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**Reporting Title:** Prolonged Clot Time Prof**Performing Location:** Rochester**Ordering Guidance:**

Multiple coagulation profile tests are available. See Coagulation Profile Comparison for testing that is performed with each profile.

**Shipping Instructions:**

Send the 5 aliquots in the same shipping container.

**Necessary Information:**

Note if patient is currently receiving heparin, Coumadin (warfarin) or any medication affecting coagulation.

**Specimen Requirements:**

Specimen Type: Platelet-poor plasma

Patient Preparation:

1. Patient should not be receiving anticoagulant treatment (eg, warfarin, heparin). Treatment with heparin causes false-positive results of in vitro coagulation testing for lupus anticoagulant. Coumadin (warfarin) treatment may impair ability to detect the more subtle varieties of lupus-like anticoagulants.
2. Patient should also not be receiving fibrinolytic agents (streptokinase, urokinase, tissue plasminogen activator [tPA]).
3. It is best to perform this study pretransfusion if possible. If patient has been recently transfused, wait at least 48 hours after transfusion to collect the specimen.

Collection Container/Tube: Light-blue top (3.2% sodium citrate)

Submission Container/Tube: Plastic vial

Specimen Volume: 5 mL in 5 plastic vials, each containing 1 mL

Collection Instructions:

1. Specimen must be collected prior to factor replacement therapy.
2. For complete instructions, see Coagulation Guidelines for Specimen Handling and Processing.
3. Centrifuge, transfer all plasma into a plastic vial, and centrifuge plasma again.
4. Aliquot plasma (1-2 mL per aliquot) into 5 separate plastic vials leaving 0.25 mL in the bottom of centrifuged vial.
5. Freeze plasma immediately (no longer than 4 hours after collection) at -20 degrees C or, ideally, -40 degrees C or below.

Additional Information:

1. Double-centrifuged specimen is critical for accurate results as platelet contamination may cause spurious results.
2. Each coagulation assay requested should have its own vial.

**Specimen Minimum Volume:**

4 plastic vials, each containing 1 mL

**Forms:**

1. Coagulation Patient Information (T675)
2. If not ordering electronically, complete, print, and send a Coagulation Test Request (T753) with the specimen.

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

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
603324	Reviewed by	Alphanumeric		18771-6
603183	Prolonged Clot Time Prof Interp	Alphanumeric		69049-5
PTSEC	Prothrombin Time (PT), P <b>Also used by tests: PTSC</b>	Numeric	sec	5902-2
INRSC	INR <b>Also used by tests: PTSC</b>	Numeric		6301-6
APTSC	Activated Partial Thrombopl Time, P <b>Also used by tests: APTSC</b>	Numeric	sec	14979-9
RVR1	DRVVT Screen Ratio <b>Also used by tests: DRV1</b>	Numeric	ratio	15359-3
TTSC	Thrombin Time (Bovine), P <b>Also used by tests: TTSC</b>	Numeric	sec	46717-5
CLFIB	Fibrinogen, Clauss, P <b>Also used by tests: CLFIB</b>	Numeric	mg/dL	48664-7
DIMER	D-Dimer, P <b>Also used by tests: DIMER</b>	Numeric	ng/mL FEU	48067-3

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**Components:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
APRI	Prolonged Clot Time Prof Interp			Yes	No
PTSC	Prothrombin Time (PT), P			Yes	Yes (order PTTP)
APTSC	Activated Partial Thrombopl Time, P			Yes	Yes (order APTTP)
DRV1	Dilute Russells Viper Venom Time, P			Yes	Yes (order DRV11)
TTSC	Thrombin Time (Bovine), P			Yes	Yes
CLFIB	Fibrinogen, Clauss, P			Yes	Yes (order FIBTP)
DIMER	D-Dimer, P			Yes	Yes (order DDITT)

**CPT Code Information:**

85379-DIMER  
 85384-CLFIB  
 85390-26-APRI  
 85610-PTSC  
 85613-DRV1  
 85670-TTSC  
 85730-APTSC  
 85130-Chromogenic FVIII (if appropriate)  
 85130-Chromogenic FIX (if appropriate)  
 85210-Factor II (if appropriate)  
 85220-Factor V (if appropriate)  
 85230-Factor VII (if appropriate)  
 85240-Factor VIII (if appropriate)  
 85250-Factor IX (if appropriate)  
 85260-Factor X (if appropriate)  
 85270-Factor XI (if appropriate)  
 85280-Factor XII (if appropriate)  
 85335-Bethesda titer (if appropriate)  
 85335-Factor V inhibitor screen (if appropriate)  
 85335-Factor VIII inhibitor screen (if appropriate)  
 85335-Factor IX inhibitor screen (if appropriate)  
 85366-Soluble fibrin monomer (if appropriate)  
 85385-PT-Fibrinogen (if appropriate)  
 85597-Platelet neutralization for lupus inhibitor (if appropriate)  
 85598-Hex LA (if appropriate)  
 85611-PT mix 1:1 (if appropriate)  
 85613-DRVVT mix (if appropriate)

