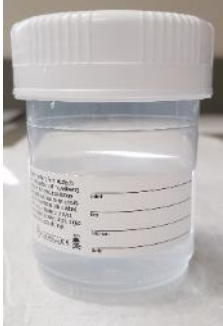


URINE CYTOLOGY

Cytology Samples: Urine			
Container and Fixative	Container pictures (<i>may vary</i>)	Storage after collection	Deliver to Lab
Sterile 60 mL container Fresh (no fixative) If delay >1 hour: 3:1 ratio of sample to CytoLyt fixative	 Standard 60mL container	Room temperature* If delay >1 hour, please refrigerate	Send ASAP

*Refrigeration is recommended for all samples collected on weekends/off-hours/holidays, or if a delay in transport is expected.

Requisition: Non-gynecologic cytology requisition (Cytology CD-1840)

- This guideline is for voided, catheterized, and cystoscopic urine samples.
- Always indicate the type of urine sample on the label and requisition.

Questions? Call the QEII Cytology Laboratory at 902-473-8420

Container labels must include:

- Patient's legal name
- Patient's health card number or another unique identifier
- Date and time of collection
- Sample type and site of collection

Requisition forms must include:

- Patient's legal name
- Patient's health card number or another unique identifier
- Patient's date of birth
- Date and time of collection
- Sample type and site of collection
- Physician's full name, CPSNS ID#, and address
- Clinical history