Labcorp Oklahoma, Inc. Test Directory

Flow Cytometry on Peripheral Blood

Order Name: **FLOW PB** Test Number: 5582600 Revision Date: 07/06/2022

TEST NAME		МЕТН	IODOLOGY	LOINC CODE	
Flow Cytometry on Peripheral Blood			Flow cytometry		
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	5mL (3mL)	Whole Blood	EDTA (Lavender Top)	Room Temperature	
Alternate 1	5mL (3mL)	Whole Blood	Lithium Heparin (Dark Green Top / No-Gel)	Room Temperature	
Instructions	 Deliver to laboratory (flow cytometry) ASAP. DO NOT Centrifuge or Refrigerate. Collect Monday through Friday only! Specimen must be received in the lab section by Friday afternoon or collect sample on Monday. Specimen stability: 48hrs Room Temperature. 				
GENERAL INFORMAT	TION				

GENERAL INFORMATION		
Testing Schedule	Tue-Sat	
Expected TAT	2 Days	
Clinical Use	Assist in the diagnosis of a lymphoproliferative disease.	
CPT Code(s)	Test Dependant	
Lab Section	Flow Cytometry	