

# TEST REQUISITION

**vitalant**  
 Specialty Lab – Coagulation  
 3636 Boulevard of the Allies  
 Pittsburgh, PA 15213-4306  
 1-800-967-9672 or 412-209-7270  
 Facsimile No: 412-209-7275  
 revised 5/2023

Enter your account number \_\_\_\_\_  
 OR provide the following information:

Client \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**PATIENT INFORMATION**

Patient ID/ MRN \_\_\_\_\_ Last Name/ Code \_\_\_\_\_ First Name \_\_\_\_\_  
 DOB - - \_\_\_\_\_ SEX \_\_\_\_\_ LAB/HOSP ID \_\_\_\_\_  
 MM-DD-YYYY  
 DIAGNOSIS/ REASON FOR TEST \_\_\_\_\_ MEDICATION \_\_\_\_\_

**COLLECTION INFORMATION**

Date Collected - - \_\_\_\_\_ Time Collected \_\_\_\_\_  
 MM-DD-YYYY 24-hour Clock  
 Ordering Physician \_\_\_\_\_ Phone # w/area code \_\_\_\_\_  
 Last Name, First Name

**SPECIAL INSTRUCTIONS**

Testing \_\_\_\_\_ Reporting \_\_\_\_\_

Visit our website at <https://www.vitalanthealth.org/clinical-services/laboratory/coagulation> for a complete list of tests, special instructions, and requirements. **PANELS ARE DISEASE ORIENTED - Mark test code for panel only if all tests listed are deemed medically necessary. Any test may be ordered individually.** Panels include an interpretation. PLEASE NOTE - some tests are automatically reflexed based on abnormality of the original test unless you indicate that it is not desired. These reflexed tests will incur an additional charge. Please add the patient's name and lab/hospital ID# at the bottom of each page.

**SPECIFY #TUBES SENT**      **FROZEN PLASMA**      **ROOM TEMP**      **OTHER (SPECIFY)**

\* = for local Clients only; these samples need to arrive within 3 hours of sample collection.

^ = reflexing options based on other von Willebrand test results are available upon request.

HYPERCOAGULABILITY		BLEEDING DISORDERS	
<input type="checkbox"/> 547T Lupus Anticoagulant Panel I		<input type="checkbox"/> 5356 von Willebrand Profile	
<input type="checkbox"/> 5359 PT/INR	85610	<input type="checkbox"/> 5363 APTT	85730
<input type="checkbox"/> 5363 APTT	85730	<input type="checkbox"/> 535S APTT Mix (if needed)	85732
<input type="checkbox"/> 535S APTT Mix (if needed)	85732	<input type="checkbox"/> 5364 Factor VIII:C	85240
<input type="checkbox"/> 537E Thrombin Time	85670	<input type="checkbox"/> 537N Ristocetin CoFactor	85245
with Reptilase time if prolonged	85635	<input type="checkbox"/> 537F vW Antigen	85246
<input type="checkbox"/> 5364 Factor VIII:C	85240	Includes Multimers	85247
<input type="checkbox"/> 535B dRVV (dilute Russel Viper Venom)	85613	if RCoF or vW Antigen is low	
<input type="checkbox"/> 547A Hexagonal Lipid Neutralization	85598	<input type="checkbox"/> *547F Plt Agg-1.2mg Ristocetin	85576
<input type="checkbox"/> 535G TTI	85705	<input type="checkbox"/> *535Y Plt Agg-0.3mg Ristocetin	85576
<input type="checkbox"/> 537R Anticardiolipin Antibodies (IgG, IgM)	86147x2	<input type="checkbox"/> *551I Closure Time: Collagen/EPI	85576
<input type="checkbox"/> 6404 LAC Panel w/DOAC Remove		Collagen/ADP	85576
Includes all tests listed in 547T and 6370		<input type="checkbox"/> 6305 vW Profile+Collagen Binding	
6370 separate DOAC Remove charge		all CPT codes for 5356 and	
DOAC Type (circle one): Apixaban      Rivaroxaban		5922	

