

**Results: PROTHROMBIN
TIME****Status: Final
result
10/18/2012 4:00
PM****MRN:
Description:****Result Report****Entry Date**

10/18/2012

Component Results

Component	Value	Flag	Range & Units	Status
Patient Protime	12.2		11.9 - 14.4 SEC	Final

Comment:

NOTE: Effective March 30, 2010, new reference range for PT due to new reagent. INR therapeutic ranges are not changing.

INR	0.9		<3.6	Final
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Comment:

INR REFERENCE RANGE

THERAPEUTIC:2.0-3.0

HIGH DOSE:2.5-3.5

PT results expressed as INR are for coumadin monitoring. Abnormality flag only occurs if the INR exceeds 3.5.

Lab and Collection**PROTHROMBIN TIME (Order #** on 10/18/2012 - Lab and Collection Information**Result History****PROTHROMBIN TIME (Order #** on 10/18/12 - Order Result History Report.**Result Component Information for SmartLink Creation****PROTHROMBIN TIME (Order #** on 10/18/12**Reviewed by List**

Hu, Jethro L, MD on 10/19/2012 4:11 PM

Lab Information

Lab	Lab Director
CEDARS-SINAI MED CTR DEPT OF PATHOLOGY & LAB MEDICINE	Mahul B. Amin, MD
8700 Beverly Blvd.	
Los Angeles CA 90048	

Lab IDs

Order #	Specimen #	Accession Number
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Order**PROTHROMBIN TIME [LAB320] (Order****Order Information**

Date and Time	Department	Released By	Authorizing
10/18/2012 3:19 PM	Outreach Specimen	Auto-released	Hu, Jethro L, MD

Order ProvidersAuthorizing
Hu, Jethro L**Order Details**

Frequency	Duration	Priority	Order Class
ONCE	1 occurrence	Routine	Lab Collect

Start Date/Time

Start Date	Start Time
10/18/12	0930

Collection Information

Date Collected
Oct 18, 2012

Time Collected
9:30 AM

Rslt Agency
CEDARS-SINAI MED CTR DEPT
OF PATHOLOGY & LAB
MEDICINE [11]

Original Order

Ordered On
Thu Oct 18, 2012 9:30 AM

Ordered By
Cshs Interface, Lab_In

Process Instructions

Light blue top tube, 2.7 mL Neonatal minimum: special blue tube, 1.3 mL - can be combined with PTT

Additional Information

[Associated Reports](#)
[View Encounter](#)
[Priority and Order Details](#)
[Collection Information.](#)

Lab IDs

Specimen #

Code Linked Chargeable Procedure
85610 PR PROTHROMBIN TIME

Ambulance Authorization Form

LabCorp Reprint

Anatomic Path Report

Cedars Blood Bank Reprint

Foundation Reprint

CSMG/Private Office Cedars Lab Reprint

RDL Reprint

CSMC Cedars Lab Reprint

Quest Diagnostic Reprint

Quest Diagnostic PCS HOLD Reprint

CSHS AMB General Lab Reprint

No order transmittal information available.

Order may not have completed order transmittal.