

# Factor Assays



## Synonyms

Factor II, V, VII, VIII, IX, X, XI and XII

## Clinical Indication

Unexplained post-traumatic bruising, menorrhagia, epistaxis and bleeding from mucous membranes. Patient should be bled with minimal stasis, and samples received in lab within 4 hours of collection.

**Please note that a Factor V assay is NOT the same as Factor V Leiden assay (See Thrombophilia screen).**

## Part of Profile / See Also

## Request Form

Combined Pathology manual Blood form, ICE request or retrospective request form

## Availability / Frequency of Analysis

Samples analysed within two weeks of receipt, unless required urgently.

Please discuss with Consultant Haematologist before requesting.

## Turnaround Time

Analysed within 2 weeks of receipt. Contact the laboratory if urgent.

## Patient Preparation

Patient should be bled with minimal stasis, and samples received in lab within 4 hours of collection.

## Sample Requirements

### Specimen Type

Citrated Blood

### Volume

Collection tube must be filled to 'fill mark' on side of bottle. This is critical.

### Container



2 x Blue top (sodium citrate) tube



2 x Paediatric Blue Top (Sodium Citrate) tube

## Reference Range & Units

0.5-1.5 IU/ml

## Interferences

Under filled, clotted or haemolysed samples. Anticoagulation and poor phlebotomy practice (activated clotting pathway)

## Interpretation & Clinical

## Decision Value (if applicable)

See individual report for interpretation and reference range. For guidance contact Consultant Haematologist.

## References

Werfen kit inserts

## Test code

A2,A5,A7,A8,A9,A10,A11,A12

## Lab Handling

Samples should be received in the lab within 4 hours of collection and must be double spun and frozen.