

TEST CHANGE

Antimicrobial Level - Cycloserine, Serum or Plasma

2009367, CYCLOS

Specimen Requirements:

Patient Preparation:

Collect: Plain red. Also acceptable: Green (sodium or lithium heparin).

Specimen Preparation: Separate from cells ASAP or within one hour of collection. Transfer 2 mL serum or plasma to an ARUP **standard transport tube** ~~Standard Transport Tube~~ and freeze immediately. (Min: 0.5 mL) Test is not performed at ARUP; separate specimens must be submitted when multiple tests are ordered.

Transport Temperature: CRITICAL FROZEN.

Unacceptable Conditions: Severely hemolyzed or thawed specimens.

Remarks: ~~Include drug dose amount, frequency, method, and date and time of last dose prior to draw on requisition form.~~

Stability: Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 1 month

Methodology: Quantitative Gas Chromatography-Mass Spectrometry

Performed: Varies

Reported: 3-10 days

Note: ~~If the exact time of both the dose and the blood draw are not accurately recorded, accurate interpretation of the concentration will not be possible.~~

CPT Codes: 80299

New York DOH Approval Status: Specimens from New York clients will be sent out to a New York DOH approved laboratory, if possible.

Interpretive Data:

Reference Interval:

By report

HOTLINE NOTE: There is a component change associated with this test. One or more components

have been added or removed. Refer to the Hotline Test Mix for interface build information.