Department of Pathology & Laboratory Medicine
Central Zone
Laboratory Test Catalogue
PLM Laboratory Test Catalogue

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Information</td>
<td>3</td>
</tr>
<tr>
<td>Catalogue Information</td>
<td>3</td>
</tr>
<tr>
<td>Tests Not in Catalogue</td>
<td>3</td>
</tr>
<tr>
<td>Reference Ranges</td>
<td>3</td>
</tr>
<tr>
<td>Specimen Receiving Location</td>
<td>3</td>
</tr>
<tr>
<td><strong>Blood Collection</strong></td>
<td>3</td>
</tr>
<tr>
<td>Out-Patient Blood Collection Location and Hours of Operation</td>
<td>3</td>
</tr>
<tr>
<td>In-Patient and Clinic Blood Collection</td>
<td>3</td>
</tr>
<tr>
<td><strong>Specimen Collection Information</strong></td>
<td>4</td>
</tr>
<tr>
<td>Venipuncture Policy</td>
<td>4</td>
</tr>
<tr>
<td>Collection and Handling Instructions</td>
<td>4</td>
</tr>
<tr>
<td>Blood Collection Under Special Circumstances</td>
<td>4</td>
</tr>
<tr>
<td>Transfusion Medicine - Specimen Collection Policy</td>
<td>4</td>
</tr>
<tr>
<td>Requisition Information</td>
<td>4</td>
</tr>
<tr>
<td>Requisitions and Supplies</td>
<td>4</td>
</tr>
<tr>
<td>Specimen Labeling</td>
<td>5</td>
</tr>
<tr>
<td>Frozen Specimens</td>
<td>5</td>
</tr>
<tr>
<td>Transport</td>
<td>5</td>
</tr>
<tr>
<td>Coagulation Testing</td>
<td>5</td>
</tr>
<tr>
<td>Safety</td>
<td>6</td>
</tr>
<tr>
<td><strong>Alphabetical Test Listing</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Appendix A</strong></td>
<td>238</td>
</tr>
</tbody>
</table>

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Uncontrolled When Printed
General Information

Catalogue Information
This catalogue is developed by the Department of Pathology and Laboratory Medicine for all of our customers.

The Laboratory Test Catalogue may be viewed at: http://www.cdha.nshealth.ca/pathology-laboratory-medicine

While every effort is made to keep the Laboratory Test Catalogue up to date, the electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.

Tests Not in Catalogue
Please contact Buyers Road Blood Collection Service at (902) 454-1661 for information on tests not found in this catalogue. For inquiries outside of regular hours please call Laboratory Reporting and Inquiry at (902) 473-2266.

Reference Ranges
Reference values and interpretive information are reported with test results. Inquiries should be directed to (902) 473-2266.

Specimen Receiving Locations
For a list of locations where specimens for Pathology and Laboratory Medicine are received please visit: http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/specimen-receiving-locations

Blood Collection

Out-Patient Blood Collection Locations and Hours of Operation
For a list of Nova Scotia Health-Central Zone outpatient blood collection locations and hours of operation please consult the reverse side of any Pathology and Laboratory Medicine requisition or visit: http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/location-hours-outpatient-blood-collection

In-Patient and Clinic Blood Collection
For information related to Nova Scotia Health-Central Zone in-patient and clinic blood collection services please visit:
Specimen Collection Information

Venipuncture Policy
The Nova Scotia Health-Central Zone Department of Pathology and Laboratory Medicine Venipuncture Policy can be viewed at:
NSHA CL-BP-040 Venipuncture for Blood Specimen Collection

Collection, Handling and Transport Instructions
The specimens need to be properly collected, processed, packaged, and transported in accordance with laboratory policies and procedures, in a timely manner and under conditions that will not compromise either the integrity of the specimen or patient confidentiality. Transportation must be compliant with the Transportation of Dangerous Goods (TDG) Act. Please ensure no patient information is visible when packaging specimens to be transported to the laboratory. Detailed information is included with each test listing.

It is essential that an adequate volume/quantity of specimen be submitted for analysis. Minimum volume/quantity information is provided in each catalogue listing whenever applicable.

Hemolyzed or lipemic specimens may alter certain test results and may be rejected.

Blood Collection under Special Circumstances
Physicians must complete the following consent form authorizing phlebotomy under special circumstances such as mastectomy, fistula, and blood draws from the foot:
http://healthforms.cdha.nshealth.ca/sites/default/files/CD2154MR.pdf

Transfusion Medicine - Specimen Collection Policy
The NSHA CL-BP-040 Venipuncture for Blood Specimen Collection policy and procedure provides specific instructions for collecting specimens for the Transfusion Medicine division of the Department of Pathology and Laboratory Medicine.

Requisition Information
A Nova Scotia Health-Central Zone requisition must be submitted with all specimens.

Required formats and information for laboratory requisitions:

Requisitions and Supplies
A number of different Department of Pathology and Laboratory Medicine requisitions and supplies are available from Nova Scotia Health-Central Zone Customer Service by calling (902) 466-8070. Requisition reference numbers and fax request options can be viewed at:
Specimen Labeling

Required formats and information for labeling laboratory specimens:

All Transfusion Medicine specimens and retrievable specimens for other laboratory divisions that are unlabeled will be rejected.

When submitting serum or plasma specimen types, indicate the specimen type on the label.

Frozen Specimens

Specimens need to be frozen if specifically indicated in the Instructions/Shipping requirements. When freezing is indicated, specimens should be frozen as soon as possible. Always freeze specimens in plastic (polypropylene) containers unless instructed otherwise. A frozen specimen may be rejected if received in a thawed state. Ensure frozen specimens are packed in order to maintain the frozen state during transport.

If more than one test is requested on a frozen specimen, split the sample prior to freezing and submit separately.

Transport

Please see instructions and shipping procedures under test name for specific requirements. Specimens collected at the HI Site should be delivered to HI Specimen Receiving Room 6509A. Specimens collected at VG Site should be delivered to VG Specimen Receiving, Mackenzie Building Room 126. Specimens collected off-site and referred to QEII HSC should be addressed to:
QEII HSC Specimen Receiving, Mackenzie Building, Room 128, 5788 University Avenue
Halifax, Nova Scotia B3H 1V8

Coagulation Testing

Coagulation specimens are collected in 0.109M buffered sodium citrate tubes unless stated otherwise under the specific test in the catalogue.

Citrate tubes must be:
- completely filled or will be rejected.
- sent to the laboratory as soon as possible after collection as testing is time sensitive.
- transported at room temperature and cannot be packaged on ice or in the same container as other specimens on ice (rejected if received with ice)

Referral testing not in primary tube:
- Specimens must be double spun at centrifuge parameters that are validated for platelet poor plasma by following the steps below:

  1. After centrifuging the primary container transfer all plasma into a secondary aliquot tube with the exception of a small layer near the buffy coat (5 mm of plasma).
  2. Centrifuge the secondary container and then aliquot 1 ml of the platelet poor plasma into each of the required number of labeled polypropylene aliquot tubes (required number of aliquots is listed under each assay). Do not pipette or disturb the bottom 2 to 5 mm of plasma in the secondary container.
  3. Freeze and send on dry ice so no thawing occurs during transport (rejected if received thawed).
Safety

All patients at Nova Scotia Health are cared for using Routine Practices. All blood specimens and body fluids are considered potentially infectious and therefore additional precautions should be used for all specimens at all times.

All specimens referred to Nova Scotia Health-Central Zone from outside sources should be packaged and transported to the laboratory under conditions that comply with Workplace Hazardous Materials Information System (WHMIS) and Transportation of Dangerous Goods (TDG) Regulations. The TDG in its Regulations has listed organisms/diseases for which special packaging and labeling must be applied (ex: infectious substances).

All specimens should be properly sealed prior to being transported. Leaking containers pose a health hazard. Do not submit needles attached to syringes.

Nova Scotia Health adheres to the following:

- WHMIS Act and Regulations
- TDG Act and Regulations
PLM Laboratory Test Catalogue

Nova Scotia Health - Central Zone - Laboratory Test Catalogue

For information on laboratory tests not listed in this catalogue please contact Laboratory Reporting and Inquiry at (902) 473-2266.

🔥 Indicates inpatient specimens may be collected in a small volume (2.0 mL) tube. Where applicable, please refer to the Tube/Specimen information for the tube type required.

17 Beta Estradiol  
see Estradiol

Division: Clinical Chemistry – Core

50 % Correction  
see PT 50% Mix or PTT 50% Mix

Division: Hematopathology – Coagulation

11-Deoxycortisol Serum Compound “S”

Tube/Specimen: Gold Stoppered 5.0 mL SST

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. Freeze at once. Send copy of requisition.

LIS Mnemonic: 11-Deoxy

1, 25 Dihydroxycholecalciferol  
see Vitamin D (1, 25-Dihydroxy) Level

Referred Out: In-Common Laboratories

10, 11 Epoxide  
see Carbamazepine-10, 11 Epoxide

Referred Out: In-Common Laboratories

72 hour Fecal Fat  
see Fat, Fecal

Referred Out: In-Common Laboratories

5HIAA, 24-Hour Urine

Tube/Specimen: 24-hour urine collected in a container with 25 mL 6N HCL.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 10 mL urine aliquot of well-mixed collection. The patient must have a diet free of avocados, bananas, tomatoes, plums, eggplant, hickory nuts, pineapple and mollusks for 2 days prior to

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21 Hydroxylase  
see Adrenal Antibody

17 Hydroxyprogesterone (17 Alpha Hydroxyprogesterone)

16S

18S  
see Mycology (18S)

AAA  
see Adrenal Antibody

AAT  
see Alpha-1-Anti-Trypsin

and during collection. Patients should be off all medications for 3 days if possible. Record Total Volume of 24 hour urine on both the aliquot and the requisition. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Send copy of requisition.

Stability: 2 to 8°C (preferred) for 1 month and frozen for 90 days.

LIS Mnemonic: 5HIAA

Refer to Appendix A for pH adjustment instructions.

Specimen may be thawed and refrozen once. Send copy of requisition.

LIS Mnemonic: 17OH Prog

Tube/Specimen: Gold Stoppered 5.0 mL SST

Referred Out: In-Common Laboratories

Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. Freeze at once.

Comments: Specimens generally require prior testing by culture with a negative result. Bacterial isolates that grew from a clinical specimen but were not able to be identified may be submitted.

Shipping: Amies swabs are stored at 4°C, fluids/tissues may be stored at 4°C for up to 24 hours then freeze at -20°C.

LIS Mnemonic: E 16S

Refer to Appendix A for pH adjustment instructions.

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ABL kinase domain mutation  
see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

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**ABO Antibody Titre**

Tube/Specimen: Lavender Stoppered 6.0 mL EDTA x 2 tubes (BD# 367863)
Requisition: CD0001_05_2019
Division: Transfusion Medicine
Instructions: Indicate on requisition if patient is undergoing pheresis and whether pre or post.
Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection
Alternate Names: Anti A/Anti B Titre
Isohemagglutinin Titre

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**ABO Group and Rh Type**

Tube/Specimen: Lavender stoppered 6.0 mL EDTA (BD# 367863)
Requisition: CD0001_05_2019
Division: Transfusion Medicine
Instructions: For medical purposes only
Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection
Note: Specimens for pre and post-natal investigation are sent to IWK Health Centre.
Alternate Names: Blood Group and Rh Type
Group and Type

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**Absolute Neutrophil Count**

Division: Hematopathology – Core
Alternate Names: ANC

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**AC Blood Sugar**  
see Glucose AC, Plasma

Division: Clinical Chemistry - Core

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**ACA**  
see Anti-Cardiac Muscle Antibody

Division: Immunopathology

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**ACE**  
see Angiotensin Converting Enzyme, Plasma

Division: Clinical Chemistry - Core

**Version: 162.0 Current**
**Effective Date: 1/16/2024**
Page 9 of 239

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Acetaminophen

Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Division: Clinical Chemistry - Core
Alternate Names: Tylenol
LIS Mnemonic: ACET

Acetylcholine Receptor Antibodies (Do not confuse with Ganglionic Acetylcholine Receptor Antibody)

Tube/Specimen: Gold Stoppered 5.0 mL SST
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. Freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
LIS Mnemonic: ACRAB

Acetylcholinesterase, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Alternate Names: Cholinesterase Pseudo Cholinesterase
LIS Mnemonic: CHE

Acetylsalicylic Acid see Salicylates

Division: Clinical Chemistry - Core

Acid Mucopolysaccharide Screen see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

ACMA see Anti-Cardiac Muscle Antibody

Division: Immunopathology

ACTH

Tube/Specimen: Plastic Lavender Stoppered (EDTA) 4mL on ice
Acute Intermittent Porphyria gene mutation

**Tube/Specimen:** 4.0 mL EDTA Lavender stoppered tube
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. Alternatively, send fixed tissue in paraffin block.
- DNA: Stability – 3 months at 4°C or frozen.

