Labcorp Oklahoma, Inc. Test Directory

Malaria Smear, Thick

Reference Range

No parasites seen

Order Name: **MALSMTHICK**Revision Date: 04/26/2016

TEST NAME		ME	THODOLOGY	LOINC CODE	
Malaria Smear, Thick					
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	mL (mL)	Whole Blood Or Slides	Lavender Top K2 EDTA		
Instructions	Place a large drop of whole blood, collected in EDTA vacutainer or directly from a fingerstick, on a slide. Using a corner of a second slide, spread drop by literally scratching carrier slide to make blood adhere. Allow film to thoroughly air dry. Do not fix or expose to heat. Send slides in plastic slide containers. Forward promptly at ambient temperature only.				
	2. Label specimen with patien	d on request form for processing. t name (first and last) or other unique or initials, and test(s) being ordered.	identifier, patient hospital identificati	on number or Social Security number, date	

GENERAL INFORMATION		
Testing Schedule	Monday through Sunday	
Expected TAT	24 Hours	
CPT Code(s)	87207	
Lab Section	NRLS-Core Hematopathology	

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