

**Reporting Title:** von Willebrand Disease Tech Interp  
**Performing Location:** Rochester

**Specimen Requirements:**  
Only orderable as part of a profile. For more information see AVWPR / von Willebrand Disease Profile, Plasma.

Specimen Type	Temperature	Time	Special Container
Plasma Na Cit	Frozen	14 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
AVWPI	von Willebrand Disease Tech Interp	Alphanumeric		48595-3

LOINC® and CPT codes are provided by the performing laboratory.

**Supplemental Report:**  
No

**CPT Code Information:**  
85390

**Reference Values:**  
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An interpretive report will be provided.