

**Date:** November 10, 2011

**To:** South Zone – West Physicians: At Cardston, Raymond, Milk River, Taber, Crowsnest Pass, Pincher Creek and Fort Macleod Hospitals

**From:** AHS Laboratory Services – South Zone (West)

**Re:** LB-21-11 D-dimer Testing at Rural Hospital Sites  
\*\*\*Second Revision, November 10, 2011\*\*\*

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### Key Messages:

Effective September 1, 2011, a qualitative D-dimer test will be available at your local laboratory.

D-dimer is used to rule out deep venous thrombosis and pulmonary embolism. It is most useful when the result is negative in a low risk patient by Well's Score, in which case it has a 94% negative predictive value for DVT/PE. **In cases where the result is positive, or in any high risk patient, further investigation by ultrasound is necessary.**

D-dimer is positive in many other situations other than DVT/PE: post operative patients, DIC, thrombolytic therapy, myocardial infarction, stroke, severe sepsis, severe liver disease, malignancy, renal failure, normal pregnancy.

In Chinook Regional Hospital laboratory, D-dimer is done by a quantitative method, with a reference range for normal of less than 0.5 mg FEU/L (Fibrinogen Equivalent Units). Any result above 0.5 mg FEU/L is considered positive.

The Simplify method is a qualitative result. The result is reported as positive, weakly positive, or negative. The manufacturer suggests the cut off for reporting positive is greater than or equal to 0.8 mg FEU/L. In our validation study we correlated the results from the Simplify method with the quantitative method, and we found the negative Simplify method correlated with a quantitative result of less than 0.8 mg FEU/L, 96% of the time.

### Why this is important:

D-dimer testing by the Simplify method will be available on-site at Cardston, Raymond, Milk River, Taber, Crowsnest Pass, Pincher Creek and Fort Macleod Hospitals.

### Action Required:

Order D-dimer, test code DDQ.

### Inquiries and feedback may be directed to:

Judy Noss, South Zone West Laboratory Manager at 403-388-6287

This bulletin has been reviewed and approved by  
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