Lab Dept: Coagulation

Test Name: LUPUS ANTICOAGULANT PROFILE

General Information

Lab Order Codes: ALUPP

Synonyms: Lupus inhibitor testing; Lupus anticoag reflex panel

CPT Codes: See end of document for list of primary and reflex test CPT codes

Test Includes: Initial testing includes prothrombin time (PT), activated partial thromboplastin time (aPTT), and dilute Russell's viper venom time (dRVVT). Lupus Anticoagulant Profile Testing Algorithm

If the PT, aPTT, and dRVVT are normal, a computer-generated interpretive comment indicating no evidence of a lupus anticoagulant (LA) will be provided.

If PT is greater than 13.9 seconds, PT mix will be performed at an additional charge.

If aPTT is greater than or equal to 38 seconds, aPTT mix will be performed at an additional charge.

If PT, aPTT, or dRVVT are prolonged, thrombin time (TT) will be performed at an additional charge.

If aPTT mix is greater than or equal to 38 seconds and thrombin time is less than 35.0 seconds (no evidence of heparin), platelet neutralization procedure will be performed at an additional charge.

If dRVVT ratio is greater than or equal to 1.20, dRVVT mix and dRVVT confirmation will be performed at an additional charge.

If TT is greater than or equal to 25.0 seconds, reptilase will be performed at an additional charge.

If appropriate, coagulation factor assays, fibrinogen, D-dimer, hexagonal LA, and soluble fibrin monomer will be performed, at an additional charge, to clarify a significant abnormality in the screen test results.

If the factor VIII, IX or V result is below the normal range, the factor inhibitor screen may be performed along with the Bethesda titering assay, if indicated, at an additional charge.

If any test results are abnormal, all results will be reviewed by a coagulation consultant and a lupus anticoagulant interpretation will be provided.

Logistics

Test indications:	Confirming or excluding the presence of lupus anticoagulant (LA), distinguishing LA from specific coagulation factor inhibitors and nonspecific inhibitors Investigating a prolonged activated thromboplastin time, especially when combined with other coagulation studies This test is not useful for the detection of antiphospholipid antibodies that do not affect coagulation tests.
Lab Testing Sections:	Coagulation - Sendouts
Referred to:	Mayo Clinic Laboratories (MML Test Code: ALUPP)
Phone Numbers:	MIN Lab: 612-813-6280 STP Lab: 651-220-6550
Test Availability:	Daily
Turnaround Time:	3-5 days
Special Instructions:	Critical frozen within 4 hours of collection

Specimen

Specimen Type:	Blood
Container:	Light Blue (Buffered Na Citrate 3.2%) top tubes
Draw Volume:	Optimal: Four x 3 mL tubes, filled to the line to each contain 2.7 mL blood Minimum: Three x 2 mL tubes, filled to the line to each contain 1.8 mL blood
Processed Volume:	4 aliquots with 1 mL each (minimum 3 aliquots with 1 mL each)
Collection:	• A clean venipuncture is essential, avoid foaming. ● Capillary collection is unacceptable. ● Patient's with a hematocrit level >55% must have a special tube made to adjust for the hematocrit; contact lab for a special tube. ● Mix thoroughly by gentle inversion. Deliver immediately to the laboratory at room temperature via courier or pneumatic tube. Off campus collections: ● Must be processed and frozen within 4 hours. ● Do not refrigerate. *Validation of your lab's centrifuge for platelet poor plasma is required.

Special Processing:	Lab staff: Centrifuge, transfer all plasma into a plastic vial, and centrifuge plasma again. Aliquot plasma (1-2 mL per aliquot) into 4 separate plastic vials (minimum 1 mL each in 3 vials), leaving 0.25 mL in the bottom of centrifuged vial. **Freeze plasma immediately (no longer than 4 hours after collection)** at -20 degrees C or, ideally, -40 degrees C or below. Additional Information: Double-centrifuged specimen is critical for accurate results as platelet contamination may cause spurious results. Specimen stable frozen for 14 days.
Patient Preparation:	1. Patient should not be receiving anticoagulant treatment (eg, warfarin, heparin). Treatment with heparin causes false-positive results of in vitro coagulation testing for lupus anticoagulant. Coumadin (warfarin) treatment may impair ability to detect the more subtle varieties of lupus-like anticoagulants. 2. Patient should also not be receiving fibrinolytic agents (streptokinase, urokinase, tissue plasminogen activator: tPA). 3. If patient has been recently transfused, it is best to perform this study pretransfusion, if possible.
Sample Rejection:	Gross hemolysis, lipemia or icterus; unlabeled or mislabeled specimens; specimens incorrectly processed.

Interpretive

Reference Range:	An interpretive report will be provided
Critical Values:	Activated Partial Thromboplastin Time, Plasma ≥ 150 sec Fibrinogen ≤ 60 mg/dL INR (International Normalizing Ratio) ≥ 5.0
Limitations:	n/a
Methodology:	PTSC, APTSC, DRV1: Optical Clot-Based
References:	Mayo Clinic Laboratories February 2025

CPT CODES

85610

85730

85613

85390

85130 (if appropriate)

85130 (if appropriate)

85210 (if appropriate)

85220 (if appropriate)

85230 (if appropriate)

85240 (if appropriate)

85245 (if appropriate)

85246 (if appropriate)

85247 (if appropriate)

85250 (if appropriate)

85260 (if appropriate)

85270 (if appropriate)

85280 (if appropriate)

85335 (if appropriate)

85335 (if appropriate)

85335 (if appropriate)

85366 (if appropriate)

85379 (if appropriate)

85384 (if appropriate)

85385 (if appropriate)

85390-26 (if appropriate)

85397 (if appropriate)

85597 (if appropriate)

85598 (if appropriate)

85611 (if appropriate)

85613 (if appropriate)

85613 (if appropriate)

85635 (if appropriate)

85670 (if appropriate)

85732 (if appropriate)

Updates: 2/6/2025: Initial entry, replaces retired in-house LUPI