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:** Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- AIP gene
- PBGD gene
- Porphyria gene mutation
- HMBS
- Hydroxymethylbilane Synthase gene

**LIS Mnemonic:** PBGD gene

Adams 13 Genetics Mutation

**Adams 13 Test Activity**
(Do not confuse with Adams 13 Genetics Mutation Testing)

**Tube/Specimen:** Two 4.5 mL Sodium Citrate (light blue)

**Referred Out:** Mayo Medical Laboratories

**Instructions:** Send to Esoteric Coagulation Lab for processing.

**Comment:** Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.

**LIS Mnemonic:** MISC HEM
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Adenovirus
Tube/Specimen: Swabs collected in UTM, Urine collected in dry sterile container, stool collected in dry sterile container.
Requisition: CD0432/CD0433
Division: Virology-Immunology
Shipping: Store at 2 to 8°C for up to 3 days. If longer freeze and ship frozen.
LIS Mnemonic: E AD
E RAN (for stool, tested along with norovirus and rotavirus)

ADH see Copeptin
ADH (Anti-Diuretic Hormone) testing is no longer available at the QEII laboratory or any of the referral laboratories. Please refer to Copeptin testing as a surrogate for ADH.

Adrenal Antibody
Tube/Specimen: Gold Stoppered 5.0 mL SST
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot at least 1.0 mL serum into plastic vial. Freeze at once. Send copy of requisition.
LIS Mnemonic: ADRAB

Adrenaline see Catecholamines, Total Plasma
Referred Out: In-Common Laboratories

Adrenocorticotropic Hormone see ACTH
Division: Clinical Chemistry - Core

AEMA see Endomysial Antibody
Division: Immunopathology

AF4-MLL gene fusion
Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C
Bone Marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen
RNA: Stability – 3 months frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics

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Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Translocation (4; 11) t(4;11)

LIS Mnemonic: 2LAVDNA

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### AFP

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Requisition:** CD0002  
**Division:** Clinical Chemistry – Core  
**Shipping:** Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send 1.0 mL frozen serum, if longer.  
**Alternate Names:** Alpha Fetoprotein  
**LIS Mnemonic:** AFP

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**Aids Test**  
**Division:** Virology-Immunology

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**ALA, random urine**  
**Referred Out:** In-Common Laboratories

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**ALA Dehydratase**  
**Referred Out:** In-Common Laboratories

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**Alanine Aminotransferase, Plasma**  
**Division:** Clinical Chemistry - Core

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**Albumin, Fluid**  
**Tube/Specimen:** 10.0 mL Body Fluid collected in sterile plastic screw top tubes  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Shipping:** If sending specimen from outside QEII HSC, transport at room temperature.  
**LIS Mnemonic:** BF ALB

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**Albumin, Plasma**
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**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation  
**Requisition:** CD0002  
**Division:** Clinical Chemistry – Core  
**LIS Mnemonic:** ALB

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**Albumin, Random Urine or 24-Hour Urine**

**Tube/Specimen:** Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection in a plain container.  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Instructions:** Specimen required: 4 mL urine aliquot from well-mixed collection. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Record the Total Volume of the 24-hour urine on both the specimen aliquot and the requisition.  
**Stability:** Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 14 days.  
**Alternate Names:** U ACR  
Albumin/Creatinine Ratio  
Microalbumin, Urine  
**LIS Mnemonics:** U ACR  
U24 ALB

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**Alcohol, Serum**

**Tube/Specimen:** Plain Red Tube 6 or 10 mL  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Instructions:** Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations.  
**Alternate Names:** Ethanol  
Ethyl Alcohol  
ETOH  
**LIS Mnemonic:** ALC

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**Aldosterone/Renin Activity Ratio, Plasma**

**Tube/Specimen:** Two lavender topped EDTA tubes. Indicate on requisition patient’s position during collection; upright or lying down (supine).  
**Referred Out:** In-Common Laboratories  
**Instructions:** Centrifuge at room temperature within 4 hours of collection; aliquot two 1.0 mL quantities of plasma and freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals. As of July 19, 2022 all Aldosterone and/or Renin requests will be ordered as Aldosterone/Renin Activity Ratio. Send copy of requisition.  
**Stability:** Room temperature for 24 hours, 2 to 8°C for 24 hours and frozen for 28 days.
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Aldosterone, 24-Hour Urine

Tube/Specimen: 24-hour urine collected in plain 24 hour urine bottle
Referred Out: In-Common Laboratories
Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Record Total Volume of the 24-hour urine on both the aliquot and requisition. Identify drugs administered within 2 weeks as some drugs have a low cross-reactivity in this assay.
Comments: Samples with Boric Acid are acceptable. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
Stability: Room temperature for 2 days, 2 to 8°C (preferred) for 10 days and frozen for 3 weeks.
LIS Mnemonic: ALDOS U

ALK see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

ALK-NPM gene fusion

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen
RNA: Stability – 3 months frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
Alternate Names: Translocation (2;5) t(2;5)

ALK PHOS see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry – Core

Alkaline Phosphatase, Bone see Bone Alkaline Phosphatase

Referred Out: Mayo Medical Laboratories
Alkaline Phosphatase, Isoenzyme
(Do not confuse with Bone Alkaline Phosphatase)

**Tube/Specimen:** One gold topped SST tubes

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge and aliquot 1.0 mL serum into a plastic vial. **Freeze.**
Do not accession for non-Nova Scotia Health Central Zone Hospitals.
Send copy of requisition.

**LIS Mnemonic:** ALPISO

---

**Alkaline Phosphatase, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Alternate Names:**
- ALP
- ALK
- ALK PHOS
- Phosphatase, Alkaline

**LIS Mnemonic:** ALP

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**ALP**

**Division:** Clinical Chemistry - Core

---

**Alpha Fetoprotein**

**Division:** Clinical Chemistry - Core

---

**Alpha Galactosidase, Whole Blood**

(Do not confuse with Alpha-Gal IgE)

**Tube/Specimen:** One 6 mL green topped Sodium or Lithium heparin tube, no gel separator
*Collect only Monday to Wednesday before noon.*
*Contact Referred Out at 902-473-7237 before collection.*

**Referred Out:** Hospital for Sick Children, Metabolic Diseases Laboratory

**Instructions:**
- **Do Not Centrifuge.**
- Do not accession for non-Nova Scotia Health Central Zone Hospitals.
- Ship at room temperature same day of collection. **Time Sensitive.**

**LIS Mnemonic:** MISC REF

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**Alpha Thalassemia, DNA Testing**

**Tube/Specimen:** Three lavender topped EDTA tubes

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Referred Out: McMaster University Medical Centre

Instructions: **Do Not Centrifuge.**
Ship at room temperature.

LIS Mnemonic: MISC HEM

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**Alpha Thalassemia Screen**
*Division: Hematopathology - Immunology*

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**Alpha Tocopherol**
*see Vitamin E Level*

Referred Out: In-Common Laboratories

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**Alpha-1-Acid Glycoprotein**
*(Do not confuse with Alpha Glycoprotein Subunit)*

**Tube/Specimen:** Gold topped SST tube

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature. Aliquot 1.0 mL serum into a plastic vial and **freeze**. Send copy of requisition.

**LIS Mnemonic:** A1AGP

---

**Alpha-1-Antitrypsin**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Shipping:** Separate serum within 5 hours of collection. Serum stable for 48 hours at 2 to 8°C. Freeze and send frozen serum, if longer.

**LIS Mnemonic:** AAT

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**Alpha-1-Antitrypsin Mutation Analysis (Genotyping)**
*(Do not confuse with AAT Phenotyping)*

**Collect MONDAY ONLY!!** Notify Referred-out Bench at 902-473-7237 that specimen is being collected.

**Blood Collection:** Patients have been directed to arrive at blood collection during the following times:

- **BRBC:** 7-10 am Monday only
- **Cobequid:** Collected to meet 10 am run Monday only
- **Dartmouth:** Collected to meet 10 am run Monday only
- **HICS:** 7-10 am Monday only
- **SCCS:** 7-10 am Monday only
- **STMB:** Collected to meet 10 am run Monday only
- **VGCS:** 7-10 am Monday only

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**Uncontrolled When Printed**
WLBC: Book appointment 7-9 am Monday only

Tube/Specimen: One 6.0 mL Lavender topped EDTA tube

Referred Out: In-Common Laboratories

Instructions: Send whole blood. Send specimen in original collection tube. 
**Do not freeze.** Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: AAT GENO

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**Alpha-1-Antitrypsin Phenotyping, PI Typing**

Tube/Specimen: Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into a plastic vial; freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: AAT PHE

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**Alpha-2-Anti Plasmin**

Tube/Specimen: 4.5 mL sodium citrate (light blue topped) tube

Referred Out: Hamilton General Hospital

Instructions: Send to Hematology Coagulation Lab for processing.

Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.

LIS Mnemonic: Antiplasmin

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**ALT, Plasma**

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Alanine Aminotransferase SGPT

LIS Mnemonic: ALT

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**Aluminum Level**

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD 368381)

Referred Out: In-Common Laboratories

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\  
Doc#: 19453

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Instructions:  Centrifuge at room temperature. Aliquot 3.0 mL plasma into a plastic transfer vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: Aluminum

AMA  see Anti-Mitochondrial Antibodies
Division: Immunopathology

AMH  see Anti-Mullerian Hormone
Referred Out: Mayo Medical Laboratories

Amikacin Level
Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002A/CD0002B
Division: Microbiology
Instructions: Do not take blood from catheter or from site of injection of the antibiotic. Take Pre blood specimen immediately before dose is administered. Take Post blood specimen 30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

Note: This test will be referred out by the Microbiology lab.
Alternate Names: Aminoglycoside Level
LIS Mnemonic: RO AMIK

Amino Acid Quantitative Plasma
Tube/Specimen: 7.0 mL Lithium heparin (dark green) tube on ice.
Referred Out: IWK Metabolic Lab
Instructions: Patient fasting is preferred. Centrifuge at room temperature immediately or within 4 hours of collection if specimen is kept refrigerated. Aliquot 2.0 mL heparinized plasma into plastic vial. Refrigerate for up to 24 hours. If unable to ship within 24 hours, freeze and ship frozen. Otherwise ship same day with cold pack. Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK Metabolic Lab Sample should be accompanied by a Metabolic Investigation Form completed by the ordering physician.

LIS Mnemonic: AA PL QT

Amino Acid, Quantitative, Random Urine or 24-Hour Urine
Tube/Specimen: Random urine collection must be a mid-stream technique to eliminate bacterial contamination. Timed (12-hour or 24-hour) specimens are also acceptable.
Referred Out: IWK Metabolic Lab
Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection.

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Uncontrolled When Printed
Amino Acid Screen, Qualitative, Random Urine or 24-Hour Urine

Tube/Specimen: Collection must be in a plain container; random using mid-stream technique to eliminate bacterial contamination. Timed 12-hour and 24-hour collections are also acceptable.

Referred Out: IWK Metabolic Lab

Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection.
- Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK Metabolic Lab
- Sample should be accompanied by a Metabolic Investigation Form completed by the ordering physician.

Stability: Room temperature less than 2 days, 2 to 8°C (preferred) for 3 days, frozen indefinitely.

LIS Mnemonic: Miscellaneous Referred-Out

Aminoglycoside Levels see Gentamicin, or Tobramycin, or Vancomycin

Division: Clinical Chemistry - Core

Aminophylline see Theophylline

Division: Clinical Chemistry - Core

Amiodarone Level

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into a plastic transfer vial. Freeze at once.
- To monitor therapy, draw trough specimen prior to next dose.
- Analysis includes Desethylamiodarone.
- Send copy of requisition.

LIS Mnemonic: Amiod Lvl

Amitriptyline Level

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into a plastic transfer vial. Freeze.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
Note: Royal Blue Trace Element SERUM tube (BD #368380) and Lavender topped EDTA plasma are also acceptable. 
Indicate sample type on tube.
Send copy of requisition.

