Lab Dept:	Chemistry
Test Name:	ANGIOTENSIN CONVERTING ENZYME
General Information	
Lab Order Codes:	ANGI
Synonyms:	ACE; Kinase II; Peptidylpeptide Hydrolase; Sacoidosis; SACE
CPT Codes:	82164 – Angiotensin I - converting enzyme (ACE)
Test Includes:	Angiotensin converting enzyme concentration reported in U/L.
Logistics	
Test Indications:	An evaluation of patients with suspected sarcoidosis. An elevation in the level of serum angiotensin converting enzyme (ACE), along with radiographic evidence of infiltrates and/or adenopathy and organ biopsies showing non-caseating epithelial granulomas, is suggestive of a diagnosis of sarcoidosis. ACE can also be dramatically elevated in Gaucher's disease and some other processes.
Lab Testing Sections:	Chemistry - Sendouts
Referred to:	Mayo Medical Laboratories (MML Test: ACE)
Phone Numbers:	MIN Lab: 612-813-6280
	STP Lab: 651-220-6550
Test Availability:	Daily, 24 hours
Turnaround Time:	1 - 3 days; test set up Monday - Saturday
Special Instructions:	The use of angiotensin converting enzyme (ACE)-inhibiting antihypertensive drugs will cause decreased ACE values.
Specimen	
Specimen Type:	Blood
Container:	SST (Gold, marble or red) tube
Draw Volume:	3 mL (Minimum: 1.5 mL) blood
Processed Volume:	1 mL (Minimum: 0.5 mL) serum

Collection:	Routine venipuncture
Special Processing:	Lab Staff: Centrifuge specimen, remove serum aliquot into a screw- capped round bottom plastic vial. Store and ship at refrigerated temperatures. Forward promptly.
Patient Preparation:	None
Sample Rejection:	Specimens other than serum; mislabeled or unlabeled specimens; gross hemolysis; gross lipemia; grossly icteric
Interpretive	
Reference Range:	>or = 18 yrs: 8 – 53 U/L
	Note: The reference interval for pediatric patients may be as much as 50% higher than specimens from adults.
Critical Values:	N/A
Limitations:	Spinal fluid ACE activity to aid the diagnosis of neurosarcoidosis has been reported, however, there is insufficient evidence to support ACE being used for this purpose.
	Serum ACE is significantly reduced in patients on ACE inhibitors (eg, Vasotec and captopril)
	The reference interval for children and adolescents may be as much as 50% higher than specimens from adults.
Methodology:	Spectrophotometry (SP)
References:	Mayo Medical Laboratories Web Page November 2017
Updates:	5/4/2009: Reference range revision at MML, previously reported as 7.0 - 46.0 U/L. 1/4/2012: Specimen shipping and storage changed from frozen to refrigerated. Volume requirements updated. 11/9/2017: Collection container update