Quarterly HOTLINE: Effective February 19, 2019

0099007 Antimony, Blood **ANT B**

Performed: Sun-Sat
Reported: 1-3 days

Specimen Required: Patient Prep: Diet, medication, and nutritional supplements may introduce interfering substances. Patient should be encouraged to discontinue nutritional supplements, vitamins, minerals, and non-essential over-the-counter medications (upon the advice of their physician).
Collect: Royal Blue (K_2EDTA or Na_2EDTA).
Specimen Preparation: Transport 7 mL whole blood in the original collection tube. (Min: 0.5 mL)
Storage/Transport Temperature: Room temperature. Also acceptable: Refrigerated.
Unacceptable Conditions: Specimens collected in tubes other than Royal Blue (EDTA). Specimens transported in containers other than a Royal Blue (EDTA) tube or Trace Element-Free Transport Tube. Heparin anticoagulant. Clotted specimens.
Stability (collection to initiation of testing): Ambient: Indefinitely; Refrigerated: Indefinitely; Frozen: Unacceptable

Reference Interval: Effective February 19, 2019
Less than or equal to 6.0 µg/L

Interpretive Data: Elevated results may be due to skin or collection-related contamination, including the use of a noncertified metal-free collection/transport tube. If contamination concerns exist due to elevated levels of blood antimony, confirmation with a second specimen collected in a certified metal-free tube is recommended.

Blood antimony levels predominantly reflect recent exposure and are most useful in the diagnosis of acute poisoning. Blood concentrations in unexposed individuals rarely exceed 10 µg/L. The form of antimony greatly influences distribution and elimination. Trivalent antimony readily enters red blood cells, has an extended half-life on the order of weeks to months, and is eliminated predominantly through the bile. Pentavalent antimony resides in the plasma, has a relatively short half-life on the order of hours to days, and is eliminated predominantly through the kidneys. Reported symptoms after toxic antimony exposure vary based upon route of exposure, duration and antimony source and may include abdominal pain, dyspnea, nausea, vomiting, dermatitis and eye irritation. Clinical presentation is similar to that of inorganic arsenic exposure.

See Compliance Statement B: www.aruplab.com/CS

HOTLINE NOTE: Remove information found in the Note field. There is also a numeric map change associated with this test.
Change the numeric map for component 0099007, Antimony Blood from XXX to XX.X.