LIS Mnemonic: AMIT

-----------------------------------------------------------------------------------------------------------------------------

AML1-ETO gene fusion

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)  
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4ºC  
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4ºC  
Tissue: Send in saline at 4ºC, or frozen on dry ice. Stability – 12 hours in saline at 4ºC, or 7 days frozen RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4ºC, accompanied by requisition.  
If multiple Molecular Diagnostics are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Translocation (8;21) t (8;21) RUNX1-RUNX1T1

LIS Mnemonic: 2LAVDNA

-----------------------------------------------------------------------------------------------------------------------------

Ammonia, Plasma

Tube/Specimen: 4.0 mL EDTA Lavender topped tube

Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Tube must be filled to capacity.  
Label tube with patient information with waterproof ink, immediately immerse in slurry of ice and water and deliver to Processing area within 20 minutes.  
Centrifuge at 4ºC and aliquot plasma within 30 minutes of collection.  
Plasma aliquot must be kept on ice before analysis.  
Plasma may be stored at 4ºC for up to 2 hours if necessary.  Freeze if unable to immediately analyze.

Shipping: Plasma aliquot is stable for 15 minutes at 15 to 25ºC, 2 hours at 4 to 8ºC and 3 weeks frozen.  
Freeze/thaw once.

LIS Mnemonic: AMMON

-----------------------------------------------------------------------------------------------------------------------------

Amoebiasis

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.

Alternate Names: Amoebic Serum
Hemagglutination

LIS Mnemonic: RO AMOEBA

-----------------------------------------------------------------------------------------------------------------------------

Amoebic Serum  see Amoebiasis - IHA

Division: Virology-Immunology

-----------------------------------------------------------------------------------------------------------------------------

Amylase and CEA, Pancreatic Cyst Fluid

Tube/Specimen: 1 mL Pancreatic Cyst Fluid collected in a sterile plastic screw top container

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: If sending specimen from outside QEII HSC, transport refrigerated. Stable 72 hours refrigerated.

LIS Mnemonic: PCF AMY and CEA
PCF CEA and AMY

-----------------------------------------------------------------------------------------------------------------------------

Amylase, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Diastase

LIS Mnemonic: AMY

-----------------------------------------------------------------------------------------------------------------------------

Amylase, Urine

Tube/Specimen: Timed urine collection (examples: 2-hour, 24-hour)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

Comments: Random collections are only available on pancreatic transplant patients.

Stability: Room temperature 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U AMY T

-----------------------------------------------------------------------------------------------------------------------------

ANA  see Anti-Nuclear Antibody

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Uncontrolled When Printed
Div: Immunopathology

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**Anafranil**

- **Refer Out:** In-Common Laboratories

**Anaplasma**

- **Refer Out:** Hem Microorganism

---

**Anaplasma PCR**

- **Tube/Specimen:** 4.0 mL Lavender topped EDTA tube
- **Requisition:** CD0002A/CD0002B
- **Division:** Virology-Immunology
- **Instructions:** Clinical data should be indicated on the requisition.
- **Note:** This test will be referred out by the laboratory.
- **LIS Mnemonic:** RO ANAPLPCR

---

**Anaplasma Serology**

- **Tube/Specimen:** Gold Stoppered 5.0 mL SST tube
- **Requisition:** CD0002A/CD0002B
- **Division:** Virology-Immunology
- **Instructions:** Clinical data should be indicated on the requisition.
- **Note:** This test will be referred out by the laboratory.
- **LIS Mnemonic:** RO ANAPLSE

---

**ANC**

- **Refer Out:** Absolute Neutrophil Count

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**ANCA**

- **Refer Out:** Vasculitis Panel

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**Androstenedione**

- **Tube/Specimen:** Gold Stoppered 5.0 mL SST
- **Requisition:** CD0002
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PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

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**Anti-AMPA Receptor, Serum or CSF**

**Tube/Specimen:** One Gold topped SST tube or 3.0 mL CSF

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. **Freeze.** Do not accession for non-Nova Scotia Health Central Zone Hospitals

**Stability:** Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

**LIS Mnemonic:** AMPA

**LIS Mnemonic:** AMPA CSF

-------------------------------------------------------------

**Anti-Basement Membrane**

**see Anti-Pemphigoid Antibody**

**Division:** Immunopathology

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**Antibody Screen**

**see Type and Screen (ABO/Rh and Antibody Screen)**

**Division:** Transfusion Medicine

**Alternate Names:** Indirect Antiglobulin Test

**IDAT**

-------------------------------------------------------------

**Anti-Borrelia Antibodies**

**see Lyme Antibodies**

**Division:** Virology-Immunology

-------------------------------------------------------------

**Anti-Cardiac Muscle Antibody**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Immunopathology

**Alternate Names:** ACMA

**ACA**

-------------------------------------------------------------

**Anti-Cardiolipin Ab**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Immunopathology

**Comments:** This is not the same as an antiphospholipid antibody. Anti-Cardiolipin belongs to Anti Phospholipid Family.

**Alternate Names:** Cardio Ab

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**Uncontrolled When Printed**
Cardiolipin Antibodies

LIS Mnemonic: CARD

Anti-CCP

see Anti Cyclic Citrullinated Peptide

Division: Immunopathology

Anti-Centromere Antibody

see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-Centromere B

see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-Chromatin

see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-Cochnlear Ab FORWARD

see F68KD

Referred Out: Mayo Medical Laboratories

Anticyclic Citrullinated Peptide

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Immunopathology

Alternate Names: Anti-CCp
CCP
Cyclic Citrullinated Peptide Antibody

LIS Mnemonic: CCP

Anti-Depressant Level

Physician must specify name of drugs

Anti-Diuretic Hormone (ADH, Vasopressin)

see Copeptin

ADH testing is no longer available at the QEII laboratory or any of the referral laboratories. Please refer to Copeptin testing as a surrogate for ADH.

Anti-DNA Ab

see Anti-Nuclear AB, (ANA)

Division: Immunopathology
Anti-Double Stranded DNA  see Anti-ds DNA

Division: Immunopathology

-----------------------------------------------------------------------------------------------------------------------------

Anti-DPPX (Dipeptidyl aminopeptidase-like 6), Serum or CSF

Tube/Specimen: Gold topped SST tube or 3.0 mL CSF

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.

LIS Mnemonic: DPPX
          DPPX CSF

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Anti-ds DNA  see Anti-Nuclear AB, (ANA)

Division: Immunopathology

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ANTI-ds DNA  see Anti-Nuclear Ab

Division: Immunopathology

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Anti-GABAB Receptor, Serum or CSF

Tube/Specimen: Gold topped SST tube or 3.0 mL CSF

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.

LIS Mnemonic: GABAB
          GABABCSF

-----------------------------------------------------------------------------------------------------------------------------

Anti-GAD

Tube/Specimen: Gold topped SST tube preferred, red topped tube acceptable.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot 1.0 mL of serum into plastic vial. Send copy of requisition.

Stability: 7 days at room temperature, 28 days at 2 to 8ºC or frozen.

LIS Mnemonic: Anti-GAD

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Uncontrolled When Printed
### PLM Laboratory Test Catalogue

<table>
<thead>
<tr>
<th>Test</th>
<th>Reference</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-GBM Ab</td>
<td>see Vasculitis Panel</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Gliadin</td>
<td>see Anti-Tissue Transglutaminase</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Glomerular Basement</td>
<td>see Vasculitis Panel</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-HMGCR Antibodies</td>
<td>see Autoimmune Myopathy/Myositis Profile</td>
<td></td>
</tr>
<tr>
<td>Anti-Hu</td>
<td>see Paraneoplastic Antibodies</td>
<td></td>
</tr>
<tr>
<td>Anti-Hu, CSF</td>
<td>see Paraneoplastic Antibodies</td>
<td></td>
</tr>
<tr>
<td>Anti-Jo-1</td>
<td>see Anti-Nuclear AB, (ANA)</td>
<td></td>
</tr>
<tr>
<td>Anti-LKM</td>
<td>see Liver Kidney Microsomal Antibodies</td>
<td></td>
</tr>
<tr>
<td>Anti-MAG</td>
<td>see Myelin Associated Glycoprotein Antibody</td>
<td></td>
</tr>
<tr>
<td>Anti-MOG</td>
<td>see Neuromyelitis Optica (NMO_IgG)</td>
<td></td>
</tr>
</tbody>
</table>

### Antimicrobial Resistance and Nosocomial Infections (ARNI)
(MRSA, VRE, ESBLs, Acinetobacter, C. difficile, Strep. Pneumoniae)

- **Tube/Specimen:** Isolate, Susceptibility testing
- **Referred Out:** Antimicrobial Resistance and Nosocomial Infections (ARNI)

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*Uncontrolled When Printed*
Instructions: Shipped as Category B.

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**Anti-Microsomal Antibodies**

*see Anti-thyroid Peroxidase Antibodies*

**Division:** Clinical Chemistry – Core

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**Anti-Mitochondrial Ab**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Immunopathology

**Alternate Names:** AMA2

---

**Anti-MPO**

*see Vasculitis Panel*

**Division:** Immunopathology

---

**Anti-Mullerian Hormone**

**Tube/Specimen:** Prior to Collection, patient must contact the Blood Collection Technical Specialist 902-717-8214 for collection arrangements. Plain red topped tube

**Referred Out:** Mayo Medical Laboratories

**Instructions:** Centrifuge at room temperature and aliquot serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals.

**LIS Mnemonic:** AMH

---

**Anti-Mup44/NT5C1**

*see Autoimmune Myopathy/Myositis Profile*

**Referred Out:** In-Common Laboratories

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**Anti-MuSK (Muscle Specific Kinase) Antibody**

**Tube/Specimen:** Gold topped SST tube

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature and aliquot 1.0 mL serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals

**Send copy of requisition.**

**Stability:** 28 days frozen

**LIS Mnemonic:** MUSK

---

**Anti-NDNA**

*see Anti-ds DNA*

---
**Anti-Neutrophil Cytoplasmic Ab** see Vasculitis Panel

Division: Immunopathology

---

**Anti-Nuclear Antibody (ANA)**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Immunopathology

Note: If anti-nuclear ab screen is negative no further test will be reported. If anti-nuclear ab screen is positive the following tests will be reported.

- Anti-ds DNA
- Anti-Chromatin
- Anti-Ribosomal P
- Anti-SS-A/RO
- Anti-SS-B/LA
- Anti-Centromere B
- Anti-Sm
- Anti-Sn/RNP
- Anti-RNP
- Anti-Scl-70
- Anti-JO-1

LIS Mnemonic: ANA

Alternate Names:
- ANF
- Anti-Nuclear Factor
- Nuclear Factor

---

**Anti-Nuclear Factor** see Anti-Nuclear Antibody

Division: Immunopathology

---

**Anti-Pancreatic Islet Cell Antibody**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Immunopathology

Alternate Names:
- APICA
- Islet Cell AB

---

**Anti-Parietal Cell** see Autoantibodies Panel

Referred Out: In-Common Laboratories

---

**Anti-PC** see Autoantibodies Panel

Referred Out: In-Common Laboratories

---

**Anti-Pemphigoid Antibody**

Tube/Specimen: Gold Stoppered 5.0 mL SST
PLM Laboratory Test Catalogue

Requisition: CD0002
Division: Immunopathology
Alternate Names: Anti-Basement Membrane Antibody
Skin Basement Membrane Ab

---

**Anti-Pemphigus Antibodies**

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Immunopathology
Alternate Names: Anti-Basement Membrane Antibody
Skin Basement Membrane Ab

---

**Anti-Phospholipase A2 Receptor (Anti-PLA2R)**

Tube/Specimen: Gold topped SST tube
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
CSF sample acceptable.
Send copy of requisition.
Stability: Refrigerated at 2 to 8 °C for 14 days and frozen >14 days.
LIS Mnemonic: PLA2R

---

**Anti-PLA2R**

see Anti-Phospholipase A2 Receptor

Referred Out: In-Common Laboratories

---

**Anti-Plasmin**

see Alpha-2-Anti-Plasmin

Referred Out: Hamilton Regional Hospital

---

**Anti-Platelet Antibody/Platelet Typing**

Tube/Specimen: Seven 7.0 mL yellow topped ACD tubes or Nine 4.5 mL light blue topped sodium citrate tubes and one 10.0 mL red topped tube.
Referred Out: McMaster University HSC
Instructions: Send to Hematology Coagulation Lab for processing.
LIS Mnemonic: Miscellaneous Hematology