HYPERCOAGULABILITY (cont.)	
<input type="checkbox"/>	<b>547S Lupus Anticoagulant Screen</b>
<input type="checkbox"/>	5359 PT/INR 85610
<input type="checkbox"/>	5363 APTT 85730
<input type="checkbox"/>	535S APTT Mix (if needed) 85732
<input type="checkbox"/>	537E Thrombin Time 85670
	with Reptilase time if prolonged 85635
<input type="checkbox"/>	535B dRVV (dilute Russel Viper Venom) 85613
<input type="checkbox"/>	535G TTI 85705
Hypercoagulation Antibody Testing	
<input type="checkbox"/>	547X Antiphosphatidylserine Abs (IgG, IgM) 86148x2
<input type="checkbox"/>	5651 Antiphospholipid Abs (IgG, IgM) 86147x2
<input type="checkbox"/>	537R Anticardiolipin Antibodies (IgG, IgM) 86147x2
<input type="checkbox"/>	542I Anticardiolipin Antibody (IgA) 86147
<input type="checkbox"/>	5652 Beta 2 Glycoprotein Abs (IgG, IgM, IgA) 86146x3
<input type="checkbox"/>	6406 aPS/PT Abs (IgG, IgM) 86148x2
<input type="checkbox"/>	<b>547V Thrombotic Risk Screen</b>
<input type="checkbox"/>	536H Factor X 85260
<input type="checkbox"/>	5365 Antithrombin III Activity 85300
<input type="checkbox"/>	535Q Protein C Activity 85303
<input type="checkbox"/>	5705 Protein S Free Antigen 85306
<input type="checkbox"/>	547C APC Resistance 85307
Genetic Tests	
<input type="checkbox"/>	557F Factor V Leiden 81241
<input type="checkbox"/>	557I Factor V Cambridge 81403
<input type="checkbox"/>	5591 Factor V HR-2 Haplotype 81400
<input type="checkbox"/>	5607 Glycoprotein Ia (C807T) 81400
<input type="checkbox"/>	557T Hemochromatosis C282Y 81256
<input type="checkbox"/>	558D Hemochromatosis H63D 81256
<input type="checkbox"/>	557Y MTHFR A1298C 81291
<input type="checkbox"/>	557X MTHFR C677T 81291
<input type="checkbox"/>	5620 PAI-1 Polymorphism (4G/5G) 81400
<input type="checkbox"/>	5621 PL A1/A2 Polymorphism 81400
<input type="checkbox"/>	557V Prothrombin Gene Variant (FII Mut) 81240
Coagulation Factors	
<input type="checkbox"/>	536E Factor II 85210
<input type="checkbox"/>	536F Factor V 85220
<input type="checkbox"/>	536G Factor VII 85230
<input type="checkbox"/>	536H Factor X 85260
<input type="checkbox"/>	5364 Factor VIII:C 85240
<input type="checkbox"/>	536J Factor IX 85250
<input type="checkbox"/>	536K Factor XI 85270
<input type="checkbox"/>	536L Factor XII 85280
<input type="checkbox"/>	5373 Fibrinogen (Clauss) 85384
Miscellaneous Factors	
<input type="checkbox"/>	536P Prekallikrein (Fletcher) 85292
<input type="checkbox"/>	536N HMW Kininogen (Fitzgerald) 85293
<input type="checkbox"/>	6289 Factor XIII Quantitative 85290
Factor Inhibitors	
<input type="checkbox"/>	537T FVIII Inhibitor (anti-VIII) 85335
<input type="checkbox"/>	537U Factor IX Inhibitor (anti-IX) 85335
<input type="checkbox"/>	535I Factor Inhibitor, non VIII/IX (Factor___) 85335

