

NEW TEST - Available Now

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Vitamin C, Plasma (High-Dose Therapy)

3017651, VIT C IV

Specimen Requirements:

Patient Preparation:

Collect: Green (sodium or lithium heparin). Place specimen in ice bath immediately. Also acceptable: Plasma separator tube.

Specimen Preparation: Protect from light, centrifuge, transfer plasma, and freeze within 1 hour of collection. Transfer 0.5 mL plasma to an ARUP amber transport tube. (Min: 0.3 mL)

Transport Temperature: CRITICAL FROZEN AND LIGHT PROTECTED. Separate specimens must be submitted when multiple tests are ordered.

Unacceptable Conditions: EDTA plasma, whole blood, or body fluids. Grossly hemolyzed specimens.

Remarks: Thawing and refreezing of the specimen and exposure to light will result in decreased vitamin C concentration.

Stability: After separation from cells: Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 1 month

Methodology: Quantitative High Performance Liquid Chromatography-Tandem Mass Spectrometry

Performed: Sun-Sat

Reported: 1-6 days

Note: Thawing and refreezing of the specimen and exposure to light will result in decreased vitamin C concentration.

CPT Codes: 82180

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

Interpretive Data:

Intravenous vitamin C (IVC) administration produces millimolar plasma ascorbate (vitamin C) concentrations. Therapeutic concentrations average 15 mmol/L and range from 1-30 mmol/L. The maximum plasma concentration achieved by oral supplementation of vitamin C is approximately 250

Vitamin C concentration is reported as micromoles per liter ($\mu\text{mol/L}$). To convert concentration to millimoles per liter (mmol/L), multiply the result by 0.001.

Reference Interval:

Test Number	Components	Reference Interval
	Vitamin C, Plasma	23-114 $\mu\text{mol/L}$

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