

Albumin

Synonyms

Clinical Indication

Plasma albumin concentration reflects hepatic synthetic function. Albumin depends on an adequate supply of amino acids for its synthesis, thus reflects nutritional and intestinal status. Low albumin levels (usually less than 25 g/L) may be associated with oedema. High concentrations are rare and usually iatrogenic.

Part of Profile / See Also

Liver Function Test and Bone profile.

Request Form

Combined Pathology manual blood form or ICE request

Availability / Frequency of Analysis

On request.

Turnaround Time

Same day

Patient Preparation

None

Sample Requirements

Specimen Type

Serum and plasma

Volume

2 ml

Container



Yellow top (SST) tube



Or Paediatric Green top (lithium-heparin)



Or Paediatric lithium heparin (orange top-Sarstedt tube)

Plain serum samples may also be used.

Reference Range & Units

Up to 12 months: 30 – 45 g/L

1 year to 16 years: 30 – 50 g/L

Adult: 35 - 50 g/L.

Reference: Pathology Harmony Group, Clinical Biochemistry Outcomes, January 2011
(www.pathologyharmony.co.uk)

Interferences

Stasis during venepuncture will falsely elevate results. Ideally, blood should ideally be drawn from a vein in which the blood is free flowing (that is, without a tourniquet).

Interpretation & Clinical

Decision Value (if applicable)

Critical Difference 12%

References

Test code

L (part of liver function test) and BONE (part of bone profile).

Lab Handling

Processing: Analysed from primary tube and stored at 4°C.

Serum and Plasma stable at 2-8°C 30 days.

Serum and Plasma stable at 15-25°C 7 days.