

Methemoglobin

Order Name: **MET HGB**
Test Number: 2004200
Revision Date: 10/01/2022

| TEST NAME | METHODOLOGY | LOINC CODE |
|---------------|-------------|------------|
| Methemoglobin | Hemoximeter | 2614-6 |

SPECIMEN REQUIREMENTS

| | | | | |
|--------------|---|--------------------|--|-------------------------|
| Specimen | Specimen Volume (min) | Specimen Type | Specimen Container | Transport Environment |
| Preferred | 2 mL (1.0) | Whole Blood | Lithium Heparin (Dark Green Top / No-Gel) | See Instructions |
| Alternate 1 | 2 mL (1.0) | Whole Blood | Sodium Heparin (Green Top / No-Gel) | See Instructions |
| Instructions | Specimen must be on ice. Deliver whole blood to lab immediately. Must be run within 30 minutes of drawing. Note: This test is only performed by Labcorp Oklahoma, Inc. at the following locations: Ascension St John in Tulsa, OK. Jane Phillips Medical Center in Bartlesville, OK. | | | |

GENERAL INFORMATION

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|------------------|---|
| Testing Schedule | Daily |
| Expected TAT | 1-2 days |
| Clinical Use | Useful for the diagnosis of methemoglobinemia and identifying cyanosis due to other causes. |
| CPT Code(s) | 83050 |
| Lab Section | Chemistry |