

**Overview****Method Name**

Direct ELISA

**NY State Available**

No

**Specimen****Specimen Type**

Serum

**Specimen Required****Patient Preparation:**

1. Fasting: 10 to 12 hours, recommended
2. Medications that affect pancreatic activity should be discontinued, if possible, for at least 48 hours prior to specimen collection.

**Collection Container/Tube:****Preferred:** Red top**Acceptable:** Serum gel**Submission Container/Tube:** Plastic vial**Specimen Volume:** 3 mL serum**Collection Instructions:**

1. As soon as possible after collection, centrifuge and aliquot 3 mL of serum into a plastic vial.
2. Freeze immediately.
3. Send frozen.

**Specimen Minimum Volume**

Serum: 1 mL

**Reject Due To**

Gross hemolysis	Reject
Gross lipemia	Reject
Gross icterus	Reject

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
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Serum	Frozen (preferred)	365 days	
	Ambient	72 hours	
	Refrigerated	7 days	

## Clinical & Interpretive

### Clinical Information

Refer to [www.interscienceinstitute.com/individual-assays/](http://www.interscienceinstitute.com/individual-assays/)

### Reference Values

Normal pancreatic exocrine function: Less than 3.5 ng/mL

No pediatric reference ranges are available for this test.

## Performance

### PDF Report

Referral

### Day(s) Performed

Monday through Friday

### Report Available

12 to 14 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](#).

### Test Classification

This test has not been cleared or approved by the US Food and Drug Administration.

This test was developed and its performance 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 presence or absence of malignant disease.

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**CPT Code Information**

83520

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
FPCEL	Pancreatic Elastase-1	Not Provided

Result ID	Test Result Name	Result LOINC® Value
FPCEL	Pancreatic Elastase-1	14048-3