---

**Anti-PR3**

see Vasculitis Panel

Division: Immunopathology

---
PLM Laboratory Test Catalogue

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**Anti-Proteinase 3**  
see Vascularitis Panel

**Division:** Immunopathology

---

**Anti-Retinal Autoantibody**

**Tube/Specimen:** Two Gold topped SST or two Red topped tubes

**Referred Out:** Mayo Medical Laboratories

**Instructions:** Ensure Mayo Ocular Immunology Test Request form is completed by physician. Centrifuge and aliquot 5 mL serum (minimum volume is 3 mL) into a referred out aliquot tube. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

**Stability:** Refrigerated 7 days.

**LIS Mnemonic:** Miscellaneous Referred Out

---

**Anti-Ri**  
see Paraneoplastic Antibodies

**Referred Out:** In-Common Laboratories

---

**Anti-Ri, CSF**  
see Paraneoplastic Antibodies, CSF

**Referred Out:** In-Common Laboratories

---

**Anti-Ribosomal P**  
see Anti-Nuclear AB, (ANA)

**Division:** Immunopathology

---

**Anti-RNP**  
see Anti-Nuclear AB, (ANA)

**Division:** Immunopathology

---

**Anti-Scl-70**  
see Anti-Nuclear AB, (ANA)

**Division:** Immunopathology

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**Anti-Skeletal Muscle Antibody**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Immunopathology

**Alternate Names:** ASKMA

---
<table>
<thead>
<tr>
<th>Test Description</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-Sm</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Sm/RNP</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Sm/A/Ro</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Sm/B/La</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Anti-Streptolysin &quot;O&quot; Titer</td>
<td></td>
</tr>
<tr>
<td>Anti-Striated Muscle Antibody</td>
<td></td>
</tr>
<tr>
<td>Anti-Thrombin (III) (AT)</td>
<td></td>
</tr>
</tbody>
</table>

**Anti-Sm**
- **Division**: Immunopathology
- **Referred Out**: In-Common Laboratories
- **Alternate Names**: ASOT, ASO Titer
- **LIS Mnemonic**: ASOT

**Anti-Sm/RNP**
- **Division**: Immunopathology
- **Referred Out**: In-Common Laboratories
- **Alternate Names**: see Anti-Nuclear AB, (ANA)

**Anti-Sm/A/Ro**
- **Division**: Immunopathology
- **Referred Out**: In-Common Laboratories
- **Alternate Names**: see Anti-Nuclear AB, (ANA)

**Anti-Sm/B/La**
- **Division**: Immunopathology
- **Referred Out**: In-Common Laboratories
- **Alternate Names**: see Anti-Nuclear Ab

**Anti-Streptolysin "O" Titer**
- **Tube/Specimen**: Gold Stoppered 5.0 mL SST
- **Requisition**: CD0002
- **Division**: Clinical Chemistry - Core
- **Shipping**: Separate serum within 5 hours of collection. Serum stable for 48 hours at 2 to 8°C. Freeze and send frozen serum, if longer.
- **Alternate Names**: ASOT, ASO Titer
- **LIS Mnemonic**: ASOT

**Anti-Striated Muscle Antibody**
- **Referred Out**: In-Common Laboratories

**Anti-Thrombin (III) (AT)**
- **Tube/Specimen**: Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
- **Requisition**: CD0002

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PLM Laboratory Test Catalogue

Division: Hematopathology - Coagulation

Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in Polypropylene vials (12x75).

Alternate Names: Anti-Thrombin
Anti-Thrombin Activity
Anti-Thrombin III
Anti-Thrombin III Assay

-----------------------------------------------------------------------------------------------------------------------------

Anti-Thyroglobulin Antibodies

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Nova Scotia Health Central Zone: Anti-Thyroglobulin requests are automatically also assayed for Thyroglobulin and TSH. All other Nova Scotia Health Zones: Anti-Thyroglobulin requests are automatically also assayed for Thyroglobulin.

Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: TAB-TA
Thyroglobulin Antibodies
Thyroid Antibodies-Thyroglobulin

LIS Mnemonic: TG (3 panel test) (High Sensitivity) [for Nova Scotia Health Central Zone]
TG and TGAB referred in (High Sensitivity) [all other Nova Scotia Health Zones]

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Anti-Thyroid Antibodies

see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

-----------------------------------------------------------------------------------------------------------------------------

Anti-Thyroid Peroxidase

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 2 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Anti-Microsomal Antibodies
Anti-Thyroid Antibodies
Anti-TPO
Thyroid Antibodies

LIS Mnemonic: ANTI-TPO
TAB

-----------------------------------------------------------------------------------------------------------------------------

Anti-Thyrotropin Receptor Antibody

see Thyroid Receptor Antibody
### Anti-Tissue Transglutaminase

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Gold Stopped 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002A/CD0002B</td>
</tr>
<tr>
<td>Division:</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>Shipping:</td>
<td>Specimens can only be stored at 2 to 8°C for 7 days, freeze and send frozen serum, if longer.</td>
</tr>
</tbody>
</table>
| Alternate Names: | Anti-TTG  
TTG  
Tissue Transglutaminase  
Celiac Screen/Disease |
| LIS Mnemonic:  | TTG                    |

### Anti-Topoisomerase

see Anti-Nuclear Ab

### Anti-TPO

see Anti-Thyroid Peroxidase Antibodies

### Anti-Xa

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Light Blue Stopped 2.7 mL buffered NA (sodium) citrate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Hematopathology - Coagulation</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Requisition must indicate the type of LMWH the patient is receiving.</td>
</tr>
<tr>
<td>Referrals:</td>
<td>Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>Heparin XA</td>
</tr>
</tbody>
</table>

### Anti-Yo

see Paraneoplastic Antibodies

### Anti-Yo, CSF

see Paraneoplastic Antibodies, CSF
Apolipoprotein A1

Tube/Specimen: Gold Stoppered 5.0 mL SST tube.
Referred Out: In-Common Laboratories
Instructions: Fasting (12 to 14 hours) is recommended, but non-fasting is acceptable. Separate within 2 hours of collection. Aliquot 1.0 mL of serum and freeze. Lavender EDTA plasma is acceptable. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
Stability: Refrigerated 7 days, frozen 90 days.
LIS Mnemonic: APO A1

Apolipoprotein B

Referred Out: Clinical Chemistry - Core
Shipping: Centrifuge within 4 hours of collection.
Stability: Plasma stable 24 hours at room temperature and 3 days at 2 to 8ºC. Frozen serum samples accepted and are stable for 60 days.
Referrals: Frozen plasma will not be accepted.
Alternate Names: APO B
LIS Mnemonic: APO B

ARBO Virus

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition, including specific virus request.
Alternate Names: California Encephalitis, Dengue Virus, Eastern Equine Encephalitis
PLM Laboratory Test Catalogue

Western Equine Encephalitis
Chikungunya Virus
Jamestown Canyon
Snowshoe Hare
Japanese Encephalitis
Powassan
Yellow Fever

LIS Mnemonic: RO ARBO

 Arsine, Random Urine or 24-Hour, Inorganic

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection.
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Avoid seafood consumption for five days prior to collection.
Record Total Volume of the 24-hour urine on both the aliquot and requisition.
Send copy of requisition.

Stability: Room temperature 14 days, refrigerated or frozen for 11 months.

LIS Mnemonic: INARS U
INARSRU

 Arsenic, Whole Blood

Tube/Specimen: Royal Blue topped Trace Element K2 EDTA tube (BD# 368381)

Referred Out: In-Common Laboratories

Instructions: Do Not Centrifuge.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Keep refrigerated.
Send copy of requisition.

LIS Mnemonic: ARS WB

 ASA see Salicylates

Division: Clinical Chemistry - Core

 ASCA see Saccharomyces cer Antibodies

Referred Out: In-Common Laboratories

 Ascorbic Acid Level see Vitamin C

Referred Out: In-Common Laboratories
<table>
<thead>
<tr>
<th>Test Description</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASKMA</td>
<td>Immunopathology</td>
</tr>
<tr>
<td>ASOT</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Aspartate Amino Transferase</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Aspergilosis</td>
<td></td>
</tr>
<tr>
<td>Tube/Specimen: Gold Stoppered 5.0 mL SST</td>
<td></td>
</tr>
<tr>
<td>Requisition: CD0432/CD0433</td>
<td></td>
</tr>
<tr>
<td>Division: Virology-Immunology</td>
<td></td>
</tr>
<tr>
<td>Note: Farmer’s Lung, Pidgeon Serum Test, and Bird Antigen Testing not available.</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic: RO ASPER</td>
<td></td>
</tr>
<tr>
<td>Aspirin</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>AST, Plasma</td>
<td></td>
</tr>
<tr>
<td>Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation</td>
<td></td>
</tr>
<tr>
<td>Requisition: CD0002</td>
<td></td>
</tr>
<tr>
<td>Division: Clinical Chemistry - Core</td>
<td></td>
</tr>
<tr>
<td>Alternate Names: Aspartate Amino Transferase SGOT</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic: AST</td>
<td></td>
</tr>
<tr>
<td>Autoantibodies Panel</td>
<td></td>
</tr>
<tr>
<td>Tube/Specimen: Gold topped SST tube</td>
<td></td>
</tr>
<tr>
<td>Referred Out: In-Common Laboratories</td>
<td></td>
</tr>
<tr>
<td>Instructions: Aliquot serum and freeze.</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic: AUTOAB</td>
<td></td>
</tr>
</tbody>
</table>

**Autoimmune Encephalitis**

*Section:* Management System\PLM\General\PLM Website\General\Test Catalogue

*Doc#:* 19453

*Version:* 162.0 Current

*Effective Date:* 1/16/2024

Page 38 of 239

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**Uncontrolled When Printed**
PLM Laboratory Test Catalogue

Tube/Specimen: One Gold topped SST tube or 3.0 mL CSF

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot at least 1.0 mL of serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

Note: Ordering physician must indicate the individual tests required, example, AMPA, NMDA, DPPX, VGKC or GABAB. Autoimmune Encephalitis panel is not an acceptable order request.

LIS Mnemonic: MISC REF (Only when individual tests not indicated, otherwise order each test with specific orderable)

-----------------------------------------------------------------------------------------------------------------------------

Autoimmune Inflammatory Myopathy see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

-----------------------------------------------------------------------------------------------------------------------------

Autoimmune Liver Disease Profile, Serum

Tube/Specimen: One Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

LIS Mnemonic: AILDP

-----------------------------------------------------------------------------------------------------------------------------

Autoimmune Muscle Disease Profile see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

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Autoimmune Myopathy/Myositis Profile

Tube/Specimen: Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Aliquot at least 1.0 mL of serum. Freeze aliquot. Do not accession for non-Nova Scotia Health Central Zone Hospitals CSF sample acceptable. Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

Alternate Names: Anti-HMGCR Anti-Mup44/NT5C1 Autoimmune Inflammatory Myopathy/Myositis Profile Autoimmune Muscle Disease Profile

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Uncontrolled When Printed
PLM Laboratory Test Catalogue

Muscle Autoimmune Myositis Panel
LIS Mnemonic: MYOSITIS

Autoimmune Retinopathy Panel
see Anti-Retinal Autoantibody
(ARP)
Referred Out: Mayo Medical Laboratories

Autoimmune Thrombocytopenia Purpura
Tube/Specimen: Seven 7.0 mL yellow topped ACD tubes or Nine 4.5 mL light blue topped sodium citrate tubes.
Referred Out: McMaster University HSC
Instructions: Send to Hematology Coagulation Lab for processing.
LIS Mnemonic: Miscellaneous Hematology

Aventyl
see Amitriptyline
Referred Out: In-Common Laboratories

Babesia
see Hem Microorganism
Division: Hematopathology-Microscopy

Babesia PCR
Tube/Specimen: 4.0 mL Lavender topped EDTA tube
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO BABPCR

Babesia Serology
Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
PLM Laboratory Test Catalogue

LIS Memonic: RO BABSER

Bacterial vaginosis/Vulvovaginal candidiasis/Trichomoniasis PCR

Tube/Specimen: Aptima Multitest swabs
Requisition: CD0432/ CD0433
Division: Virology-Immunology
Shipping: Store at 2 to 30°C for up to 30 days
LIS Memonic: BVPAN

Barbiturate Screen

Tube/Specimen: Plain red topped tube
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 3.0 mL of serum into plastic transfer vial. Freeze. Send copy of requisition.
LIS Memonic: BARBS

Bartonella Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Memonic: RO BART

B Cell Counts

Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin
Requisition: CD0002C
Division: Hematopathology - Flow Cytometry
Instructions: Specimens should arrive in the Flow Cytometry lab on the same day of collection, however, must arrive within 24 hours of collection and no later than 14:00 hours on Fridays (or the day before a holiday). The requisition must accompany the specimen to the Flow laboratory.
Shipping: Maintain specimen at room temperature.
Alternate Name: CD19 TESTING
LIS Memonic: CELL SM
B-cell lymphoid clonality

**Tube/Specimen:**
- 4.0 mL EDTA Lavender stoppered tube(s)
- Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
- Alternately, send fixed tissue in paraffin block.
- DNA: Stability – 3 months at 4°C or frozen

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:**
- Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- Ig gene rearrangement
- Ig heavy chain
- Lymphoma protocol

**LIS Mnemonic:** 2LAVDNA

---

**BCL-1**

**see BCL1-IGH gene fusion**

**Division:** Molecular Diagnostics

---

**BCL1-IGH gene fusion**

**Tube/Specimen:**
- 4.0 mL EDTA Lavender stoppered tube(s)
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
- Alternatively, send fixed in paraffin block.
- DNA: Stability – 3 months at 4°C or frozen.

