Calprotectin is a neutrophilic marker specific for inflammation in the gastrointestinal tract. It is elevated with infection, post-infectious IBS, and NSAID enteropathy. Fecal calprotectin can be used to differentiate IBD vs. IBS, to monitor treatment in IBD, and to determine which patients should be referred for endoscopy and/or colonoscopy. Levels between 50-120 should be repeated at 4-6 weeks and confirmed.

If the patient's result is less than the functional sensitivity (FS) of the assay, then the FS is used for calculation purposes.

Commentary is provided to the practitioner for educational purposes, and should not be interpreted as diagnostic or treatment recommendations. Diagnosis and treatment decisions are the responsibility of the practitioner.