

Testosterone, Free (Dialysis) and Total (MS)

CPT Code: 84402, 84403

Order Code: 1300

Includes: Testosterone, Total, (LC/MS/MS) and Testosterone, Free (Dialysis)

ABN Requirement: No

Synonyms: Free Testosterone

Specimen:

Preferred: serum

Acceptable: plasma

Volume: 1.8 mL

Minimum Volume: 0.9 mL

Container:

Preferred: R, red-top tube (no gel) or SS, serum separator tube

Acceptable: Gn, green-top tube, sodium or lithium heparin

Collection:

Specify age and sex on test request form.

Red-top tube (no gel): Allow blood to clot at room temperature. Centrifuge to separate the serum from the cells and immediately pour serum into a plastic transport tube.

Serum separator tube: Allow blood to clot at room temperature, centrifuge, and remove serum from the gel immediately (not to exceed 48 hours) by pouring serum into a plastic transport tube.

Transport: Store serum 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): 7 days

Refrigerated (2-8°C): 21 days

Frozen (-20°C): 2 years

Causes for Rejection: gross hemolysis; gross lipemia

Methodology: Chromatography/Mass Spectrometry, Equilibrium Dialysis, Calculation

Turn Around Time: 5 to 6 days

Reference Range:

Testosterone, Free:

	Male (pg/mL)	Female (pg/mL)
5-9 years	≤5.3	0.2-5.0
10-13 years	0.7-52.0	0.1-7.4
14-17 years	18.0-111.0	0.5-3.9
18-69 years	35.0-155.0	0.1-6.4
70-89 years	30.0-135.0	0.2-3.7

Testosterone, Total:

	Male (ng/dL)	Female (ng/dL)
Cord Blood	17-61	16-44
1-2 months	72-344	≤17
3-4 months	≤201	≤12
5-6 months	≤59	≤13
7-11 months	≤16	≤11
1-5 years	≤5	≤8
6-7 years	≤25	≤20
8-10 years	≤42	≤35
11 years	≤260	≤40
12-13 years	≤420	≤40
14-17 years	≤1000	≤40
≥18 years	250-1100	2-45

Clinical Significance: Helpful in assessing testicular function in males, and in managing hirsutism and virilization in females.

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.