Lp-PLA₂ Activity

**CPT Code:** 83698  
**Order Code:** C570  
**ABN Requirement:** No  
**Synonyms:** Lipoprotein-associated Phospholipase A₂; Lp-PLA₂; Lp-PLA₂ Activity Assay

**Specimen:** Serum or EDTA Plasma  
**Volume:** 1.0 mL  
**Minimum Volume:** 0.5 mL  
**Container:**

**Serum:** Gel-barrier tube (Tiger Top) *preferred*

**Plasma:** 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 at 1300 rcf for 10 minutes.

**EDTA Plasma:**

1. Draw and gently invert 8 to 10 times.  
2. Centrifuge immediately for 10 minutes at 1300 RCF at room temperature.  
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.

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

**Ambient (15-25°C):** 21 days

**Refrigerated (2-8°C):** 180 days

**Frozen (-20°C):** 180 days

**Deep Frozen (-70°C):** 180 days

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

**Methodology:** Liquid Chromatography/Tandem Mass Spectrometry (LC MS/MS)

**Turn Around Time:** 3 to 5 days

**Reference Range:**

<table>
<thead>
<tr>
<th>Age</th>
<th>Low Risk nmol/min/mL</th>
<th>High Risk nmol/min/mL</th>
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<tbody>
<tr>
<td>All Ages</td>
<td>&lt;75</td>
<td>≥75</td>
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**Intended Use:** The Lp-PLA₂ Activity assay may be useful for individuals at intermediate or high risk for developing coronary heart disease.

**Additional Information:** Lp-PLA₂ Activity levels should be interpreted in conjunction with clinical findings and other diagnostic tests. This test does not replace blood cholesterol tests or other traditional risk factors identified for coronary heart disease or ischemic stroke.

*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.*