

# Cortisol, Total

**CPT Code:** 82533

**Order Code:** C384

**ABN Requirement:** No

**Synonyms:** Hydrocortisone; Total Cortisol; Cortisol, Serum

**Specimen:** Serum or EDTA plasma

**Volume:** 1.0 mL

**Minimum Volume:** 0.5 mL

**Container:** Gel-barrier tube (SST, Tiger Top) or EDTA (Lavender Top tube)

## Collection:

### Serum:

1. Collect and label sample according to standard protocols.
2. Gently invert tube 5 times immediately after draw. DO NOT SHAKE.
3. Allow blood to clot 30 minutes.
4. Centrifuge for 10 minutes.

### Plasma:

1. Draw and gently invert 8 to 10 times.
2. Centrifuge for 10 minutes.
3. Pre-squeeze transfer pipet bulb and draw off approximately 2/3 of the upper plasma layer.  
**Note:** *This ensures that the buffy coat and red cells remain undisturbed.*
4. Aliquot plasma into labeled transport tube labeled as "EDTA plasma" and cap tightly. Discard original tube.
5. Store transport tube refrigerated at 2-8°C until ready to ship.

**Special Instructions:** This test is not recommended when the patient is on prednisone or prednisolone therapy. Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last dose.

**Transport:** Store serum or EDTA plasma at 2°C to 8°C after collection and ship the same day per packaging instructions included with the provided shipping box.

**Stability:**

**Ambient (15-25°C):** 24 hours

**Refrigerated (2-8°C):** 4 days

**Frozen (-20°C):** 12 months

**Deep Frozen (-70°C):** 12 months

**Causes for Rejection:** Specimens other than serum or EDTA plasma; improper labeling; samples not stored properly; samples older than stability limits

**Methodology:** Electrochemiluminescence Immunoassay (ECLIA)

**Turn Around Time:** 4 days

**Reference Range:**

Age	µg/dL
Adult	AM (6-10 AM) 4.8-19.5
Adult	PM (4-8 PM) 2.5-11.9

**Intended Use:** Cortisol is increased in Cushing's Disease and decreased in Addison's Disease (adrenal insufficiency).

*The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.*