

MULTIPLE CHANGES

NOTIFICATION DATE: September 22, 2009

EFFECTIVE DATE: October 27, 2009

WARFARIN, PLASMA OR SERUM #8760

EXPLANATION: Effective October 27, 2009, multiple changes will occur to test #8760. Please see changes below. There will be no changes to the reference values, fee or CPT coding.

CURRENT REPORTING NAME: Warfarin, P

NEW REPORTING NAME: Warfarin, S

CURRENT PUBLISHED NAME: Warfarin, Plasma

NEW PUBLISHED NAME: Warfarin, Serum

CURRENT SPECIMEN REQUIREMENT: Draw blood in a green-top (heparin) tube(s) or a lavender-top (EDTA) tube(s). (**Plasma gel tube is not acceptable.**) Spin down and send 3 mL of heparinized or EDTA plasma.

NEW SPECIMEN REQUIREMENT: Draw blood in a plain, red-top tube(s). (**Serum gel tube is not acceptable.**) Spin down and send 3 mL of serum.

CURRENT REPORTING UNITS: ug/mL

NEW REPORTING UNITS: mcg/mL

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or
Jim Nielsen, Mayo Medical Laboratories Technologist Support
Telephone: 800-533-1710



MAYO CLINIC
 Mayo Medical Laboratories

TEST DEFINITION

9/17/2009

Code Name

 8760 Warfarin, S

**** End of Name to order code Report ****

MML MML Test setup information

ORDER CODE	EFF DATE	TC	TITLE	Checking Normals	Print normals (# coded)	Perform Site *
8760	8/8/2009		Warfarin, S			MCR
Transport temp : Ambient\Refrig OK\Frozen OK 8760 Warfarin, S Expect results of form : Should be a number between 0.0 and 99.9 Possible result values include : <1.0 Units: mcg/mL NO SEX All Ages : 2.0-5.0 ; #N8760N MALE All Ages : 2.0-5.0 ; #N8760N FEMALE All Ages : 2.0-5.0 ; #N8760N						

*Performing Site Legend

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MCR      Mayo Clinic Dpt of Lab Med & Pathology      LAB DIRECTOR:  Franklin R. Cockerill, III, M.D.
          200 First Street SW
          Rochester, MN 55905
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*** End of Report ***

MML

Messages used as normals

CODE	TEXT
N8760N	2.0-5.0 (Therapeutic concentration) > or = 10.0 (Toxic concentration)

Total of 1 normals codes

*** End of Report ***

1-800-533-1710

PATIENT NAME TESTING, 8760 IS		PATIENT NUMBER		AGE 36	SEX F	ACCESSION # G9134649
ORDERING PHYSICIAN		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 09/12/09 02:57 P DATE TIME	RECEIVED 09/12/09 02:57 P DATE TIME	REPORT PRINTED 09/17/09 12:25 P DATE TIME		SPECIMEN INFORMATION DATE OF BIRTH:		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
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Warfarin, S

Warfarin, S	4.0	mcg/mL	MCR
-- EXPECTED VALUES --			
2.0-5.0 (Therapeutic concentration)			
> or = 10.0 (Toxic concentration)			

* PERFORMING SITE

MCR Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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PATIENT NAME TESTING, 8760 IS	ORDER STATUS Final	COLLECTION DATE AND TIME 09/12/09 02:57 P
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