

TEST CHANGE

Calprotectin, Fecal by Immunoassay

3002859, CALPRO FEC

Specimen Requirements:

Patient Preparation:

Collect: Stool.

Specimen Preparation: Transfer 5 g stool to an unpreserved stool transport vial (ARUP

Supply #40910). Available online through eSupply using ARUP Connect(TM) or contact ARUP Client Services at (800<u>-</u>)-522-

Effective Date: May 15, 2023

2787. (Min: 1 g)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Specimens in media or preservatives.

Remarks:

Stability: Ambient: Unacceptable; Refrigerated: 7 days; Frozen: 30 days

Methodology: Quantitative Chemiluminescent Immunoassay (CLIA)

Performed: Sun-Sat

Reported: 1-43 days

Note:

CPT Codes: 83993

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

Interpretive Data:

Fecal Calprotectin is an indicator of the presence of neutrophils in stool and is not specific for IBD. Other intestinal ailments including GI infections and colorectal cancer can result in elevated concentrations of calprotectin. The diagnosis of IBD cannot be established solely on the basis of a positive calprotectin result. Patients with IBD fluctuate between active and inactive stages of disease. Calprotectin results may also fluctuate.

Reference Interval:

121 ug/g

49 ug/g or less Normal
50-120 ug/g Borderlir

Borderline elevated, test should be reevaluated in 4-6 weeks. Elevated



etment of Pathology Effective Date: May 15, 2023