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:**
- Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- BCL-1
- t(11;14)
- Translocation (11;14)
- Cyclin-D1
- PRAD1

**LIS Mnemonic:** 2LAVDNA

---

**BCL-2**

**see BCL2-IGH gene fusion**

---

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**Uncontrolled When Printed**
BCL2-IGH gene fusion

**Tube/Specimen:** 4.0 mL EDTA Lavender stoppered tube(s)
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
- Alternatively, send fixed tissue in paraffin block.
- DNA: Stability – 3 months at 4°C or frozen.

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:** Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- BCL-2
- t(14;18)
- Translocation (14;18)

**LIS Mnemonic:** 2LAVDNA

BCR-ABL gene fusion

**Tube/Specimen:** 4.0 mL EDTA Lavender stoppered tube(s)
- Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen
- RNA: Stability – 3 months frozen

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:** Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- Quantitative BCR/abl
- Philadelphia chromosome
- Translocation (9;22)

**LIS Mnemonic:** 2LAVDNA

BCR-ABL mutation

*(see Next Generation Sequencing-Myeloid Panel)*

(Mutation Analysis of BCR-abl transcripts, ABL Kinase domain mutation)

**Division:** Molecular Diagnostics

B-Ctx

*(see C-Telopeptide)*

**Referred Out:** In-Common Laboratories
Benzodiazepine  
see Clonazepam (Clonazepine)

Referred Out: In-Common Laboratories

---

**Beryllium Lymphocyte Proliferation (BeLPT)**

 Tube/Specimen: Four 10.0 mL Dark Green BD 366480 glass tubes.  
*Notify Referred-out bench at 902-473-7237 prior to collection.*

Referred Out: Oak Ridge Associated Laboratories

Instructions: 
- *Collect Tuesday, Wednesday or Thursday before 11:00 ONLY!*
- *Do Not Centrifuge!*
- Keep at room temperature.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals

LIS Mnemonic: BELPT

---

**Beta-2-Glycoprotein Antibody**

 Tube/Specimen: One Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: 
- Centrifuge at room temperature.
- Aliquot serum into one plastic vial for a minimum of 1.0 mL serum.  
  *Freeze* at once.
- If specimen thaws, it is unsuitable for analysis.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

LIS Mnemonic: B2GLYAB

---

**Beta-2-Microglobulin, Serum**

 Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. *Freeze and send frozen serum, if longer.*

LIS Mnemonic: B2M

---

**Beta-2-Microglobulin, Urine**

 Tube/Specimen: Random urine with pH adjusted to 5.5 to 8.0 within 30 minutes of collection.

Referred Out: In-Common Laboratories

Instructions: 
- Available at QE II VG site Blood Collection only.
- Aliquot and *freeze*.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals

---

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*Uncontrolled When Printed*
PLM Laboratory Test Catalogue

Send copy of requisition.

LIS Mnemonic: B2MG U

---

**Beta-Carotene**

(β-Carotene)

**Refers Out:** In-Common Laboratories

---

**Beta-CrossLaps**

see C-Telopeptide

**Refers Out:** In-Common Laboratories

---

**Beta Hydroxybutyrate**

**Tube/Specimen:** Gold topped SST tube

**Refers Out:** In-Common Laboratories

**Instructions:**
Centrifuge at room temperature.
Aliquot 1.0 mL of serum into plastic transfer vial. Freeze at once.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: BHYB

---

**Beta-Transferrin**

β-Transferrin (includes β1-Transferrin and β2-Transferrin)

**Tube/Specimen:** Fluid specimen; indicate source

**Refers Out:** In-Common Laboratories

**Instructions:** Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: BETATRANS

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**Bethesda (Factor VIII C Inhibitor)**

see Factor VIII C Inhibitor

**Division:** Hematopathology - Coagulation

---

**Bethesda (Factor IX Inhibitor)**

see Factor IX Inhibitor

**Division:** Hematopathology - Coagulation

---

**Bicarbonate, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

---
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Uncontrolled When Printed
**Bilirubin Total, Fluids**

Tube/Specimen: 10.0 mL Body Fluid collected in sterile plastic screw top tubes

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: If sending specimen from outside QEII HSC, transport at room temperature. Transport at room temperature wrapped in tin foil to protect from light.

LIS Mnemonic: BF BILI T

---

**Bilirubin Total, Plasma**

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Total Bilirubin, Total VDB

LIS Mnemonic: BILI T

---

**Bioavailable Testosterone, Plasma/Serum**

Tube/Specimen: 

a) Nova Scotia Health Central Zone collection: Gold Stoppered 5.0 mL SST & Light Green 4.5 mL Lithium heparin and gel for plasma separation

OR

b) Outside of Nova Scotia Health Central Zone collection: Gold Stoppered 5.0 mL SST only.

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Testing includes Bioavailable Testosterone, Testosterone, Albumin and Sex Hormone Binding Globulin.

Shipping: Outside of Nova Scotia Health Central Zone collection: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send two 1.0 mL frozen serum aliquots. **DO NOT SEND FROZEN PLASMA.**

LIS Mnemonic: BA TEST

---

**Biquin Level**  
**see Quinidine Level**

Referred Out: In-Common Laboratories

---

**Blastomycosis**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

The electronic copy that resides on the document control system is the valid document. Any paper document labeled *Uncontrolled* must be verified against the electronic version prior to use.
Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO BLASTO

Blood C&S see Blood Cultures

Blood Cultures

Tube/Specimen: Refer to "Microbiology User's Manual" for collection procedures

Requisition: QE 7125

Division: Microbiology

Comments: Used to detect aerobic and anaerobic bacteria, fungi and mycobacteria.

Alternate Names: Blood C&S
Culture & Sensitivity

LIS Mnemonics:
- Aerobic (and or fungus): M BLDAE
- Anaerobic: M BLDAN
- Aerobic (and or fungus) and Anaerobic: M BLD
- Mycobacterium: M BLDTB

Source: Blood
Body Site/Free text: As indicated

Blood Film, Differential, Manual

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Microscopy

Instructions: Any Differential ordered will have a slide reviewed.

Blood Gases, Arterial

Tube/Specimen: Pre-heparinized Blood Gas syringe at Room Temperature.
- Maximum heparin ratio must be <10 IU/mL blood
- Recommended volume: 1 mL
- Minimum volume: 0.7 mL

Requisition: CD3211_05 – 2022

Division: Clinical Chemistry - Core

Comments: Ensure sample is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (NOT ON ICE) and deliver to Processing Area immediately. The patient’s temperature and whether patient is receiving supplementary oxygen or room air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.
PLM Laboratory Test Catalogue

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 902-473-6545 when specimen is in transport and when it is expected.

Alternate Names: Oxygen Content
Oxygen Saturation
Co-Oximetry

LIS Mnemonic: ABG full panel

Blood Gases, Mixed Venous

Tube/Specimen: Pre-heparinized Blood Gas syringe at Room Temperature.
Maximum heparin ratio must be <10 IU/mL blood
Recommended volume: 1 mL
Minimum volume: 0.7 mL
Note: Mixed VBG Panel is only for samples drawn from the pulmonary artery catheter (PAC) to measure the end result of O2 consumption and delivery.

Requisition: CD3211_05 – 2022
Division: Clinical Chemistry - Core

Comments: Ensure sample is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (NOT ON ICE) and deliver to Processing Area immediately. The patient’s temperature and whether patient is receiving supplementary oxygen or room air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 902-473-6545 when specimen is in transport and when it is expected.

Alternate Names: Oxygen Content
Oxygen Saturation
Co-Oximetry

LIS Mnemonic: MVBG

Blood Gases, Venous Extended

Tube/Specimen: Pre-heparinized Blood Gas syringe at Room Temperature.
Maximum heparin ratio must be <10 IU/mL blood
Recommended volume: 1 mL
Minimum volume: 0.7 mL
Note: Venous blood gases are not available for collection at Nova Scotia Health Outpatient Blood Collection sites.
Note: VBG ExtPnl requests are limited to patients with diabetic ketoacidosis (DKA) or other critical conditions where arterial samples cannot be drawn. If electrolytes, glucose, lactate, hemoglobin, or ionized calcium are required; use the standard test requisition form CD0002A and collect sample(s) as indicated.

Requisition: CD3211_05 – 2022
Division: Clinical Chemistry - Core

Comments: Ensure sample is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (NOT ON ICE) and deliver to Processing Area immediately. The patient’s temperature and whether patient is receiving supplementary oxygen or room air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 902-473-6545 when specimen is in transport and when it is expected.

Alternate Names: Oxygen Content
Oxygen Saturation
Co-Oximetry

LIS Mnemonic: VBG ExtPhl

Blood Gases, Venous Standard

Tube/Specimen: Pre-heparinized Blood Gas syringe at Room Temperature. Maximum heparin ratio must be <10 IU/mL blood
Recommended volume: 1 mL
Minimum volume: 0.7 mL
Note: Venous blood gases are not available for collection at Nova Scotia Health Outpatient Blood Collection sites.

Requisition: CD3211_05 – 2022

Division: Clinical Chemistry - Core

Comments: Ensure sample is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (NOT ON ICE) and deliver to Processing Area immediately. The patient’s temperature and whether patient is receiving supplementary oxygen or room air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 902-473-6545 when specimen is in transport and when it is expected.

Alternate Names: Oxygen Content
Oxygen Saturation
Co-Oximetry

LIS Mnemonic: VBG StdPhl

Blood Group and Rh Type see ABO Group and Rh Type

Division: Transfusion Medicine

Blood Porphyrins see Porphyrin Screen, Plasma

Referred Out: In-Common Laboratories

Blood Sugar see Glucose AC, Plasma

Division: Clinical Chemistry - Core

Body Fluids see specific test for instructions.

Bone Alkaline Phosphatase (Bone Specific Alkaline Phosphatase)

Tube/Specimen: Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL of serum into plastic transfer vial. Freeze at once.

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Doc#: 19453

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Uncontrolled When Printed
Bone Marrow Aspiration- Bedside Collection

Tube/Specimen: See Instructions
Requisition: CD0046
Division: Hematopathology-Microscopy
Instructions: For QEII patients: Phone 902-473-6667 to book a technologist to spread the films (available Mon-Fri 09:00-16:00 hours) and collect requested samples (Flow Cytometry, Molecular Diagnostics or Cytogenetics). Technologist is not available weekends or Holidays unless approved by Hematopathologist. A CBC and manual differential must be collected within 48 hours of the marrow collection.

Bone Marrow Aspiration- EDTA Collection

Please Note: Hematology Clinic and Dartmouth General Hospital are the only sites approved for EDTA collections.
Tube/Specimen: 2.0 mL EDTA tube
Requisition: CD0046
Division: Hematopathology-Microscopy
Instructions: EDTA Marrows must be received in lab by 16:30 (Monday to Friday only, excluding holidays). The Laboratory must be notified when sending an EDTA bone marrow (Phone 902-473-6667). A CBC and manual differential must be collected within 48 hours of the marrow collection.