BLEEDING DISORDERS (cont.)	
<input type="checkbox"/>	<b>536V von Willebrand Screen</b>
<input type="checkbox"/>	5363 APTT 85730
<input type="checkbox"/>	535S APTT Mix (if needed) 85732
<input type="checkbox"/>	5364 Factor VIII:C 85240
<input type="checkbox"/>	537N Ristocetin CoFactor 85245
<input type="checkbox"/>	537F vW Antigen 85246
	Includes Multimers (536R) 85247
	if RCoF or vW Antigen is low
<input type="checkbox"/>	<b>6304 vW Screen+Collagen Binding</b>
	all CPT codes for 536V and 5922
Other von Willebrand Testing	
<input type="checkbox"/>	^6405 vWF Activity: GP1bM 85397
<input type="checkbox"/>	5922 Collagen Binding Assay 85246
<input type="checkbox"/>	536R vWF Antigen Multimers 85247
<input type="checkbox"/>	<b>5358 *Platelet Aggregation Panel</b>
<input type="checkbox"/>	535T *Plt Agg-20µM ADP 85576
<input type="checkbox"/>	535U *Plt Agg-10µM ADP 85576
<input type="checkbox"/>	535V *Plt Agg-5µM ADP 85576
<input type="checkbox"/>	535W *Plt Agg-Collagen 85576
<input type="checkbox"/>	547F *Plt Agg-1.2mg Ristocetin 85576
<input type="checkbox"/>	535Y *Plt Agg-0.3mg Ristocetin 85576
<input type="checkbox"/>	535Z *Plt Agg-Arachidonic Acid 85576
<input type="checkbox"/>	<b>547Z *Platelet Function Panel</b>
	NOTE: should only be ordered in conjunction with 5356 vW Profile
	Same as 5358 above w/o Risto Aggregations
<input type="checkbox"/>	<b>6376 DIC Screen</b>
<input type="checkbox"/>	5359 PT/INR 85610
<input type="checkbox"/>	535P PT Mix 85611
<input type="checkbox"/>	5363 APTT 85730
<input type="checkbox"/>	535S APTT Mix (if needed) 85732
<input type="checkbox"/>	5373 Fibrinogen (Clauss) 85384
<input type="checkbox"/>	5365 Antithrombin III Activity 85300
<input type="checkbox"/>	537P FDP 85362
<input type="checkbox"/>	6135 D-Dimer Quantitative 85379
<input type="checkbox"/>	537E Thrombin Time 85670
	with Reptilase time if prolonged 85635
HIT (Heparin-Induced Thrombocytopenia)	
<input type="checkbox"/>	550B Heparin PF4 Platelet Ab 86022
	(ELISA)
<input type="checkbox"/>	535H Heparin Platelet Ab 86022
	(Aggregation Method)
Anticoagulant Monitoring	
<input type="checkbox"/>	5359 PT/INR (Coumadin) 85610
<input type="checkbox"/>	537I Factor X Chromogenic (Coumadin) 85260
<input type="checkbox"/>	5997 Dabigatran Level 85670
<input type="checkbox"/>	5762 Fondaparinux (Arixtra) Level 85520
<input type="checkbox"/>	547L Heparin Level, Anti-Xa (circle one) 85520
	Unfract      Lovenox      Fragmin
<input type="checkbox"/>	6095 Rivaroxaban Level 80299
<input type="checkbox"/>	6327 Apixaban Level 80299

Fibrinolysis		Esoteric Platelet Testing			
<input type="checkbox"/>	536A Antiplasmin Activity	85410	<input type="checkbox"/>	6372 Glycoprotein Panel A (Flow)	88184
<input type="checkbox"/>	537A Plasminogen Activity	85420		(GPIIb, GPIIIa, GPIX, GP1b $\alpha$ )	88185x3
<input type="checkbox"/>	537L Plasminogen Antigen	85421		-Glanzmann thrombasthenia and	88187
<input type="checkbox"/>	547P PAI-1 Activity	85415		Bernard Soulier syndromes	
<input type="checkbox"/>	5391 PAI-1 Antigen	85415	<input type="checkbox"/>	6373 Glycoprotein Panel B (Flow)	88184
<input type="checkbox"/>	5373 Fibrinogen (Clauss)	85384		(GPVI, GPIa)	88185
<input type="checkbox"/>	536U Fibrinogen Antigen (Immunologic)	85385		-Collagen receptor deficiency	88187
<input type="checkbox"/>	537E Thrombin Time	85670	<input type="checkbox"/>	6374 Glycoprotein Panel C (Flow)	88184
<input type="checkbox"/>	537D Reptilase Time	85635		(combined Panel A & Panel B)	88185x5
<input type="checkbox"/>	536C Euglobulin Lysis	85360			88187
<input type="checkbox"/>	6135 D-Dimer Quantitative	85379	<input type="checkbox"/>	5665 Adenine Nucleotides	82030
<input type="checkbox"/>	537P FDP	85362			
Other Coagulation Tests		Other Coagulation Tests (cont.)			
<input type="checkbox"/>	5745 ADAMTS-13 Activity - includes Inhibitor (5954) if <30	85397 85335	<input type="checkbox"/>	5665 Adenine Nucleotides	82030
<input type="checkbox"/>	5913 ADAMTS-13 Autoantibody (ELISA)	83520	<input type="checkbox"/>	536P Prekallikrein (Fletcher)	85292
<input type="checkbox"/>	5954 ADAMTS-13 Inhibitor (Neutralizing)	85335	<input type="checkbox"/>	536N HMW Kininogen (Fitzgerald)	85293
<input type="checkbox"/>	537I Factor X Chromogenic	85260	<input type="checkbox"/>	537M Protein C Antigen	85302
<input type="checkbox"/>	536M Factor XIII Screen	85291	<input type="checkbox"/>	537Q Protein S Activity	85306
<input type="checkbox"/>	547P PAI-1 Activity	85415	<input type="checkbox"/>	5705 Protein S Free Antigen	85306
<input type="checkbox"/>	5391 PAI-1 Antigen	85415	<input type="checkbox"/>	536I Protein S Total Antigen	85305
			<input type="checkbox"/>	536B Cryofibrinogen (green top heparin tube only)	82585
OTHER					