

# **Test Definition: FPEPI**

Pepsinogen I (PG I)

#### **Overview**

#### **Method Name**

Radioimmunoassay (RIA)

#### **NY State Available**

No

# **Specimen**

# **Specimen Type**

Serum

# **Specimen Required**

#### **Patient preparation:**

- 1. Patient should be fasting 10-12 hours prior to collection of specimen.
- 2. Antacids or other medications affecting stomach acidity or gastrointestinal motility should be discontinued, if possible, for at least 48 hours prior to collection.

**Specimen Type:** Serum **Collection Container/Tube:** 

Preferred: Red top

Acceptable: Serum gel, EDTA

Submission Container/Tube: Plastic vial

**Specimen Volume:** 3 mL Collection Instructions:

- 1. Draw blood in plain red-top tube(s), serum gel tube(s) or EDTA is acceptable.
- 2. Centrifuge and aliquot 3 mL serum in a plastic vial.
- 3. Send frozen.

# **Specimen Minimum Volume**

1 mL

# **Reject Due To**

Gross	Reject
hemolysis	
Thawing	Cold reject; Warm reject
Gross lipemia	Reject
Gross icterus	Reject

# **Specimen Stability Information**



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Specimen Type	Temperature	Time	Special Container
Serum	Frozen	14 days	

#### Clinical & Interpretive

#### **Reference Values**

24-214 ng/mL

#### **Performance**

# **PDF Report**

Referral

# Day(s) Performed

Monday through Friday

#### Report Available

9 to 11 days

#### **Performing Laboratory Location**

Inter Science Institute

#### **Fees & Codes**

#### **Fees**

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

# **Test Classification**

This test was developed and its performance characteristics determined by Inter Science Institute. Values obtained with different methods, laboratories, or kits cannot be used interchangeably with the results on this report. The results cannot be interpreted as absolute evidence of the presence or absence of malignant disease.

### **CPT Code Information**

83519

# **LOINC®** Information

Test ID	Test Order Name	Order LOINC® Value



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FPEPI	Pepsinogen I	Not Provided
Result ID	Test Result Name	Result LOINC® Value
FPEPI	Pepsinogen I	2736-7