

**IMMUNOGLOBULIN FREE LIGHT CHAINS, SERUM**  
**#200551**

**NOTE:** The testing and reporting is equivalent to Rochester test #84190, Immunoglobulin Free Light Chains, S

**PROFILE INFORMATION**

| <b>Unit Code</b> | <b>Reporting Name</b>      | <b>Available Separately</b> | <b>Always Performed</b> |
|------------------|----------------------------|-----------------------------|-------------------------|
| 200552           | Kappa Free Light Chain, S  | No                          | Yes                     |
| 200553           | Lambda Free Light Chain, S | No                          | Yes                     |
| 200554           | Kappa/Lambda FLC Ratio     | No                          | Yes                     |

**USEFUL FOR:** Monitoring patients with monoclonal light chain diseases but no M-spike on protein electrophoresis

**METHODOLOGY:** Nephelometry

**REFERENCE VALUES:**

**KAPPA-FREE LIGHT CHAIN**

0.33-1.94 mg/dL

**LAMBDA-FREE LIGHT CHAIN**

0.57-2.63 mg/dL

**KAPPA/LAMBDA FLC RATIO**

0.26-1.65

**SPECIMEN REQUIREMENTS:**

**Container/Tube:** Plain, red-top tube(s) or serum gel tube(s)

**Specimen Volume:** 1 mL of serum

**NOTE:** If urine is being submitted on the same patient for #87934 "Immunoglobulin Total Light Chains, Urine," order that test under a different order.

**CAUTIONS:**

- Elevated kappa and lambda FLC may occur due to polyclonal hypergammaglobulinemia or impaired renal clearance. A specific increase in FLC (eg, FLC K/L ratio) must be demonstrated for diagnostic purposes.
- Moderate to marked lipemia may interfere with the ability to perform testing.

**LIST FEE:** \$289.00

**CPT CODE:** 83883 X 2

**ANALYTIC TIME:** 1 day

**DAY(S) SET-UP:** Mon thru Fri; 3rd shift

**QUESTIONS:** Contact your Mayo Medical Laboratories' Regional Manager or Mary Erath, MML Laboratory Technologist Resource Coordinator  
Telephone: 800-533-1710