

<p><b>TEST PROCEDURE:</b>  <b>TEST MNEUMONIC:</b>  <b>BILLING NUMBER:</b>  <b>MANNER OF COLLECTION:</b>  <b>SPECIMEN REQUIRED:</b>  <b>SPECIAL INSTRUCTIONS:</b></p> <p><b>PATIENT PREPARATION:</b>  <b>AVAILABILITY:</b>  <b>ROUTINE TURN-AROUND-TIME:</b>  <b>STAT TURN-AROUND-TIME:</b>  <b>LIMITATIONS:</b>  <b>NORMAL RANGE:</b></p>	<p><b>ANTI THROMBIN III ACTIVITY – PLASMA ACTIVITY</b>  <b>AT3</b>  3000070  Drawn by Lab  Citrated plasma, 1 Blue Top with Black Insert of 2 Blue Top with White Insert  2, 1 ml citrated plasma aliquots place in plastic tubes. Centrifuge, separate and freeze plasma immediately.</p> <p>None  At all times.  Dependent on Reference Laboratory's testing schedule  N/A  None  See Reference Laboratory Report</p>
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