Bone Marrow Biopsy

Requisition: CD0046
Division: Hematopathology - Microscopy
Instructions: Procedure is done when bone marrow aspiration is booked at 902-473-6667.

Bone Marrow for Cytogenetics

Tube/Specimen: Dark green stoppered containing Sodium Heparin 4 mL
Requisition: CD0046 and IWK Cytogenetics Requisition obtained from 902-428-8336.
Division: Hematopathology-Microscopy
Instructions: QEII patients for this procedure must be booked with Hematopathology at 902-473-6667. Notify IWK Lab at 902-428-8336 in advance when requesting this test.

Bordetella Pertussis Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
PLM Laboratory Test Catalogue

Division: Microbiology-Immunology
LIS Mnemonic: RO BORD

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**Borrelia Antibodies**  
see Lyme Antibodies

Division: Virology-Immunology

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**Borrelia-Lyme**  
see Lyme Antibodies

Division: Virology-Immunology

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**BR**  
see CA 15-3

Division: Clinical Chemistry - Core

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**BRAF**  
see Next Generation Sequencing – Solid Tumor panel

Division: Molecular Diagnostics

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**BRCA 1/2 in ovarian cancer**  
see Somatic BRCA mutation in ovarian tumor

Division: Molecular Diagnostics

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**Breast Cancer Marker**  
see CA 15-3

Division: Clinical Chemistry - Core

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**Brucella Abortus Serology**

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Gold Stoppered 5.0 mL SST</th>
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</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002A/CD0002B</td>
</tr>
<tr>
<td>Division:</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Instructions</td>
<td>Convalescent specimen should be sent 10-14 days after acute specimen with a new requisition.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>RO BRUC</td>
</tr>
</tbody>
</table>

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**Bullous Pemphigoid**  
see Anti-Pemphigoid Antibody

Division: Immunopathology

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**BUN**  
see Urea, Plasma

Division: Clinical Chemistry - Core

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### C0

**see Cyclosporine**

**Division:** Clinical Chemistry - Toxicology

### C1 Esterase Inhibitor

**see C1 Inactivator**

**Division:** Clinical Chemistry - Immunology

### C1 Esterase Inhibitor “Functional”

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Light blue topped Sodium Citrate tube</th>
</tr>
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<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>C1ESTF</td>
</tr>
</tbody>
</table>

### C1 Inactivator

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Plain red topped tube (6 mL) (no serum separator)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Clinical Chemistry - Immunology</td>
</tr>
<tr>
<td>Shipping:</td>
<td>Ensure the specimen is allowed to clot for 30 minutes before centrifuging and removing the serum. Double centrifugation (after serum has been removed from plain red topped tube) is required to prevent red blood cells being present in the specimen. Two aliquot vials should be frozen and sent on dry ice.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>C1 Esterase Inhibitor</td>
</tr>
</tbody>
</table>

### C1Q Complement Component

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Lavender topped K2EDTA tube.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Stability:</td>
<td>4 days at room temperature, 10 days at 2 to 8°C, 29 days frozen.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>C1QL</td>
</tr>
</tbody>
</table>

### C2

**see Cyclosporine**

**Division:** Clinical Chemistry - Toxicology
C282Y  
**see Hemochromatosis**

<table>
<thead>
<tr>
<th>Division</th>
<th>Molecular Diagnostics</th>
</tr>
</thead>
</table>

C3 C4  
**see Complement Serum (C3 C4)**

<table>
<thead>
<tr>
<th>Division</th>
<th>Clinical Chemistry - Core</th>
</tr>
</thead>
</table>

CA  
**see Calcium, Plasma**

<table>
<thead>
<tr>
<th>Division</th>
<th>Clinical Chemistry – Core</th>
</tr>
</thead>
</table>

CA125

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Shipping</td>
<td>Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send 1.0 mL frozen serum.</td>
</tr>
<tr>
<td>Alternate Names</td>
<td>Ovarian Cancer Antigen</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>CA 125</td>
</tr>
</tbody>
</table>

CA15-3

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Shipping</td>
<td>Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.</td>
</tr>
<tr>
<td>Alternate Names</td>
<td>Breast Cancer Marker</td>
</tr>
<tr>
<td></td>
<td>BR</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>CA 15-3</td>
</tr>
</tbody>
</table>

CA 19-9 Level

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry – Core</td>
</tr>
<tr>
<td>Shipping</td>
<td>Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>CA 19-9 Level</td>
</tr>
</tbody>
</table>

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**Uncontrolled When Printed**
**Cadmium Level Whole Blood**

**Tube/Specimen:** 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)

**Referred Out:** In-Common Laboratories

**Instructions:**
- Do Not Centrifuge!
- Refrigerate until shipping.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**LIS Mnemonic:** CAD WB

**Cadmium, Random Urine or 24-Hour Urine**

**Tube/Specimen:** Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Specimen required: 15 mL urine aliquot from a well-mixed collection.
- Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
- Record Total Volume of the 24-hour urine on both the aliquot and the requisition.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Stability:** Room temperature 1 day, 2 to 8°C (preferred) for 3 months and frozen for 1 year.

**LIS Mnemonic:** U CAD 24

**U CAD**

**Caffeine Level**

**Tube/Specimen:** Plain red topped tube

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot 1.0 mL (minimum 0.5 mL) of serum into plastic vial.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Ship refrigerated
- Send copy of requisition.

**LIS Mnemonic:** Caffeine Level

**CAFQ**

**Calcitonin**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST on ice.

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:**
- Specimens for this determination should be collected in chilled tubes, kept on ice and delivered immediately to Laboratory Client Support Centre, 1st floor Mackenzie.
PLM Laboratory Test Catalogue

Shipping: Centrifuge at 4°C within 1 hour of collection. Freeze immediately and send 1.0 ml frozen serum. Thawed specimens are unacceptable.

Stability: Frozen: 60 days

Alternate Names: Thyrocalcitonin

LIS Mnemonic: CALCIT

-----------------------------------------------------------------------------------------------------------------------------

Calcium, Ionized

see Ionized Calcium, Plasma

Division: Clinical Chemistry - Core

-----------------------------------------------------------------------------------------------------------------------------

Calcium, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: CA

LIS Mnemonic: CA

-----------------------------------------------------------------------------------------------------------------------------

Calcium, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL aliquot of pH adjusted and well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.
Refer to Appendix A for pH adjustment instructions.

Comments: Testing includes Urine Creatinine. Calcium/Creatinine ratio will be calculated for random urine specimens.

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U24 CA

U CA

-----------------------------------------------------------------------------------------------------------------------------

Calculus Analysis

Tube/Specimen: State origin of calculus. Submit specimen in a clean container without preservative.

Referred Out: In-Common Laboratories

Instructions: Do not accession for non-Nova Scotia Health Central Zone Hospitals
Ship at room temperature.

LIS Mnemonic: STONE

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Doc#: 19453
Version: 162.0 Current
Effective Date: 1/16/2024
Page 56 of 239

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Uncontrolled When Printed
California Encephalitis  
Division: Virology-Immunology

Calprotectin, Fecal
Tube/Specimen: Collect 10 g of feces/stool in plain screw-capped plastic container. Do not add preservative.
Referred Out: IWK: Central Zone area only
In-Common Laboratories: non-Nova Scotia Health Central Zone Hospitals
Instructions: Freeze sample.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
Stability: IWK specimens: 3 days refrigerated; 30 days frozen.
ICL specimens: 5 days refrigerated; 1 month frozen.
LIS Mnemonic: CALP F

CALR (Calreticulin) Mutation  
Division: Molecular Diagnostics

CAMP  
see Cyclic AMP Urine and Serum

Cancer Associated Retinopathy Panel (CARP)  
see Anti-Retinal Autoantibody
Referred Out: Mayo Medical Laboratories

Carbamazepine-10, 11 Epoxide  
(Do not confuse with Carbamazepine)
Tube/Specimen: Collect one plain red topped tube
Referred Out: In-Common Laboratories
Instructions: Must indicate “Epoxide” on the requisition.
Aliquot 2.0 mL serum. Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: CARBEP

Carbamazepine
Tube/Specimen: Plain Red Tube 6 or 10 mL.
Requisition: CD0002
Blood should be collected just prior to the next dose (trough collection). Specimens should not be collected until the blood concentration is at steady state (3-4 half-lives).

These determinations can be done on micro samples. Send at least 0.2 mL of serum.

Alternate Names: Tegretol
LIS Mnemonic: CARB

---

**Carbon Dioxide, Plasma**

- **Division:** Clinical Chemistry - Core
- **Comments:** See Bicarbonate, Plasma

---

**Carbon Monoxide**

- **Tube/Specimen:** Dark green stoppered, lithium heparinized venous whole blood at Room Temperature. Maximum heparin ratio must be <10 IU/mL blood. Recommended volume: Full tube
- **Requisition:** CD3211_05 – 2022
- **Division:** Clinical Chemistry - Core
- **Comments:** Label tube with patient information in waterproof ink. Place labelled requisition and tube in transport bag (NOT ON ICE) and deliver to Processing Area immediately.
- **Alternate Names:** Carboxyhemoglobin COHb
- **LIS Mnemonic:** COHB

---

**Carboxyhemoglobin**

- **Division:** Clinical Chemistry - Core
- **Comments:** See Carbon Monoxide

---

**Carcinoembryonic Antigen**

- **Division:** Clinical Chemistry – Core
- **Comments:** See CEA

---

**Cardiac Enzymes**

- **Division:** Clinical Chemistry – Core
- **Comments:** See CK, Plasma or Lactic Dehydrogenase, Serum

---

**Cardio Ab**

- **Division:** Immunopathology
- **Comments:** See Anti-Cardiolipin Ab

---

**Cardiolipin Antibodies**

- **Division:** Immunopathology
- **Comments:** See Anti-Cardiolipin Ab
Carnitine Free and Total

Tube/Specimen: Collect one gold topped SST or plain red topped tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
    Aliquot 1.0 mL serum into plastic vial. Freeze at once.
    Send copy of requisition.
LIS Mnemonic: CARN F T

Carotene (Beta-Carotene) (β-Carotene)

Tube/Specimen: Collect two gold topped SST tubes. Wrap in foil to protect from light!
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
    Aliquot 4.0 mL serum into plastic vial. Wrap aliquot in foil to protect from light. Freeze at once.
    Send copy of requisition.
LIS Mnemonic: Carotene

Catecholamines, Total Plasma

Tube/Specimen: Collect two lavender topped EDTA tubes and place on ice.
    Abstaining from tobacco use, drinking caffeinated beverages, and eating for at least 4 hours before the specimen is drawn are recommended by the testing site for best results, however, are not required.
Referred Out: In-Common Laboratories
Instructions: Sample must be centrifuged cold (4°C) and frozen within 1 hour of collection.
    Aliquot minimum 5.0 mL of plasma into plastic vial. Freeze.
    Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
Stability: -20°C for 7 days and -70°C for 6 months.
    Room temperature and refrigerated are not acceptable.
LIS Mnemonic: Cats Plasma

Catecholamine, 24-Hour Urine

Tube/Specimen: 24-hour urine collection, preserved with 25 mL 6N HCL added to the bottle at the start of collection
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: Specimen required: 30 mL urine aliquot from a pH adjusted and well-mixed collection.
    Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
    Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.
    Abstain from medications that affect catecholamine levels for 72 hours prior to collection.
    Refer to Appendix A for pH adjustment instructions.
Stability: Room temperature for 1 day (pH=2 to 4), 2 to 8°C (preferred) for 7 days (pH=2 to 4) and frozen for 2 weeks (pH=2 to 4).

