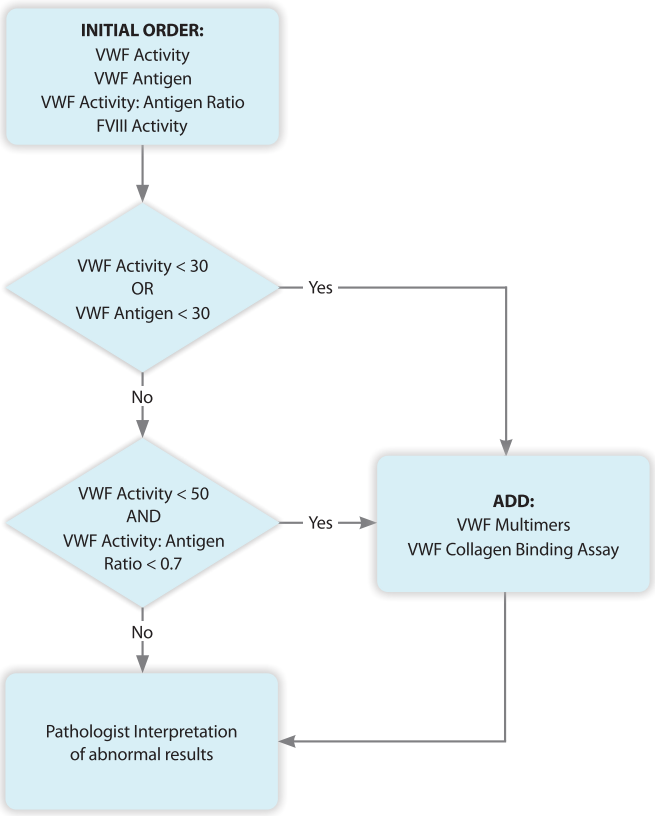
VON WILLEBRAND DISEASE
REFLEXIVE PROFILE

Diagnosing von Willebrand Disease

Diagnosis of von Willebrand Disease (VWD) is dependent on assimilation of clinical features and laboratory results. The clinical and laboratory diagnosis of VWD, however, can be difficult. This is, in part, due to natural variations in von Willebrand Factor (VWF) levels as these proteins are acute phase reactants and levels also vary with hormone status. In addition, VWF and factor VIII levels are dependent on ABO blood type, age, and race. Africans and African Americans have higher average levels of VWF than the Caucasian population. VWF levels also tend to increase with age.[1]

Profile Algorithm:

Colorado Coagulation's von Willebrand Disease Reflexive Profile follows current guidelines published by the National Heart, Lung, and Blood Institute for the diagnosis of von Willebrand Disease.[1] Proper screening and reflex testing may provide a more efficient and cost-effective approach to the laboratory evaluation of von Willebrand Disease. All abnormal results are reviewed and interpreted by a pathologist.



Test Name	Test No.	Methodology	Specimen	Container	Storage
Von Willebrand Disease Reflexive Profile	**504808**	Clot, Turbidometric, ELISA, Western Blot	2 x 2mL citrated plasma	Blue-top (sodium citrate) tube	Frozen

References:
1. Nhlbi.nih.gov. 2007. The Diagnosis, Evaluation, And Management Of Von Willebrand Disease. <https://www.nhlbi.nih.gov/files/docs/guidelines/vwd.pdf>.

Colorado COAGULATION
LabCorp Specialty Testing Group