

Insulin Response to Glucose (IROGTT)

ABN Requirement: No

CPT Code:

IROGTT, 2 Samples: 83525 (x2)

IROGTT, 3 Samples: 83525 (x3)

Each additional sample: 83525

Order Code:

IROGTT, 3 Samples (Fasting, 1 hour, 2 hour): C559

IROGTT, 2 Samples (Fasting, 1 hour): C558

IROGTT, 2 samples (Fasting, 2 hour): 1344

IROGTT, Additional Insulin 1: 1419

IROGTT, Additional Insulin 2: 1420

Specimen: Serum

Volume: 1.0 mL (per timed specimen)

Minimum Volume: 0.5 mL (per timed specimen)

Container: Gel-barrier tube (SST)

Fasting: Overnight fasting is required.

Patient Preparation: High carbohydrate diet for 3 days before test. Patient NPO after midnight; overnight fasting is required. Glucose solution 1.75 g/kg body weight (maximum dose 75g) orally administered after collection of fasting specimen.

Collection:

1. Draw fasting specimen. Collect 1 mL serum for each timed specimen post glucose dose. All tubes must be clearly labeled with the time of draw. Submit all tubes with one test requisition.
2. Collect and label sample according to standard protocols.
3. Gently invert tube 5 times immediately after draw. Do not shake.
4. Allow blood to clot 30 minutes.

5. Centrifuge for 10-15 minutes.

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): 7 days

Frozen (-20°C): 28 days

Causes for Rejection: Specimens other than serum; improper labeling; samples not stored properly; samples older than stability limits; hemolysis; plasma; gross icterus

Methodology: Immunoassay (IA)

Turn Around Time: 1 to 3 days

Reference Range:

Clinical Significance: The insulin response to glucose infusion is useful in evaluating patients with hypoglycemia and suspected insulin-resistance.

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.