FREE T3, PLASMA /SERUM

Orderable – FT3

Turnaround Time: 4 hours

Alternate Name(s):

Free Triiodothyronine FT3



|**■** ×-

ÿ

Laboratory: Core Lab

Requisition:

REQUISITION

Roche

GENERAL LABORATORY

Method of Analysis:

Electrochemiluminescence

Specimen:

Adult	Pediatric
4.5 mL Light Green top	0-2 years: 0.5 mL Light Green top
Vacutainer tube	Microtainer
	2-10 years: 3 mL Light Green top
	Vacutainer tube
Red, Gold, or Lavender (EDTA) top tubes are also acceptable	

Collection Information:

Minimum volume of plasma or serum required is 700 μL for adult samples or 200 μL for pediatric samples.

Reference Ranges:

Age	Range
0 - 6 days:	2.7 - 9.7 pmol/L
6 days - 3 months:	3.0 - 9.3 pmol/L
3 - 12 months	3.3 - 9.0 pmol/L
1 - 6 years:	3.7 - 8.5 pmol/L
6 - 11 years:	3.9 - 8.0 pmol/L
11 - 20 years:	3.9 - 7.7 pmol/L
> 20 years:	3.1 - 6.8 pmol/L
Non-thyroidal illness:	1.3 - 6.3 pmol/L
First Trimester of	3.8 - 6.0 pmol/L
Pregnancy:	
Second Trimester of	3.2 - 5.5 pmol/L
Pregnancy:	
Third Trimester of	3.1 - 5.0 pmol/L
Pregnancy:	



Test Schedule: As required

Sciences C Pathology and La



Pathology and Laboratory Medicine

FREE T3, PLASMA /SERUM



Pathology and Laboratory Medicine

Comments:

TSH should be the initial test to screen for clinically-suspected hypothyroidism or hyperthyroidism. If TSH is below the lower cut-off, FT4 and FT3 testing will be performed reflexively by the laboratory. If TSH is between the lower and upper cut-offs, no FT4 or FT3 testing will be performed reflexively. If TSH is above the upper cut-off, FT4 testing will be performed reflexively by the laboratory. These cut-offs are the TSH reference intervals in children and the optimal cut-offs to predict abnormal FT4 levels in adults.

The TSH cut-offs are:

- 2 <6 years: <0.70 or >5.97 mIU/L
- 6 <11 years: <0.60 or >4.84 mIU/L
- 11 <18 years: <0.51 or >4.30 mIU/L

≥18 years: <0.58 or >6.30 mIU/L

FT3 and/or FT4 testing should only be ordered directly for patients:

- With known or suspected pituitary/hypothalamic disease
- Being treated for primary hyperthyroidism, severe hyperthyroidism (thyroid storm),
- or severe hypothyroidism (myxedema coma)
- With resistance to thyroid hormones
- Treated with lithium carbonate, an anticonvulsant, or amiodarone
- Who are pregnant
- Under 2 years of age

Furosemide may cause elevated free T3 results.