

CYSTATIN C

Orderable - CYSC

Turnaround Time: 7 days

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



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

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:

Cystatin C	0.61-0.95 mg/L
Estimated Glomerular Filtration Rate using measured Cystatin C (CYSC eGFR) for pediatric patients only	≥90 mL/min/1.73m ²

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



CYSTATIN C

Moderate to severe decreased kidney function is consistent with chronic kidney disease if confirmed over 3 months

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.