



Reporting Title: APCRV, w/Reflex, P

Performing Location: Rochester

Specimen Requirements:

Blood and plasma are required.

Patient Preparation: Fasting preferred

Specimen Type: Whole blood

Container/Tube:

Preferred: Lavender top (EDTA)

Acceptable: Yellow top (ACD) or light-blue top (3.2% sodium citrate)

Specimen Volume: 3 mL

Collection Instructions:

1. Invert several times to mix blood.
2. Send whole blood specimen in original tube. Do not aliquot.

Specimen Type: Platelet-poor plasma

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

Submission Container/Tube: Plastic vial, polypropylene preferred

Specimen Volume: 1 mL

Collection Instructions:

1. For complete instructions, see Coagulation Guidelines for Specimen Handling and Processing.
2. Within 4 hours of collection, centrifuge, transfer all plasma into a plastic vial, and centrifuge plasma again.
3. Aliquot plasma into separate plastic vial leaving 0.25 mL in the bottom of centrifuged vial.
4. Freeze plasma aliquot immediately at -20 degrees C, or ideally, at -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:

Plasma: 0.5 mL; Whole blood: 3 mL

Forms:

1. New York Clients-Informed consent is required. Document on the request form or electronic order that a copy is on file. The following documents are available:
 - Informed Consent for Genetic Testing (T576)
 - Informed Consent for Genetic Testing-Spanish (T826)
2. Coagulation Patient Information (T675)
3. 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	
Whole blood	Ambient (preferred)	14 days	
	Frozen	14 days	
	Refrigerated	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
APCR	APCRV Ratio Also used by tests: APCRV	Numeric		13590-5
INT55	Interpretation Also used by tests: APCRV	Alphanumeric		48591-2
SC018	Whole Blood	Alphanumeric		No LOINC Needed

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
APCRV	Activated Protein Resistance V, P			Yes	Yes
SC018	Whole Blood			Yes	No

CPT Code Information:

85307

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
F5DNA	Factor V Leiden (R506Q) Mutation, B			No	Yes
F5DNI	APCRV/F5DNA Summary Interpretation			No	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
F5DNA	21838	Factor V Leiden (R506Q) Mutation, B	Alphanumeric		21668-9
F5DNA	21839	F5DNA Interpretation	Alphanumeric		69049-5
F5DNA	21841	F5DNA Reviewed By	Alphanumeric		18771-6
F5DNI	38238	APCRV/F5DNA Summary Interpretation	Alphanumeric		48591-2
F5DNI	44181	Interpretation	Alphanumeric		69049-5

Reference Values:**ACTIVATED PROTEIN C RESISTANCE V RATIO**

> or =2.3

Pediatric reference range has neither been established nor is available in scientific literature. The adult reference range likely would be applicable to children older than 6 months.