Testosterone, Total, Males (Adult), Immunoassay

CPT Code: 84403 Order Code: C156

ABN Requirement: No

Synonyms: Total Testosterone

Specimen: Serum **Volume**: 0.5 mL

Minimum Volume: 0.2 mL

Container: Gel-barrier tube (SST, Tiger Top)

Collection:

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.

Note: All test requests for Total Testosterone on female and pediatric (<18 years) patients must use test code 15983 - Testosterone, Total, MS.

Special Instructions: 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.

Patient Preparation: Due to changes in testosterone levels throughout the day, two morning (8:00-10:00 a.m.) specimens obtained on different days are recommended by The Endocrine Society for screening.

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): Not acceptable

Refrigerated (2-8°C): 2 weeks

Frozen (-20°C): 6 months

Causes of Rejection: Samples from patients under Nandrolone treatment; samples which are heat-inactivated; specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits; gross hemolysis; gross lipemia

Methodology: Immunoassay

Turn Around Time: 1 to 3 days

Reference Range:

Sex	Age/Stage	ng/dL
Male	18-49 Years	249-836
	≥50 Years	193-740

Clinical Significance: Testosterone circulates almost entirely bound to transport proteins: normally less than 1-2% is free. The principal transport protein for testosterone is known as sex hormone binding globulin (SHBG) or testosterone-estradiol binding globulin (TeBG). Testosterone measurements are used to assess erectile dysfunction, infertility, gynecomastia, and osteoporosis and to assess hormone replacement therapy.

Limitations: Results from patients under Nandrolone treatment are unreliable. In rare cases, interference due to extremely high titers of antibodies to analyte-specific antibodies, streptavidin or ruthenium can occur.

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.