Lp-PLA2 Activity

NEW YORK DOH APPROVED: NO

CPT Code: 83698
Order Code: 94218
ABN Requirement:  No
Synonyms: Lipoprotein-associated Phospholipase A$_2$; Lp-PLA$_2$; Lp-PLA$_2$ Activity Assay

Specimen: Serum
Volume: 1.0 mL
Minimum Volume: 0.5 mL
Container: Gel-barrier tube (SST, Tiger Top)

Serum: 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.

Fasting: Fasting is preferred, but not required.

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): 7 days
Refrigerated (2-8°C): 28 days
Frozen (-20°C): 28 days

Causes for Rejection: Specimens other than serum; samples not processed properly; samples older than stability limits; gross hemolysis

Methodology: Enzymatic Assay
**Turn Around Time:** 3 to 4 days

**Relative Risk Ranges:**

<table>
<thead>
<tr>
<th>Sex</th>
<th>Low Risk nmol/min/mL</th>
<th>Moderate Risk nmol/min/mL</th>
<th>High Risk nmol/min/mL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male &amp; Female</td>
<td>≤123</td>
<td>N/A</td>
<td>&gt;123</td>
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</tbody>
</table>

**Clinical Significance:** Lipoprotein-associated phospholipase A\(_2\) (Lp-PLA\(_2\)), also known as platelet activating factor acetylhydrolase, is an inflammatory enzyme that circulates bound mainly to low-density lipoproteins and has been found to be localized and enriched in atherosclerotic plaques. In multiple clinical trials, Lp-PLA\(_2\) activity has been shown to be an independent predictor of coronary heart disease and stroke in the general population. Measurement of Lp-PLA\(_2\) may be used along with traditional cardiovascular risk factor measures for identifying individuals at higher risk of cardiovascular disease events. Clinical management may include beginning or intensifying risk reduction strategies.

*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.*