

Name	: #DUMMY	Collected	: 17/4/2017 12:00:00AM
Lab No.	: 133434985	Received	: 17/4/2017 10:02:42AM
Age:	Unknown	Reported	: 17/4/2017 11:19:19AM
Gender:	Unknown	Report Status	: Final
A/c Status	: P	Ref By	: Dr. UNKNWON

Test Name	Results	Units	Bio. Ref. Interval
PHOSPHOLIPID SYNDROME PANEL			

LUPUS ANTICOAGULANT BY DRVVT (Photo Optical Clot Detection)			
SCREEN			
Patient Value	38.90	sec	36.00 - 50.00
Screen Ratio	1.00		<1.20
Control Value	38.90	sec	
INTERPRETATION	No lupus like anticoagulant present		

Note

- As per ISTH guidelines Lupus Anticoagulant detection must be done by using at least two clot based assays employing separate clotting principles like PTT-LA & dRVVT.
- Results to be interpreted in conjunction with the patient's medical history, clinical presentation and other findings.
- Test conducted on Citrated plasma.

Comments

Lupus Anticoagulants are heterogenous IgG or IgM autoantibodies which interfere with phospholipid dependent in vitro coagulation tests, particularly activated partial thromboplastin time (APTT). These antibodies are associated with thrombosis (arterial & venous), recurrent abortions, neurological & neuropsychiatric disorders. Various methods for testing Lupus Anticoagulants include PTT-LA, activated kaolin clotting time and dilute Russels Viper Venom time. Out of these the DRVVT assay is the most robust & specific because DRVVT is not influenced by deficiencies of intrinsic pathway or antibodies to factors VIII, IX or XI.

CARDIOLIPIN ANTIBODY, IgG, SERUM (EIA)	8.00	GPL	<15.00
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Interpretation

RESULT IN GPL	REMARKS
<15	Negative
15-20	Equivocal
20-80	Low Positive



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Test Name	Results	Units	Bio. Ref. Interval
>80	High Positive		

Comments

Anticardiolipin antibodies(ACA) belong to the group of Antiphospholipid antibodies which are positive in 30-40% cases of Systemic lupus erythematosus and also in patients with other Rheumatic diseases. Presence of cardioliipin antibodies is considered to be of significant diagnostic relevance in cases of Venous/Arterial thrombosis, Thrombocytopenia, Livedo reticularis, Habitual abortions and Neurological manifestations. Elevated ACA levels are also seen in patients with Cardiovascular insufficiency and Myocardial infarction. Results must be correlated with the history and clinical findings of the patient.

CARDIOLIPIN ANTIBODY, IgM, SERUM (EIA)	9.00	MPL	<12.50
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Interpretation

RESULT IN MPL	REMARKS
<12.50	Negative
12.50-20	Equivocal
20-80	Low Positive
>80	High Positive

Comments

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PHOSPHOLIPID ANTIBODY, IgG, SERUM (EIA)	2.00
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2006 International Consensus statement on Classification of definite APS

Clinical Criteria	Laboratory Criteria
Arterial / Venous thrombosis	Cardiolipin antibodies (aCL)
Fetal Loss	Beta 2 Glycoprotein 1 Antibodies
Premature birth	Lupus Anticoagulant (LA)



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Test Name Results Units Bio. Ref. Interval

Note

APS is established if at least 1 Laboratory criteria and 1 Clinical criteria are met. The Laboratory criteria should be present on two or more occasions 12 weeks apart for diagnosing APS.

Comments

Phospholipid antibody is a quantitative assay to screen the presence of autoantibodies against cardiolipin, phosphatidyl serine, phosphatidyl inositol & phosphatidic acid in the diagnosis of an increased risk of thrombosis in patients with Systemic lupus erythematosus (20-35%) and other lupus like disorders.

This test is also used to diagnose Anti-phospholipid syndrome (APS) in patients with recent miscarriage (11-22% in all trimesters), Pulmonary hypertension, Non-vegetative endocarditis, Livedoreticularis, Stroke at young age and Deep vein thrombosis.

PHOSPHOLIPID ANTIBODY, IgM, SERUM (EIA)	3.00
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Fetal Loss	Beta 2 Glycoprotein 1 Antibodies
Premature birth	Lupus Anticoagulant (LA)

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Comments

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