

TEST CHANGE

Phosphatidylserine and Prothrombin Antibody, IgG

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2009447, APS/PT G	
Specimen Requirements:	
Patient Preparation:	
Collect:	Serum separator tube <u>(SST) OR lt. blue</u> . Also acceptable: Blue (sodium citrate <u>)</u> .
Specimen Preparation:	Separate serum from cells ASAP or within 2 hours of collection. Transfer 0.5 mL serum (<u>Min: 0.3 mL</u>) OR 0.5 mL citrate or plasma (<u>Min: 0.3 mL</u>) to an ARUP <u>standard transport</u> <u>tube.Standard Transport Tube. (Min: 0.15 mL</u>)
Transport Temperature:	Refrigerated. Also acceptable: Frozen.
Unacceptable Conditions:	Other body fluids. Contaminated, <u>heat-inactivated, clots, fibrin,</u> gross red blood cells, severely lipemic, severely hemolyzed, grossly icteric, or severely lictpermic specimens.
Remarks:	
Stability:	After separation from cells: Ambient: 48 hours; Refrigerated: 2 weeks; Frozen: 1 year (avoid repeated freeze/thaw cycles)
Methodology:	Semi-Quantitative Enzyme-Linked Immunosorbent Assay <u>(ELISA)</u>
Performed:	Thu
Reported:	1-8 days
Note:	
CPT Codes:	83516
New York DOH Approval Status:	This test is New York DOH approved.
Interpretive Data:	
Elevated and persistent aPS/PT IgG antibody (with or without lupus anticoagulant activity) may serve as a risk marker of thrombotic events in patients with certain autoimmune diseases,	

including antiphospholipid syndrome (APS) and systemic lupus erythematosus (SLE).

Reference Interval:

0-30 Units

