


Carcinoembryonic antigen (CEA)

Please note that for monitoring purposes results from Pathology First may differ from other laboratories due to methodological differences.

Synonyms	CEA
Clinical Indication	CEA has limited value in primary diagnosis of malignancy since it has poor specificity and low sensitivity for early stage G.I. carcinoma. CEA may be elevated in almost any advanced adenocarcinoma where distant metastases are present and is almost never elevated in early malignancy. Regular levels may have a role in the detection of recurrent disease or in monitoring tumour therapy in colorectal, gastric, breast, bronchial and some ovarian carcinomas.
Part of Profile / See Also	N/A
Request Form	Combined Pathology manual Blood form or ICE request
Availability / Frequency of Analysis	On request
Turnaround Time	Monday to Friday 1 day
Patient Preparation	Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration.
Sample Requirements	
Specimen Type	Serum
Volume	7 ml
Container	 Yellow top (SST) tube
Reference Range & Units	Less than 3 ug/L
Interferences	None.
Interpretation & Clinical Decision Value (if applicable)	Modest elevations may be found in normal pregnancy, in smokers (up to approx. 7 ug/L), in certain inflammatory bowel disorders including ulcerative colitis and Crohn's disease, in pancreatitis, gastric ulceration and alcoholic infections. CEA can be elevated in almost any advanced adenocarcinoma where distant metastases are present and is almost never elevated in early malignancy. Half-life in Serum: Approx. 4.5 days but can vary from 1 to 5 days
References	Roche kit insert

Test code

CEA

Lab Handling

Analysed from primary tube and stored at 4°C. Stable for 7 days at 2-8 °C.