85613-DRVVT confirm (if appropriate)  
85635-Reptilase time (if appropriate)  
85732-APTT mix 1:1 (if appropriate)

**Reflex Tests:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
GBETH	General Factor Bethesda Units, P			No	No
5BETH	FV Bethesda Units, P			No	No
8BETH	FVIII Bethesda Units, P			No	No
9BETH	FIX Bethesda Units, P			No	No
F8IS	Coag Factor VIII Assay Inhib Scrn,P			No	No
FACTV	Coag Factor V Assay, P			No	Yes
F_7	Coag Factor VII Assay, P			No	Yes
F_9	Coag Factor IX Assay, P			No	Yes
F_10	Coag Factor X Assay, P			No	Yes
F_11	Coag Factor XI Assay, P			No	Yes
F_12	Coag Factor XII Assay, P			No	Yes
F8A	Coag Factor VIII Activity Assay, P			No	Yes
RTSC	Reptilase Time, P			No	Yes
F_2	Coag Factor II Assay, P			No	Yes
PNP	Platelet Neutralization Procedure			No	No
PTMSC	PT Mix 1:1			No	No
APMSC	APTT Mix 1:1			No	No
DRV2	DRVVT Mix			No	No
DRV3	DRVVT Confirmation			No	No
F5_IS	Factor V Inhib Scrn			No	No
F9_IS	Factor IX Inhib Scrn			No	No
F2_IS	Factor II Inhib Scrn			No	No
F7_IS	Factor VII Inhib Scrn			No	No
10_IS	Factor X Inhib Scrn			No	No
11_IS	Factor XI Inhib Scrn			No	No

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
PTFIB	PT-Fibrinogen, P			No	No
SOLFM	Soluble Fibrin Monomer			No	No
CH9	Chromogenic FIX, P			No	Yes
CHF8	Chromogenic FVIII, P			No	Yes
HEXLA	HEX LA, P			No	No

**Result Codes for Reflex Tests:**

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
DRV2	RVMR2	DRVVT Mix Ratio	Numeric	ratio	75512-4
DRV3	RVCR3	DRVVT Confirm Ratio	Numeric	ratio	50410-0
GBETH	607434	General Factor Bethesda Units, P	Numeric	BU	13591-3
5BETH	607433	FV Bethesda Units, P	Numeric	BU	3191-4
8BETH	607431	FVIII Bethesda Units, P	Numeric	BU	3204-5
9BETH	607432	FIX Bethesda Units, P	Numeric	BU	3185-6
F8IS	7289	Coag Factor VIII Assay Inhib Scrn,P	Alphanumeric		3206-0
FACTV	FACTV	Coag Factor V Assay, P	Numeric	%	3193-0
F_7	F_7	Coag Factor VII Assay, P	Numeric	%	3198-9
F_9	F_9	Coag Factor IX Assay, P	Numeric	%	3187-2
F_10	F_10	Coag Factor X Assay, P	Numeric	%	3218-5
F_11	F_11	Coag Factor XI Assay, P	Numeric	%	3226-8
F_12	F_12	Coag Factor XII Assay, P	Numeric	%	3232-6
F8A	F8A	Coag Factor VIII Activity Assay, P	Numeric	%	3209-4
RTSC	RTSC	Reptilase Time, P	Numeric	sec	6683-7
F_2	F_2	Coag Factor II Assay, P	Numeric	%	3289-6
PNP	PNPPL	Platelet Neutralization Procedure	Numeric	sec	75506-6
PNP	PNPSA	PNP Buffer Control	Numeric	sec	103619-3
PTMSC	PTMSC	PT Mix 1:1	Numeric	sec	5959-2
APMSC	APMSC	APTT Mix 1:1	Numeric	sec	5946-9
F5_IS	7808	Factor V Inhib Scrn	Alphanumeric		81124-0

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
F9_IS	7802	Factor IX Inhib Scrn	Alphanumeric		30086-3
F2_IS	7806	Factor II Inhib Scrn	Alphanumeric		96454-4
F7_IS	7810	Factor VII Inhib Scrn	Alphanumeric		81123-2
10_IS	7812	Factor X Inhib Scrn	Alphanumeric		39556-6
11_IS	7804	Factor XI Inhib Scrn	Alphanumeric		80603-4
PTFIB	PTFIB	PT-Fibrinogen, P	Numeric	mg/dL	3255-7
SOLFM	SOLFM	Soluble Fibrin Monomer	Numeric	mcg/mL	93748-2
CH9	CH9	Chromogenic FIX, P	Numeric	%	88449-4
CHF8	CHF8	Chromogenic FVIII, P	Numeric	%	49865-9
HEXLA	HXDLT	HEX LA Delta	Numeric	sec	96267-0

**Reference Values:**

An interpretive report will be provided.