

## Overview

**Method Name**

Radioimmunoassay (RIA) after acid-alcohol extraction

**NY State Available**

Yes

## Specimen

**Specimen Type**

Serum

**Specimen Required****Specimen Type:** Serum**Container/Tube:** Red or SST**Specimen Volume:** 0.5 mL**Collection Instructions:** Draw blood in a plain, red-top tube(s). Separate within 1 hours of collection, freeze immediately. Send 0.5 mL serum frozen.**Note:**

1. Serum gel tube is okay, but must pour off into a plastic screw cap vial and freeze.
2. Minimum volume does not permit for repeat analysis.

**Specimen Minimum Volume**

0.1 mLNOTE: Minimum volume does not allow for repeat analysis.

**Reject Due To**

Other	Specimen not serum
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**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Serum	Frozen	200 days	

**Clinical & Interpretive**

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**Reference Values**

<u>Age</u>	<u>Range (ng/mL)</u>	<u>Mean</u>
Prepubertal	258 – 882	570
Pubertal	273 – 892	583
Adults	333 – 967	650

**Performance****PDF Report**

No

**Day(s) Performed**

Tuesday

**Report Available**

11 to 17 days

**Performing Laboratory Location**

Esoterix Endocrinology

**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 LabCorp. It has not been cleared or approved by the Food and Drug Administration.

**CPT Code Information**

83519

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
FIGF2	Insulin-Like Growth Factor II	2485-1

Result ID	Test Result Name	Result LOINC® Value
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Z2324	Insulin-Like Growth Factor II	2485-1
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