

Reporting Title: ADAMTS13 Activity and Inhibitor Profile
Performing Location: Rochester

Shipping Instructions:
Send both vials in the same shipping container.

Specimen Requirements:
Patient Preparation: Fasting preferred
Collection Container/Tube: Light-blue top (3.2% sodium citrate)
Submission Container/Tube: Plastic vials
Specimen Volume: 2 mL in 2 plastic vials each containing 1 mL
Collection Instructions:

- Specimen must be collected prior to replacement therapy.
- For complete instructions, see [Coagulation Guidelines for Specimen Handling and Processing](#)
- Centrifuge, transfer all plasma into a plastic vial, and centrifuge plasma again.
- Aliquot plasma (1 mL per aliquot) into 2 separate plastic vials, leaving 0.25 mL in the bottom of centrifuged vial.
- Freeze plasma immediately (no longer than 4 hours after collection) at -20 degrees C or, ideally, below -40 degrees C.

Additional Information:

- Double-centrifuged specimen is critical for accurate results as platelet contamination may cause spurious results.
- If priority specimen, mark request form, give reason, and request a call-back.
- Each coagulation assay requested should have its own vial.

Forms:

- [Coagulation Patient Information](#) (T675)
- If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:
[-Coagulation Test Request](#) (T753)
[-Renal Diagnostics Test Request](#) (T830)

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

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
61211	ADAMTS13 Activity Assay	Numeric	%	53622-7
34586	ADAMTS13 Interpretation	Alphanumeric		69049-5

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

Supplemental Report:
No

Components:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
ADMTX	ADAMTS13 Activity Assay	1	85397	Yes	No
ADMIN	ADAMTS13 Interpretation			Yes	No

CPT Code Information:

85397
85335 (if appropriate)
85335 (if appropriate)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
ADMIS	ADAMTS13 Inhibitor Screen	1	85335	No	No
ADMBU	ADAMTS13 Inhibitor Bethesda Titer	1	85335	No	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
ADMBU	61214	ADAMTS13 Inhibitor Bethesda Titer	Numeric		40824-5
ADMIS	61213	ADAMTS13 Inhibitor Screen	Alphanumeric		34590-0

Reference Values:

ADAMTS13 ACTIVITY ASSAY
> or =70%

ADAMTS13 INHIBITOR SCREEN
Negative

ADAMTS13 BETHESDA TITER
<0.4 BU