

HOTLINE: Effective May 18, 2020

New Test3002601Cytokine Panel 13, PlasmaCYT13 PLA

| Methodology: | Quantitative Multiplex Bead Assay |
|--------------|-----------------------------------|
| Performed: | Sun-Sat |
| Reported: | 1-4 days |

Specimen Required: Collect: Green (lithium heparin).

year

<u>Specimen Preparation:</u> Separate plasma from cells ASAP or within 2 hours of collection. Transfer 1 mL plasma to an ARUP Standard Transport Tube. (Min: 0.4 mL) <u>Storage/Transport Temperature:</u> **CRITICAL FROZEN. Additional specimens must be submitted when multiple tests are**

ordered. Ship in an ARUP Standard Transport Tube.

<u>Unacceptable Conditions:</u> Refrigerated specimens. Contaminated or heat inactivated specimens. <u>Stability (collection to initiation of testing):</u> After separation from cells: Ambient: 30 minutes; Refrigerated: Unacceptable; Frozen: 1

Reference Interval:

| Test Number | Components | Reference Interval |
|-------------|----------------------------|----------------------|
| 3002631 | Interleukin 2 Receptor, | 266.5 – 1410.4 pg/mL |
| | Soluble, Plasma | |
| 3002624 | Interleukin 12, Plasma | 4.7 pg/mL or less |
| 3002628 | Interferon gamma, Plasma | 10.4 pg/mL or less |
| 3002622 | Interleukin 4, Plasma | 2.5 pg/mL or less |
| 3002621 | Interleukin 5, Plasma | 2.1 pg/mL or less |
| 3002623 | Interleukin 10, Plasma | 5.3 pg/mL or less |
| 3002625 | Interleukin 13, Plasma | 5.3 pg/mL or less |
| 3002629 | Interleukin 1 beta, Plasma | 7.4 pg/mL or less |
| 3002620 | Interleukin 6, Plasma | 2.5 pg/mL or less |
| 3002619 | Interleukin 8, Plasma | 9.4 pg/mL or less |
| 3002618 | Tumor Necrosis Factor - | 14.5 pg/mL or less |
| | alpha, Plasma | |
| 3002630 | Interleukin 2, Plasma | 2.1 pg/mL or less |
| 3002626 | Interleukin 17, Plasma | 2.2 pg/mL or less |

Interpretive Data:

Results are used to understand the pathophysiology of immune, infectious, or inflammatory disorders, or may be used for research purposes. See Compliance Statement B: www.aruplab.com/CS

Note: Cytokine levels may demonstrate diurnal variation. For longitudinal comparison, it is recommended that cytokine levels be determined at the same time of day.

CPT Code(s): 83520 x13

New York DOH Approved.

HOTLINE NOTE: Refer to the Test Mix Addendum for interface build information.