



MEMORANDUM

To: Regional Medical Laboratory (RML) Clients

From: Lawrence R. Johnson, MD, FCAP, Chief of Hematology, Flow Cytometry, Coagulation, and Urinalysis
Lizbeth Carreiro, MT (ASCP), Manager Hematology, Coagulation, Flow Cytometry

Subject: Lupus Anticoagulant Analyzer and Lupus Anticoagulant Screen

Date: January 25, 2011

Beginning January 31, 2011, Regional Medical Laboratory will begin performing the ProthrombinTime (PT) with an international normalized ratio (INR) as part of our Lupus Anticoagulant Screen (LUPUS ANTI) and Lupus Anticoagulant Analyzer (LUP ANT AN). The addition of the PT/INR will enhance our current methods of determining specimen suitability for analyzer testing and the ensuing pathology interpretation.

This change is being prompted by updated guidelines on lupus anticoagulant detection published following a Geneva subcommittee meeting on lupus anticoagulant testing (SEE PengoV, et al, Update of the Guidelines for Lupus Anticoagulant Detection, Journal of Thrombosis and Haemostasis, 2009; 7: 1737-1740). In following these guidelines as they relate to patients being treated with vitamin K antagonists (VKA) such as coumadin/Warfarin, it has been determined that performing such testing on patients with an INR >3.5 is neither effective or reliable. After January 31, 2011, lupus anticoagulant testing will be cancelled on specimens exhibiting an INR result >3.5.

Additional guidelines that are being recommended are as follows:

Recommendation	Action to be Taken
Testing should not be performed if patient has INR >3.5	RML will cancel Lupus Analyzer or Screen with footnote PT/INR>3.5, patient will not be charged for analyzer/screen workup.
Patients being treated with VKA should be tested 30 days after discontinuation or once INR <1.5	If patient is on VKA perform PT/INR. If PT is <1.5, order and collect Lupus Anticoagulant Screen or Analyzer
Patient identified as positive for lupus anticoagulant (LA)	Repeat patient testing >12 weeks after initial testing, while patient is in steady state and preferably not on anticoagulation therapy.**

*** repeat testing is required because of the transitory nature of many clinically irrelevant lupus anticoagulants and other antiphospholipid antibodies.*

For questions or comments, contact Dr. Johnson or Liz Carreiro at (918)744-2500, or by email at LRJohnson@sjmc.org or lizbeth.carreiro@sjmc.org.

