

Client: Example Client ABC123
 123 Test Drive
 Salt Lake City, UT 84108
 UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB: 01/01/1990
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 01/01/2017 12:34

Heparin-Induced Thrombocytopenia (HIT) PF4 Antibody, IgG with Reflex to Serotonin Release Assay (Heparin Dependent Platelet Antibody), Unfractionated Heparin

ARUP test code 2012181

Hep-Ind Thrombocytopenia PF4 Ab, IgG **0.400 OD H** (Ref Interval: <=0.399)

Serotonin Release Assay (Heparin Dependent Platelet Antibody), Unfractionated Heparin to follow.

Interpretive Data: Hep-Ind Thrombocytopenia PF4 Ab, IgG

This ELISA assay detects the presence of IgG antibodies to heparin-platelet factor 4 (PF4) complexes. Most cases of heparin-induced thrombocytopenia (HIT) are caused by IgG antibodies to heparin-PF4, rather than IgA or IgM antibodies. Negative results have a good negative predictive value for HIT, although rare false-negative results may occur. Positive ELISA results are sensitive but not completely specific for HIT. HIT is a clinicopathologic diagnosis. Clinical findings and the results of other laboratory tests must be taken into consideration. Higher optical density (OD) values in the IgG ELISA test correlate with a higher likelihood of positivity in platelet activation assays, such as the serotonin release assay (SRA), and an increased likelihood of clinical HIT.

A clinical scoring system to assess pretest probability of HIT along with other guidance for diagnosis is available in ARUP Consult: <http://www.arupconsult.com/Topics/HIT.html>.

Serotonin Release Assay (Heparin Dependent Platelet Antibody), Unfractionated Heparin

ARUP test code 2005631

SRA, Unfractionated Heparin, Low Dose	0 %	
SRA, Unfractionated Heparin, High Dose	0 %	
SRA, Unfractionated Heparin	Negative	(Ref Interval: Negative)
SRA, Unfractionated Heparin, Interp.	See Note	

H - high L - low * - abnormal C - critical

This patients specimen demonstrates a negative result in the serotonin release assay. A diagnosis of heparin-induced thrombocytopenia (HIT) is unlikely, but not completely excluded.

A positive result would demonstrate > or = 20% serotonin release from reagent platelets in the presence of patient specimen and low-dose heparin (0.1 U/mL) and <20% serotonin release from reagent platelets (inhibition of the reaction) in the presence of patient specimen and high-dose heparin (100 U/mL). Additional information regarding diagnosis of HIT is available at arupconsult.com.

INTERPRETIVE INFORMATION: SRA, Unfractionated Heparin

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Hep-Ind Thrombocytopenia PF4 Ab, IgG	15-299-111968	10/26/2015 2:38:00 PM	10/26/2015 2:38:55 PM	10/26/2015 3:33:44 PM
SRA, Unfractionated Heparin, Low Dose	15-299-111968	10/26/2015 2:38:00 PM	10/26/2015 3:33:49 PM	10/27/2015 7:41:25 AM
SRA, Unfractionated Heparin, High Dose	15-299-111968	10/26/2015 2:38:00 PM	10/26/2015 3:33:49 PM	10/27/2015 7:41:25 AM
SRA, Unfractionated Heparin	15-299-111968	10/26/2015 2:38:00 PM	10/26/2015 3:33:49 PM	10/27/2015 7:41:25 AM
SRA, Unfractionated Heparin, Interp.	15-299-111968	10/26/2015 2:38:00 PM	10/26/2015 3:33:49 PM	10/27/2015 7:41:25 AM

END OF CHART

H – high L – low * – abnormal C – critical