sd-LDL

**CPT Code:** 83722  
**Order Code:** 1341  
**ABN Requirement:** No  
**Synonyms:** Small Dense LDL; Small Dense Low-density Lipoprotein; sdLDL  
**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.

**Special Instructions:** At least 3 ml of blood should be drawn.

**Patient Preparation:** Fasting may be required for this test. Please ask your doctor if you should fast prior to testing.

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

**Stability:**

- **Ambient (15-25°C):** not acceptable  
- **Refrigerated (2-8°C):** 5 days  
- **Frozen (-20°C):** not acceptable  
- **Deep Frozen (-70°C):** >5 days

**Causes for Rejection:** Specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits

**Methodology:** Immunoturbidimetric

**Turn Around Time:** 1 to 3 days
Relative risk:

<table>
<thead>
<tr>
<th>Age</th>
<th>Goal mg/dL</th>
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<tbody>
<tr>
<td>All Ages</td>
<td>≤40.0</td>
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**Intended Use:** The small dense LDL test can be used to determine cardiovascular risk in individuals with metabolic syndrome or established/progressing coronary artery disease, individuals with triglyceride levels between 70 and 140 mg/dL, as well as individuals with a diet high in trans-fat or carbohydrates.

**Limitations:** Drawing less than 3 ml of blood in a tiger-top serum separator tube (SST) may cause erroneous results.

**Additional Information:** The small dense form of LDL (sdLDL) cholesterol carries a three-fold increased risk of myocardial infarction compared to large LDL cholesterol.

*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.*