

**TEST CHANGE**

**Hemoglobin F with Reflex to Electrophoresis**

3002645, HGB F

**Specimen Requirements:**

**Patient Preparation:**

**Collect:** Lavender (EDTA) or pink (K2EDTA).

**Specimen Preparation:** Transport 3 mL whole blood in original tube. (Min: 0.2 mL)  
Also acceptable: whole blood in an ARUP standard transport tube.

**Transport Temperature:** Refrigerated.

**Unacceptable Conditions:** Frozen or room temperature specimens.

**Remarks:**

**Stability:** Ambient: Unacceptable; Refrigerated: 1 week; Frozen: Unacceptable

**Methodology:** High Performance Liquid Chromatography (HPLC) / Electrophoresis

**Note:** This assay measures percentage of hemoglobin F only. If abnormal peaks suggestive of a hemoglobin variant are detected, then capillary electrophoresis Capillary Electrophoresis will be added to aid in confirmation and identification of the variant. Additional charges apply. For complete hemoglobin evaluation, order Hemoglobin Evaluation with Reflex to Electrophoresis and/or RBC Solubility (0050610).

**CPT Codes:** 83021; if reflexed, add 83020

**New York DOH Approval Status:** This test is New York DOH approved.

**Interpretive Data:**

Refer to report.

Reference Interval:

**Age-Defined Normal Hemoglobin Reference Intervals**

Test Number	Components	Reference Interval	
	Hemoglobin F	Age	Reference Intervals (%)
		0-1 month	45.8-91.7
		2 months	32.7-85.2
		3 months	14.5-73.7
		4 months	4.2-56.9
		5 months	1.0-38.1
		6-8 months	0.9-19.4
		9-12 months	0.6-11.6
		13-23 months	0.0-8.5
		2 years and older	0.0-2.1