
Overview

Useful For

Confirming or excluding the presence of lupus anticoagulant (LAC), distinguishing LAC 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. We recommend separate testing for serum phospholipid (cardiolipin) antibodies.

Method Name

Only orderable as a reflex. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

Medical Interpretation

NY State Available

Yes

Specimen

Specimen Type

Plasma Na Cit

Specimen Required

Only orderable as a reflex. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

Patient Preparation: Patient should not be receiving warfarin or heparin. If the patient is currently on warfarin or heparin, this should be noted, treatment with heparin causes false-positive results of in vitro coagulation testing for lupus anticoagulant. Coumadin treatment may impair ability to detect the more subtle varieties of lupus-like anticoagulants.

Reject Due To

Gross hemolysis Reject
Gross lipemia Reject
Gross icterus Reject

Specimen Minimum Volume

Only orderable as a reflex. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Plasma Na Cit	Frozen (preferred)	14 days	

Clinical & Interpretive**Clinical Information**

Lupus anticoagulant (LAC) is an antibody to negatively charged phospholipid that interferes with phospholipid-dependent coagulation tests.

LAC is found in, but not limited to, patients with systemic lupus erythematosus; LAC is associated with other autoimmune disorders and collagen vascular disease, and occurs in response to medications or certain infections (eg, respiratory tract infections in children) and in individuals with no obvious underlying disease.

LAC has been associated with arterial and venous thrombosis and fetal loss. Individuals with thrombocytopenia or factor II deficiency associated with LAC may be at risk for bleeding.

Reference Values

Only orderable as a reflex. For more information see ALUPP / Lupus Anticoagulant Profile, Plasma.

An interpretive report will be provided.

Interpretation

An interpretive report will be provided when testing is complete.

Cautions

No specific cautionary statements

Clinical Reference

1. Arnout J, Vermeylen J: Current status and implications of autoimmune antiphospholipid antibodies in relation to thrombotic disease. J of Thromb Haemost 2003 May;1(5):931-942
2. Levin JS, Branch DW, Rauch J: The antiphospholipid syndrome. New Engl J Med 2002 March 7;346(10):752-763
3. Proven A, Bartlett RP, Moder KG et al: Clinical importance of positive tests for lupus anticoagulant and anticardiolipin antibodies. Mayo Clin Proc 2004,79(4):467-475

Performance**Method Description**

A coagulation expert (clinician or hematopathologist) reviews the laboratory data and an interpretive report is issued.

PDF Report

No

Specimen Retention Time

7 days

Performing Laboratory Location

Rochester

Fees & Codes**Test Classification**

Not Applicable

CPT Code Information

85390-26 Special Coagulation Interpretation

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
ALUPO	Lupus Anticoagulant Interp	75882-1

Result ID	Reporting Name	LOINC®
603185	Reviewed by	18771-6
603465	Lupus Anticoagulant Interp	75882-1