Alternate Names: Urinary Catecholamines

LIS Mnemonic: U24 CATS
U CATS R [IWK Only]

---

**CBC**

Division: Hematopathology - Core

**CBF beta-MYH11 gene fusion**

Division: Molecular Diagnostics

**CCP**

Division: Immunopathology

**CD4 Cells, CD4 Cell Marker**

Division: Hematopathology - Flow Cytometry

**CD19 TESTING**

Division: Hematopathology - Flow Cytometry

**CD34 TESTING**

Division: Hematopathology - HLA

**CD55/59 TESTING**

Division: Hematopathology – Flow Cytometry

---

**CEA**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Carcinoembryonic Antigen

LIS Mnemonic: CEA
CEA and Amylase, Pancreatic Cyst Fluid

Tube/Specimen: 1 mL Pancreatic Cyst Fluid collected in a sterile plastic screw top container
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: If sending specimen from outside QEII HSC, transport refrigerated.
Stability: 72 hours refrigerated
LIS Mnemonic: PCF CEA and AMY
Or
PCF AMY and CEA

Celiac Screen/Disease  see Anti-Tissue Transglutaminase
Division: Immunopathology

CellCept  see Mycophenolate
Division: Clinical Chemistry - Toxicology

Cell-free DNA  see Circulating Tumor DNA
Division: Molecular Diagnostics

Cell Surface Markers  see Leukemia and Lymphoma Screening
Division: Hematopathology-Flow Cytometry

Celontin  see Methotrexate
Division: Clinical Chemistry - Core

Cerebrospinal Fluid

Tube/Specimen: Sterile plastic screw-top tubes
Requisition: QE 7850_12_05
Division: Hematopathology - Core
Instructions: Testing of CSF is conducted in various laboratory disciplines making it desirable for each laboratory to have a separate sample. Therefore, at least three (3) tubes should be collected. The tubes must be clearly numbered in order of collection. All samples are sent to the Hematopathology - Core lab.
Specimens from Patients who are suspect or clinically diagnosed with CJD must follow Nova Scotia Health Central Zone Policy and Procedure # IC 09-003.
Shipping: If quantities are not met, it may not be possible to provide the requested test results.
Amounts Required:
- Lumbar Puncture or Drain Lumbar Puncture- Microbiology: 1.5 mL;
- Clinical Chemistry - Core: 1.0 mL;
- Hematopathology - Core: 1.0 mL;
Ceruloplasmin

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 2 weeks at 2 to 8°C. Freeze and send frozen serum, if longer.
LIS Mnemonic: CERULO

CH50  see Complement CH50

Referred Out: In-Common Laboratories

CHIC-2  see Hypereosinophilic Syndrome

Referred Out: Mayo Cytogenetics Laboratory

Chicken Pox Titre  see Varicella Zoster Immune Status

Division: Virology-Immunology

Chikungunya Virus  see ARBO Virus

Division: Virology-Immunology

Chimerism Analysis for BMT

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen
DNA: Stability – 3 months at 4°C or frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.
Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
Alternate Names: Pre-BMT Donor
Pre-BMT Recipient
Post-BMT
Post-BMT Recipient
STR
Short Tandem Repeats
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Uncontrolled When Printed
**Cholesterol, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.

**Alternate Names:** Cholesterol Screen, Lipid Profile, Lipid Screen, Lipid Testing

**LIS Mnemonic:** CHOL

---

**Cholesterol Crystals**

**Tube/Specimen:** 10.0 mL Body Fluid collected in sterile plastic screw top tubes

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Shipping:** If sending specimen from outside QEII HSC, transport at room temperature.

**LIS Mnemonic:** BF CHOLCRY

---

**Cholesterol Screen**

see **Cholesterol, Plasma**

**Division:** Clinical Chemistry - Core

---

**Cholesterol, HDL**

see **HDL-Cholesterol, Plasma**

**Division:** Clinical Chemistry - Core

---
PLM Laboratory Test Catalogue

---

**Cholesterol, LDL**

see LDL-Cholesterol, Plasma

**Division:** Clinical Chemistry – Core

---

**Cholinesterase**

see Acetylcholinesterase, Plasma

**Division:** Clinical Chemistry – Core

---

**Cholinesterase Phenotyping**

(CHE Phenotyping)

**Tube/SPECIMEN:** Collect one red topped tube. If patient has had surgery, collect specimen at least 24 hours post-surgery.

**REFERRED OUT:** In-Common Laboratories

**INSTRUCTIONS:** Plasma not acceptable.
Centrifuge at room temperature.
Aliquot 2.0 mL of serum into plastic vial. Freeze at once.
Send copy of requisition.

**LIS Mnemonic:** CHE Pheno

---

**Chorionic Gonadotropin Beta- Subunit**

see HCG (Quant), Plasma

**Division:** Clinical Chemistry - Core

---

**Chrithidia Lucillae**

see Anti-Nuclear AB (ANA)

**Division:** Immunopathology

---

**Chromium 24 Hour Urine**

**Tube/SPECIMEN:** Collect in plain 24 hour urine container. Collection date and 24 hour volume must be provided. Avoid seafood consumption for five days prior to collection.

**REFERRED OUT:** In-Common Laboratories

**INSTRUCTIONS:** Record total volume.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Aliquot 13.0 mL of 24 hour urine collection into a transport tube.
Ship at room temperature.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

**LIS Mnemonic:** Miscellaneous Referred-Out

---

**Chromium, Plasma**

**Tube/SPECIMEN:** 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)

**REFERRED OUT:** In-Common Laboratories

---

The electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.
Instructions: Centrifuge within 30 minutes of collection. Aliquot plasma into plastic transfer vial. Store and ship frozen. Results may be falsely elevated if specimen is not separated within 30 minutes of collection and/or hemolysis is present. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

Utilization: Plasma chromium is used for potential nutritional deficiency; whole blood is the preferred sample for monitoring following orthopedic arthroplasty.

Stability: 22 days at room temperature and 14 months at 2 to 8°C or frozen.

LIS Mnemonic: CR P

Chromium, Random Urine

Tube/Specimen: Collect a random urine sample and transfer to a metal-free container. Provide collection date. Indicate “Random”. Avoid seafood consumption for five days prior to collection.

Referred Out: In-Common Laboratories


Stability: 14 days at room temperature and 11 months at 2 to 8°C or frozen.

LIS Mnemonic: CRRU

Chromium, Whole Blood

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)

Referred Out: In-Common Laboratories


Utilization: Used for patients with orthopedic implants made of cobalt-chromium alloys, annual follow-up of levels is recommended for the first five years to assess the function of implants and monitor potential adverse health effects.

Stability: 20 days at room temperature and 14 months at 2 to 8°C or frozen.

LIS Mnemonic: CR WB

Chromogenic Factor IX

see Factor Assay Chromogenic IX

Division: Hematopathology-Coagulation

Chromogranin A

Tube/Specimen: One lavender topped EDTA tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot at least 1.0 mL plasma into a plastic vial.
PLM Laboratory Test Catalogue

Freeze immediately.
Specimen unsuitable if thawed.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: CGA

Chromosomal Analysis

Tube/Specimen: Dark green stoppered containing Sodium Heparin 4 mL
Requisition: IWK Cytogenetics Requisition
Division: Hematopathology - Microscopy
Instructions: Notify IWK Lab at 902-428-8336 in advance when requesting this test or to obtain requisition.

Chromosome Translocation t (11; 14) see bcl-1 Gene fusion
Division: Molecular Diagnostics

Chromosome Translocation t (14; 18) see bcl-2 Gene fusion
Division: Molecular Diagnostics

Chylomicrons, Body Fluid (Pleural Fluid or Peritoneal Fluid)
Tube/Specimen: Minimum 1.0 mL Body Fluid collected in sterile plastic screw top tubes
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Send to the VG lab ASAP. Sample is stable for 24 hours at room temperature and 7 days refrigerated.
LIS Mnemonic: BF CHYLO

Chylomicrons, Plasma
Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation or gold or red topped serum tubes
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Send to the VG lab. Sample is stable for 24 hours at room temperature and 7 days refrigerated.
LIS Mnemonic: CHYLO P

Circulating Tumor DNA
Tube/Specimen: 10 mL Streck Cell-Free DNA BCT black and brown stoppered tube.
Peripheral blood: 2 tubes, minimum volume 7 mL. Stability – 14 days at room temperature or 4ºC.

The electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.
Uncontrolled When Printed
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: To be ordered only by an oncologist. The patient’s sensitizing mutation must be written on the requisition. Blood must be kept at room temperature or at 4°C, accompanied by requisition.
Alternate Names: ctDNA, ctEGFR, T790M, Liquid biopsy, Cell-free DNA
LIS Mnemonic: DNA ct

---

**Citrate, 24-Hour Urine**

Tube/Specimen: 24-hour urine collection in a plain container.
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Patient must follow special diet provided by the Stone Clinic. Record Total Volume of the 24-hour urine on both the aliquot and the requisition.
Stability: Room temperature 6 hours, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.
Alternate Names: Citric Acid
LIS Mnemonic: U24 CIT, U CIT R [IWK samples only]

---

**Citrate for Platelet** see Profile, AutoDiff with Citrate for Platelet

Division: Hematopathology – Core

---

**Citric Acid** see Citrate, Urine

Division: Clinical Chemistry – Core

---

**CK, Plasma**

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry – Core
Alternate Names: Creatine Kinase, CPK, CKMB

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Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Doc#: 19453

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Uncontrolled When Printed
Cardiac Enzymes

LIS Mnemonic: CK

CK isoenzymes (CKMB)

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature
Aliquot at least 0.5 mL serum and freeze.
Send copy of requisition.

LIS Mnemonic: MISC REF

CL  
see Chloride, Plasma

Division: Clinical Chemistry - Core

Clinical Bacteriology Referred Out Isolates: Special Bacteriology  
(Examples: Legionella, Bartonella ID, Bacterial Identifications)

Tube/Specimen: Isolate for identification/typing
Referred Out: National Microbiology Laboratory
Instructions: Shipped as Category B

CLL hypermutation  
see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

CLL MLPA

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s) and one 7.0 mL Lithium Heparin Dark green stoppered tube
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 24 hours at 4°C
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 24 hours at 4°C
DNA: Stability – 3 months at 4°C or frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.
Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

LIS Mnemonic: MLPA

Clobazam
### Clomipramine Level

**Tube/Specimen:** Royal Blue Trace Element SERUM tube (BD368380)

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature and aliquot serum in plastic vial. *Freeze.*

Do not accession for non-Nova Scotia Health Central Zone Hospitals.

Send copy of requisition.

**Note:** Plain red topped tube is acceptable. Lavender topped EDTA plasma is acceptable. Must indicate sample type on tube.

**LIS Mnemonic:** CLOMI

---

### Clonazepam (Clonazepine)

**Tube/Specimen:** Plain red topped tube.

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature. Aliquot 3.0 mL of serum into plastic vial. *Freeze immediately.*

Do not accession for non-Nova Scotia Health Central Zone Hospitals.

Send copy of requisition.

**LIS Mnemonic:** CLONAZ

---

### Clostridium difficile

**Tube/Specimen:** Stool collected in plain sterile container.

**Requisition:** CD0432/CD0433

**Division:** Virology-Immunology

**Instructions:** Formed specimens not acceptable.

**Comments:** C diff antigen test done as a screen; PCR toxin B test used for confirmation. Non-central zone specimens get PCR testing only.
The electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.
PLM Laboratory Test Catalogue

LIS Mnemonic: RO ROSER

CMV Blood Culture see CMV PCR
Division: Virology-Immunology

CMV PCR
Tube/Specimen: One Lavender stoppered 4.0 mL EDTA tube
Requisition: CD0002
Division: Virology-Immunology
Instructions: Store whole blood at 2 to 25°C for no longer than 24 hours. Separate plasma by centrifuging at 3000g for 20 minutes. Separated plasma should be shipped at 2 to 8°C within 7 days.
Alternate Names: Cytomegalovirus Viral Load
CMV Antigen
LIS Mnemonic: CMVPCR

CMV PCR (Non-blood)
Tube/Specimen: Urine collected in dry sterile container /Bronchial wash.
Requisition: CD0432/CD0433
Division: Virology-Immunology
Shipping: Store at 2 to 8°C for up to 3 days. If longer freeze and ship frozen.
Alternate name: Cytomegalovirus PCR
LIS Mnemonic: E CMV

CMV Titre see CMV Antibody Screen
Division: Virology-Immunology

CO2, Plasma see Bicarbonate, plasma
Division: Clinical Chemistry - Core

Coagulation Factor Assays
Tube/Specimen: 2 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition: CD0002
Division: Hematopathology - Coagulation
Comments: The Factors required must be indicated on the requisition.

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\
Doc#: 19453

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Note: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.

Exception: FXIII (Factor 13) is not performed at the QEII. Referring hospitals are to send sample directly to In-Common Laboratories.

