

Client: Discern Test Client

**100 TEST** 

New York, TX 10101 UNITED STATES

Physician: TEST, TEST

Patient: ARUPTEST, LUPUS 1

**DOB** 1/1/1951 **Sex:** Female

**Patient Identifiers:** 635923 **Visit Number (FIN):** 661196

**Collection Date:** 12/4/2023 14:22

## **Lupus Anticoagulant Reflex Panel**

ARUP test code 3017009

Prothrombin Time (PT)	11.0 s L	(Ref Interval: 12.0-15.5)	
PTT-LA Ratio	1.20	(Ref Interval: <=1.20)	
dRVVT Screen Ratio	1.20	(Ref Interval: <=1.20)	
Anti-Xa Qualitative Interpretation	Not Performed	(Ref Interval: Not Present)	
Thrombin Time (TT)	Not Performed s	(Ref Interval: <=19.5)	
Anticoagulant Medication Neutralization	Not Performed	(Ref Interval: Not Performed)	
Neutralized PTT-LA Ratio	Not Performed	(Ref Interval: <=1.20)	
Neutralized dRVVT Screen Ratio	Not Performed	(Ref Interval: <=1.20)	
dRVVT 1:1 Mix Ratio	Not Performed	(Ref Interval: <=1.20)	
dRVVT Confirmation Ratio	Not Performed	(Ref Interval: <=1.20)	
Hexagonal Phospholipid Confirmation	Not Performed s	(Ref Interval: <=7.9)	

Lupus Anticoagulant, Interpretation

See Note

Lupus anticoagulant not detected.

This panel did not detect evidence for heparin, direct thrombin inhibitors, or direct Xa inhibitors and drug neutralization was not performed.

Lupus anticoagulant antibodies are heterogeneous and antibody titers fluctuate over time. Laboratory tests used to identify lupus anticoagulant demonstrate variable sensitivity. Testing is best performed when the patient is not acutely ill and not anticoagulated. If there is strong clinical suspicion for antiphospholipid antibody syndrome (APS), consider testing for cardiolipin and beta-2 glycoprotein 1 antibodies (IgG and IgM) if this testing has not already been performed.

INTERPRETIVE INFORMATION: Lupus Anticoagulant Reflex Panel

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or

H=High, L=Low, \*=Abnormal, C=Critical



approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

VERIFIED/REPORTED DATES					
Procedure	Accession	Collected	Received	Verified/Reported	
Prothrombin Time (PT)	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 8:59:00 AM	
PTT-LA Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 8:59:00 AM	
dRVVT Screen Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 8:59:00 AM	
Anti-Xa Qualitative Interpretation	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
Thrombin Time (TT)	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
Anticoagulant Medication Neutralization	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
Neutralized PTT-LA Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
Neutralized dRVVT Screen Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
dRVVT 1:1 Mix Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
RVVT Confirmation Ratio	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
Hexagonal Phospholipid Confirmation	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	
_upus Anticoagulant, Interpretation	23-338-116965	12/4/2023 2:22:00 PM	12/4/2023 2:29:21 PM	12/5/2023 9:00:00 AM	

**END OF CHART** 

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Patient: ARUPTEST, LUPUS 1 ARUP Accession: 23-338-116965 Patient Identifiers: 635923 Visit Number (FIN): 661196 Page 2 of 2 | Printed: 12/8/2023 1:40:29 PM