
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:

1. Specimen must be collected prior to 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 mL per aliquot) into 2 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, below -40 degrees C.

Additional Information:

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

Specimen Minimum Volume:

2 mL

Forms:

1. Coagulation Patient Information (T675)

2. 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	Orderable Separately
ADMFX	ADAMTS13 Activity Assay			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	Orderable Separately
ADMIS	ADAMTS13 Inhibitor Screen			No	No
ADMBU	ADAMTS13 Inhibitor Bethesda Titer			No	No

Result Codes for Reflex Tests:

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

Reference Values:

ADAMTS13 ACTIVITY ASSAY
> or =70%

ADAMTS13 INHIBITOR SCREEN
Negative

ADAMTS13 BETHESDA TITER
<0.4 BU