

LAB3889 Thyroid Stimulating Hormone with Reflex (TSHR)

BMC, FOX, FTT, CRH, LFH, OCH

Performing Location(s)

BMC, FOX, FTT, CRH, LFH, OCH

Specimen Type

Serum

Preferred Container

Gold or Red top tube

Minimum Volume to Submit for Testing

0.5 mL Serum

Transportation Needs

Deliver specimen to laboratory within 1 hour of collection if unspun.

If not possible see "Storage Requirements".

Storage Requirements

Sample tubes should be centrifuged within 2 hours of collection followed by transfer of the serum (red or gold top) to a labeled plastic, aliquot tube.

See Causes of Rejection for temperature requirements.

Avoid repeated freezing and thawing

Causes for Rejection

Mislabeled or unlabeled specimen

Less than 50% draw for vacutainer tubes

> 48 hours refrigerated

> 8 hours room temperature

> 3 months frozen

Plasma specimen

Hemolysis > 1000 mg/dL HgB

Lipemia > 3300 mg/dL Trig

Bilirubin > 40 mg/dL Bili

EDTA, NaF, Citrate, Oxalate

Reference Values

TSH Reference Range		
Population	Units	Reference Range
General (> month old)	uIU/mL	0.41-4.50

T4, Free Reference Range		
Population	Units	Reference Range

All populations	ng/dL	0.6-1.3
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T3, Total Reference Range		
Population	Units	Reference Range
All populations	ng/dL	79.0-149.0

Additional Information

Reflexive Thyroid Testing Protocol

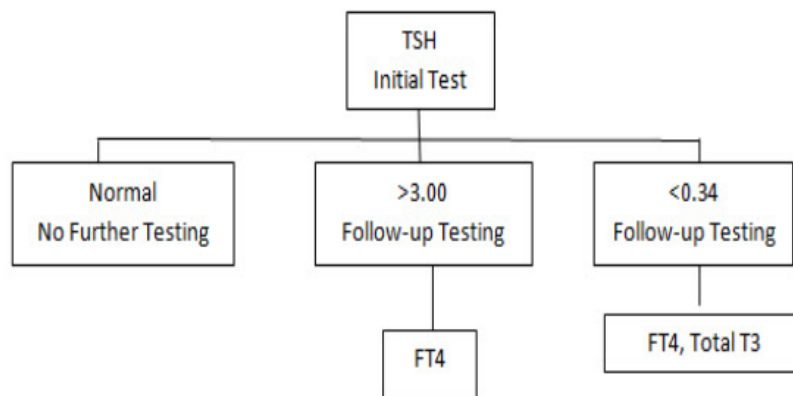
Thyroid function tests are ordered whenever there is suspected thyroid disease or for the management of patients on replacement therapy. The introduction of sensitive thyrotropin (sTSH) in the early 1990's has transformed thyroid function testing from thyroxine-based strategies to sTSH strategies. The American Thyroid Association (ATA) and the National Academy of Clinical Biochemists (NACB) have recommended that serum sTSH level be the first test, complemented by an appropriate free thyroxine (FT4) estimate. This strategy represents the best and most efficient combination of blood tests for diagnosis and follow-up of most patients with thyroid disorders.

Accordingly, the Bassett Healthcare Clinical Laboratories will be providing reflexive thyroid function testing using the following algorithm.

T3 is recommended for patients with suppressed sTSH and normal FT4. T3 is not recommended in patients with normal or increased sTSH.

Most thyroid testing is performed on out-patients. The ATA does not recommend thyroid screening in sick hospitalized patients, unless clinically significant thyroid disease is suspected.

This algorithm has been approved by Endocrinology.



Reflex Testing

Accordingly, the Bassett Healthcare Clinical Laboratories will be providing reflexive thyroid function testing using the following algorithm:

If the TSH is normal, no further testing will be performed. (CPT 84443 will be billed).

If the TSH is > 4.50, a FT4 will be performed (CPT 84439 will be billed).

If the TSH is < 0.41 a FT4 and a TT3 will be performed (CPT's 84439, 84480 and 84443 will be billed).

Available STAT

Yes

Methodology

See individual tests (TSH, Free T4, & Total T3)

CPT Code

84439 - Free T4

84480 - T3

84443 - TSH