

**Thrombin Time**

Order Name: **Thrombin Time**  
Test Number: 1503075  
Revision Date: 01/31/2017

TEST NAME	METHODOLOGY	LOINC CODE
Thrombin Time	Clot Detection .....	

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1.5mL ( 0.5mL)	Plasma	Sodium Citrate 3.2% (Blue Top)	Frozen
Instructions	2.7mL Sodium Citrate 3.2% (Blue Top) tube must be filled to the proper level, no hemolysis. Improperly filled tubes can give erroneous results. Whole blood must be transported to lab immediately. If testing cannot be started within 4 hours of collection the specimen must be double spun then 1.5 mL plasma aliquot from each tube into individual plastic aliquot tubes and freeze.			

GENERAL INFORMATION	
Testing Schedule	Mon-Fri - Both Shifts
Expected TAT	1-2 Days
CPT Code(s)	85670
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.