

Overview

Useful For

Interpretation of testing performed as part of a profile to confirm or exclude the presence of lupus anticoagulant (LAC), distinguishing LAC from specific coagulation factor inhibitors and nonspecific inhibitors

Interpretation of testing performed as part of a profile to investigate 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

Reject Due To

| | |
|-----------------|--------|
| Gross hemolysis | Reject |
| Gross lipemia | Reject |
| Gross icterus | Reject |

Specimen Stability Information

| Specimen Type | Temperature | Time | Special Container |
|---------------|-------------|---------|-------------------|
| Plasma Na Cit | Frozen | 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, noting a presence or absence of a lupus anticoagulant.

Cautions

No specific cautionary statements

Clinical Reference

1. Arnout J, Vermynen J. Current status and implications of autoimmune antiphospholipid antibodies in relation to thrombotic disease. *J Thromb Haemost.* 2003;1(5):931-942
2. Levin JS, Branch DW, Rauch J.: The antiphospholipid syndrome. *New Engl J Med.* 2002;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
4. Favaloro EJ, Lippi G, eds. *Hemostasis and Thrombosis: Methods and Protocols.* Humana Press; 2017

Performance

Method Description

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

PDF Report

No

Day(s) Performed

Monday through Friday

Report Available

3 to 5 days

Specimen Retention Time

7 days

Performing Laboratory Location

Rochester

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

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 | Test Result Name | Result LOINC® Value |
|-----------|----------------------------|---------------------|
| 603185 | Reviewed by | 18771-6 |
| 603465 | Lupus Anticoagulant Interp | 75882-1 |