CYSTATIN C

London Health Sciences Centre | St. Joseph's Health Care London

Pathology and Laboratory Medicine

Orderable - CYSC

Turnaround Time: 7 days

Laboratory:
Core Lab

Requisition:
GENERAL LABORATORY REQUISITION

Method of Analysis:
Particle-enhanced turbidimetric immunoassay (PETIA) for the quantitative determination of Cystatin C in human serum

Test Schedule:
As requested

Specimen:

Adult	Pediatric
5 mL Gold top Vacutainer tube or 4.5 mL Light Green (Lithium Heparin) top tube is also acceptable	0-2 years: 0.5 mL Red or Gold top Microtainer 2-10 years: 3 mL Red top Vacutainer tube

Collection Information:

Minimum volume of serum required is 1 mL for adult samples or 0.5 mL for pediatric samples.

Separate and refrigerated or freeze.

Reference Ranges:

0.61 - 0.95 mg/L
Glomerular Filtration Rate estimated from measured Cystatin C:
>90 mL/min

Interpretive Comments:

CYSC eGFR calculation (Filler G, Lepage N, 2003)
eGFR: < 15 mL/min/1.73 m2
Consistent with kidney failure

eGFR: 15-29 mL/min/1.73 m2
Consistent with severe chronic kidney disease

eGFR: 30-44 mL/min/1.73 m2
Moderate to severe decreased kidney function is consistent with chronic kidney disease if confirmed over 3 months

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eGFR: 45-59 mL/min/1.73 m2
Mild to moderate decreased kidney function is consistent with chronic kidney disease if confirmed over 3 months.

eGFR: 60-89 mL/min/1.73 m2
Consistent with mildly decreased kidney function, however, in the absence of other evidence of kidney disease, eGFR values in this range do not fulfill the KDIGO criteria for chronic kidney disease.
Interpret results in concert with ACR measurement.

eGFR: ≥ 90 mL/min/1.73 m2
Normal eGFR

Comments:

CYSC eGFR is calculated based on the equation published by Filler G and Lepage N, Pediatr Nephrol 18: 981-985, 2003

Storage and Shipment:

Store and send refrigerated or frozen.