

# CYSTINE, LEUKOCYTE

## Orderable - LCYS

### Alternate Name(s):

Leukocyte Cystine  
Cystinosis

### Specimen:

2 x 6 mL Green (Sodium or Lithium Heparinized) top Vacutainer tubes

### Collection Information:

***Make arrangements with laboratory in advance.***

Send 8-10 mL whole blood **immediately**. Keep cold but not frozen.

### Reference Ranges:

≤ 0.200 nmol/mg protein

### Storage and Shipment:

Send specimen **immediately** to be received by Biochemical Genetics Laboratory no later than 3:00 pm of collection day.



**Laboratory:**  
Biochemical Genetics Lab



**Requisition:**  
[BIOCHEMICAL GENETICS  
LAB REQUISITION](#)



**Test Schedule:**  
Arrangements for test  
must be made in advance  
by calling 519-685-8500  
Specimen Receiving ext.  
71561