

Newborn Screening

Order Name: **PKU**
Revision Date: 01/12/2013

TEST NAME		METHODOLOGY		LOINC CODE
Newborn Screening				
SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Instructions	1. Collect specimen using State Health Department filter paper. Do not use heparinized capillary tubes to collect blood. Fill card from 1 side only. Do not fill from both sides. 2. Complete all requested information on filter paper forms. (Incorrect or incomplete form is not acceptable.) 3. Allow card to dry completely for a minimum of 4 hours, and place dried card into a biohazard bag. Forward promptly to laboratory. Note: Label specimen with patient name (first and last) or other unique identifier, patient hospital identification number or Social Security number, date and time of collection, collector initials, and test(s) being ordered.			
Reference Range	Normal			

GENERAL INFORMATION	
Testing Schedule	Monday through Sunday
CPT Code(s)	82139-Amino acids, 6 or more amino acids, quantitative, each specimen 82760-Galactose 83020-Hemoglobin fractionation and quantitation; electrophoresis 83498-Hydroxyprogesterone, 17-d 83516-Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method 83789-Mass spectrometry and tandem mass spectrometry (MS, MS/MS), analyte not elsewhere specified; quantitative, each specimen 84443-TSH congenital hypothyroidism 83918-Organic acid disorders 82261-Biotinidase deficiency
Lab Section	Oklahoma State Department of Health (OSDH)