

Coagulation Profile Lab Report

Patient Name: _____

Patient ID: _____

Age/Sex: _____

Date of Report: _____

Referring Doctor: _____

Sample Collected: _____

Test Results

Test	Result	Unit	Reference Range
Prothrombin Time (PT)	_____	seconds	11 â€“ 16
International Normalized Ratio (INR)	_____		0.8 â€“ 1.2
Activated Partial Thromboplastin Time (aPTT)	_____	seconds	25 â€“ 35
Thrombin Time (TT)	_____	seconds	14 â€“ 21
Fibrinogen	_____	g/L	2.0 â€“ 4.0
D-Dimer	_____	ng/mL	< 500

Comments

Pathologist/Lab Technologist: _____

Signature: _____ Date: _____