-office [PO] boxes are not acceptable delivery locations).

**Specimen Requirements:**

Supplies: Blood Spot Collection-Self Collect (T858)

Container/Tube: Blood Spot Self Collection Card

Specimen Volume: 2 Blood spots

Additional Information:

1. Order test each time the patient is to collect a dried blood specimen at home and mail the specimen directly to Mayo Clinic Laboratories.
2. Order should be placed a minimum of 3 days prior to desired date of collection.
3. Enter patient's address information for each order created, including street address (post office [PO] boxes are not acceptable delivery locations), city, state abbreviation, zip code, country, and home phone number.
4. For each order, the Blood Spot Collection-Self Collect kit will be mailed directly to the patient for self-collection (delivery to a PO box will not occur).
5. For more information on how to collect blood spots, see the following:
  - How to Collect Dried Blood Spot Samples via fingerstick.
  - Blood Spot Collection Instructions-Fingerstick
  - Blood Spot Collection Instructions-Fingerstick-Spanish

**Forms:**

If not ordering electronically, complete, print, and send a Biochemical Genetics Test Request (T798) with the specimen.

Specimen Type	Temperature	Time	Special Container
Whole blood	Ambient (preferred)	7 days	FILTER PAPER
	Frozen	90 days	FILTER PAPER
	Refrigerated	14 days	FILTER PAPER



**Ask at Order Entry (AOE) Questions:**

Test ID	Question ID	Description	Type	Reportable
PKUSC	BG735	Patient Street Address (No PO Box)	Plain Text	Yes
PKUSC	BG736	Patient City	Plain Text	Yes
PKUSC	BG737	Patient State	Plain Text	Yes
PKUSC	BG738	Patient Zip Code	Plain Text	Yes
PKUSC	BG742	Patient Country	Plain Text	Yes
PKUSC	BG739	Patient Home Phone	Plain Text	Yes

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
610515	Tyrosine, BS	Numeric	nmol/mL	35571-9
610516	Phenylalanine, BS	Numeric	nmol/mL	29573-3
610514	Reviewed By	Alphanumeric		18771-6
BG735	Patient Street Address (No PO Box)	Alphanumeric		56799-0
BG736	Patient City	Alphanumeric		68997-6
BG737	Patient State	Alphanumeric		46499-0
BG738	Patient Zip Code	Alphanumeric		45401-7
BG742	Patient Country	Alphanumeric		77983-5
BG739	Patient Home Phone	Alphanumeric		42077-8

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code:** 1 × 0382u

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**Reference Values:****PHENYLALANINE:**

27-107 nmol/mL

**TYROSINE**

&lt;4 weeks: 40-280 nmol/mL

&gt; or =4 weeks: 25-150 nmol/mL