

Reporting Title: Platelet Ab Screen, S
Performing Location: Rochester

Ordering Guidance:

For neonate testing, consider sending a maternal specimen instead of a neonate specimen as unbound platelet antibodies may not be detected in the neonate serum.

This test is not recommended for the diagnosis of immune thrombocytopenia or autoimmune thrombocytopenia. Tests that are optimized to detect antibodies bound to the platelets will be useful in these situations; cell-bound platelet antibody (direct) test is strongly recommended.

Necessary Information:

If ordering electronically, answer all prompt questions for timely result reporting:

1. Reason for request is required for result interpretation.
 - a. Use provided diagnosis options if appropriate. If specific diagnosis is unknown, select the generic answer of alloimmune thrombocytopenia.
 - b. Record only the diagnosis pertaining to this test.
 - c. Record diagnosis description instead of code.
2. Indicate if patient has had intravenous immunoglobulin (IVIg) therapy in the last month: Yes or No

Specimen Requirements:

Patient Preparation: Do not collect within 72 hours of a platelet transfusion. Transfused platelets will interfere with this assay.

Collection Container/Tube: Red top

Submission Container/Tube: Plastic vial

Specimen Volume: 1.5 mL

Collection Instructions: Centrifuge and aliquot serum into a plastic vial.

Specimen Minimum Volume:

0.5 mL

Forms:

Platelet Antibody Screen, Serum Patient Information

Specimen Type	Temperature	Time	Special Container
Serum Red	Frozen (preferred)	365 days	
	Refrigerated	48 hours	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
PLABN	PTL15	Reason for request?: <ul style="list-style-type: none"> • PTR, Refractory to Platelet Transfusion • NAIT, Neonatal Immune Thrombocytopenia • PTP, Post-Transfusion Purpura • Alloimmune Thrombocytopenia • ITP, Order CellBound PLT Ab instead • Secondday ITP, order Cell Bound instead 	Answer List	Yes
PLABN	PTL16	IVIg in last month?: <ul style="list-style-type: none"> • Yes • No 	Answer List	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
PTL01	Overall Result	Alphanumeric		24375-8
PTL02	Interpretation	Alphanumeric		59466-3
PTL03	GPIIb/IIIa (Cell-1)	Alphanumeric		48505-2
PTL04	GPIIb/IIIa (Cell-2)	Alphanumeric		48505-2
PTL05	GPIa/IIa (Cell-1)	Alphanumeric		47084-9
PTL06	GPIa/IIa (Cell-2)	Alphanumeric		47084-9
PTL07	GPIb/IX	Alphanumeric		48506-0
PTL08	GPIV	Alphanumeric		87757-1
PTL09	HLA Class I	Alphanumeric		95269-7
PTL15	Reason for request?	Alphanumeric		29548-5
PTL16	IVIg in last month?	Alphanumeric		95268-9

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86022



Reference Values:

Not applicable