---

**Cobalt, Plasma**

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Centrifuge as soon as possible. Aliquot plasma into plastic transfer vial. <strong>Freeze.</strong> Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.</td>
</tr>
<tr>
<td>Stability:</td>
<td>22 days at room temperature and 14 months at 2 to 8°C or frozen.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>COBP</td>
</tr>
</tbody>
</table>

---

**Cobalt, Whole Blood**

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Stability:</td>
<td>22 days at room temperature and 14 months at 2 to 8°C or frozen.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>COB WB</td>
</tr>
</tbody>
</table>

---

**Coccidioidomycosis Serology**

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002A/CD0002B</td>
</tr>
<tr>
<td>Division:</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Clinical data should be indicated on the requisition.</td>
</tr>
<tr>
<td>Note:</td>
<td>For Coccidioidomycoses cultures, see the “Microbiology User’s Manual”. This test will be referred out by the laboratory.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>RO COCCIDIO</td>
</tr>
</tbody>
</table>

---

**COHb**

see Carbon Monoxide
Cold Agglutinin Test

Division: Transfusion Medicine

Cold Agglutinin Titre

Tube/Specimen: One Plain Red topped tube (6 or 10 mL) or one Lavender topped EDTA tube, collected at 37°C

Requisition: CD0001_05_2019

Division: Transfusion Medicine

Instructions: Specimens must remain at 37°C throughout the procedure until they arrive in Transfusion Medicine.

If specimen cannot arrive in the laboratory at 37°C then spin and separate serum or plasma before sending. Serum or plasma must be separated within 24 hours.

Testing is batched and will be performed once per week. If required STAT, please call Transfusion Medicine.

Note: Thermal amplitudes are automatically done when Cold Agglutinin Titre results are greater than 640.

Complement Serum (C3 and C4)

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Indicate on requisition, which Complement is requested.

Shipping: Separate serum as soon as possible. Serum stable for 48 hours at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: C3 C4

LIS Mnemonic:

C3 Complement C3
C3 Complement
C4 Complement C4
C4 Complement
Complement
C3C4
Complement C3C4

Complement CH50

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL serum into a plastic vial. Freeze at once.

Send copy of requisition.

Note: Plasma is NOT suitable for analysis.
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Uncontrolled When Printed
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.
Avoid mineral supplements for 5 days.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

Utilization: Urine copper is used in diagnosis of Wilson’s disease and obstructive liver disease.

Stability: Room temperature 1 day, 2 to 8°C (preferred) for 3 months and frozen for 1 year.

LIS Mnemonic: CU U 24
CU U

Copper, Whole Blood

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)
Referred Out: In-Common Laboratories
Instructions: Do Not Centrifuge. Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

Utilization: Whole blood copper is used for toxicity.

Stability: Room temperature for 22 days, 14 months at 2 to 8°C or frozen.

LIS Mnemonic: CU WB

Coproporphyrin, 24 Hour Urine see Porphyrin Screen, 24 Hour Urine

Referred Out: In-Common Laboratories

Cortisol, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container.
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Stability: Room temperature for 1 day and 2 to 8°C (preferred) or frozen for 7 days.

LIS Mnemonic: U24 CORT

Cortisol, Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Coxiella Burnetii  
**see Q-Fever**

**Division:** Microbiology-Immunology

---

**C-Peptide**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** Patients must be fasting for 8 hours prior to collection. Centrifuge specimen within 90 minutes of collection. Serum needs to be separated from gel separator within maximum 8 hours of collection.

**Shipping:** Centrifuge specimen within 90 minutes of collection and separate serum from gel separator.

**Stability:** Separated serum: 5 days at 2 to 8°C and 90 days at -20°C

**LIS Mnemonic:** CPEP

---

**CPK**  
**see CK, Plasma**

**Division:** Clinical Chemistry - Core

---

**C-Reactive Protein-HS (High Sensitivity), Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry – Core

**Alternate Names:** CRP  
High Sensitive CRP

**LIS Mnemonic:** CRP

---

**Creatine Kinase**  
**see CK, Plasma**

**Division:** Clinical Chemistry - Core

---

**Creatinine Clearance, 24-Hour Urine or Timed Urine**

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PLM Laboratory Test Catalogue

Tube/Specimen: Submit both plasma and urine specimens (no preservative) as follows:
Plasma: Collect blood in Light Green 4.5 mL Lithium heparin and gel for plasma separation within +/- 12 hours of a 24-hour urine collection.

Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Plasma specimen must be collected within 12 hours pre or post 24-hour urine collection.
Specimen required: 4 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Record the duration of collection in hours (ex: 24 or 2 hour) on both the urine aliquot and the requisition.
Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.
Indicate on requisition patient height (centimeters) and weight (kilograms).

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U24 CRCL (SI Units)
U CRCL T (SI Units) (Timed sample only)

Creatinine, Fluids

Tube/Specimen: Submit only one of the following specimens:
Dialysate Fluid: 10.0 mL Dialysate Fluid collected in sterile plastic screw top tubes.
Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes

Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: If sending specimen from outside QEII HSC, transport at room temperature.

LIS Mnemonic: DF CREAT
BF CREAT

Creatinine, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002
Division: Clinical Chemistry - Core

LIS Mnemonic: CREAT

Creatinine, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine (preferred) collection in a plain container.

Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Record Total Volume of 24-hour urine on both the aliquot and the requisition.

Section: Management System\PLM\General\PLM Website\General\Test Catalogue
Doc#: 19453
Version: 162.0 Current
Effective Date: 1/16/2024
Page 78 of 239

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Uncontrolled When Printed
PLM Laboratory Test Catalogue

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U24 CREAT
              U CREAT

Creutzfeldt-Jakob Disease
Tube/Specimen: CSF minimum 1.0 mL
Requisition: CD0432/ CD0433
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO PRION

Crithidia Lucilae  
see Anti-ds DNA
Division: Immunopathology

Crossmatch  
see Type and Screen (ABO/Rh and Antibody Screen)
Division: Transfusion Medicine

CRP, Plasma  
see C-Reactive Protein-HS (High Sensitivity)
Division: Clinical Chemistry - Core

Cryofibrinogen
Tube/Specimen: One 10.0 mL plain red topped tube at 37°C and two lavender topped EDTA tubes at 37°C.
Referred Out: Hamilton General Hospital
Instructions: Send to Esoteric Immunology Lab for processing.
            Keep samples at 37°C during transport.
LIS Mnemonic: MISC HEM

Cryoglobulins at 37°C
Tube/Specimen: 4 Plain Red Tubes (6 mL) or 2 Plain Red tubes (10 mL) collected at 37°C
Requisition: CD0002
Division: Clinical Chemistry – Immunology
Note: This test requires special handling hence is not offered at ESMH or MVMH. Please advise the patient to proceed to TOMH.
Instructions: Collect in pre-warmed tubes kept at 37°C. Maintain at 37°C throughout the procedure and transportation to the laboratory.
Specimen stability at 37°C is a maximum of 4 hours from collection to centrifugation. If transport is greater than 4 hours, tubes should optimally be centrifuged at 37°C, double spun to remove any red cells, and separated within 4 hours. Once separated, transport serum in plastic aliquot tubes at room temperature. Minimum 6mL serum is required.

---

**Cryptococcal Antigen**

*Tube/Specimen:* Cerebrospinal Fluid (CSF) is the preferred specimen. Serum separated from blood collected in a Gold Stoppered 5.0 mL SST tube is an acceptable alternate specimen.

*Requisition:* QE 7125

*Division:* Microbiology

*Comments:* This test is only performed on approval by a Microbiologist at 902-473-6624. Refer to "Microbiology User’s Manual" for collection procedures.

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**CSF Lactate**

*see Lactate, Spinal Fluid*

*Referred Out:* IWK Laboratory

---

**C-Telopeptide**

*(CTX)*

*Tube/Specimen:* Lavender topped EDTA tube. Patient must be fasting for 8 hours! Unknown or Not Fasting status will not be processed.

*Referred Out:* In-Common Laboratories

*Instructions:* Centrifuge at room temperature. Aliquot 1.0 mL of plasma into a plastic vial. **Freeze** at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

*LIS Mnemonic:* CTELO

---

**ctDNA**

*see Circulating Tumor DNA*

*Division:* Molecular Diagnostics

---

**ctEGFR**

*see Circulating Tumor DNA*

*Division:* Molecular Diagnostics

---

**Culture & Sensitivity**

*see Blood Cultures*

*Division:* Microbiology

*Comments:* Refer to "Microbiology User’s Manual" for collection procedures

---

**CYA**

*see Cyclosporine*

*Division:* Clinical Chemistry - Toxicology
Cyanide
(Do not confuse with Thiocyanate)

Tube/Specimen: 4.0 mL lavender topped EDTA tube.
Referred Out: In-Common Laboratories
Instructions: Do Not Centrifuge! Do Not Freeze! Keep refrigerated.
Send specimen in original collection tube.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: CYAN

Cyclic AMP Urine and Serum

Tube/Specimen: Urine and serum are required for testing. Serum must be drawn at time of urine collection.
Gold topped SST tube and random urine sample.
Referred Out: Mayo Medical Laboratories
Instructions: Centrifuge gold topped tube at room temperature.
Aliquot 1.0 mL serum into a plastic vial.
Aliquot 13.0 mL urine.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: cAMP

Cyclosporine

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: The time sample collected should be indicated on the requisition and tubes. Time of last medication should be indicated on the requisition.
Cyclosporine can be ordered as C0 (trough, pre-dose) or C2 (peak, 2 hour post-dose).
Shipping: Mix whole blood, transfer whole blood to a plastic tube. Freeze and send on dry ice.
Alternate Names: Neoral
Sandimmune IV
CYA
Cyclosporine A

Cyclic-Citrullinated Peptide

Division: Immunopathology

see Anti-Cyclic Citrullinated Peptide

Cyclin-D1

Division: Molecular Diagnostics

see BCL1-IGH gene fusion

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Uncontrolled When Printed
Cyclosporine A

Division: Clinical Chemistry - Toxicology

Cystatin C

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot at least 1.0 mL serum into a plastic vial. Freeze at once. Send copy of requisition.
Note: Recollect if sample thaws.
LIS Mnemonic: CYSTC

Cysticercosis

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology - Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

Cystine, Random Urine or 24-Hour Urine

Tube/Specimen: Collection should be a mid-stream technique to minimize bacterial contamination. Timed specimens (12-hour or 24-hour) are accepted.
Referred Out: IWK Metabolic Lab
Instructions: Specimen required: 10 mL urine aliquot from well mixed collection. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to the IWK Metabolic Lab.
Stability: Room temperature for less than 2 hours, 2 to 8°C (preferred) for 3 days and frozen indefinitely.
LIS Mnemonic: U CYSTI

Cytogenetic Testing for IWK

see IWK Cytogenetics Testing
Cytomegalovirus Antibody  see CMV Antibody Screen
Division:  Virology-Immunology

Cytomegalovirus IgM  see CMV Antibody Screen
Division:  Virology-Immunology

Cytomegalovirus Viral Load  see CMV PCR
Division:  Virology-Immunology

Cytotoxic Antibodies  see HLA Antibody Testing
Division:  Hematopathology - Histocompatibility (HLA)

DADE  see PTT Dade
Division:  Hematopathology - Coagulation

DAT  see Direct Antiglobulin Test
Division:  Transfusion Medicine

D-Dimer
Tube/Specimen:  Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition:  CD0002
Division:  Hematopathology - Core
Instructions:  Part of DIC screen
Referrals:  Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

Dehydroepiandrosterone  see DHEA-S
Division:  Clinical Chemistry - Core

Delta 4 Androstenedione  see Androstenedione
Division:  Clinical Chemistry - Core
<table>
<thead>
<tr>
<th>Test</th>
<th>Referred Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dengue Virus</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Depakene</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Desethylamiodarone</td>
<td>Amiodarone Level</td>
</tr>
<tr>
<td>Desipramine</td>
<td>Imipramine Level</td>
</tr>
<tr>
<td>Desmethyldoxepin</td>
<td>Doxepin Level</td>
</tr>
<tr>
<td>Dexamethasone Suppression Test (DST)</td>
<td>Cortisol, Serum</td>
</tr>
<tr>
<td>DHEA-Unconjugated (Dehydroepiandrosterone unconjugated)</td>
<td>Mayo Medical Laboratories</td>
</tr>
<tr>
<td>DHEA-S</td>
<td>Gold Stoppered 5.0 mL SST</td>
</tr>
</tbody>
</table>

**DHEA-Unconjugated (Dehydroepiandrosterone unconjugated)**

- **Tube/Specimen:** Plain red topped tube or gold topped SST tube
- **Referred Out:** Mayo Medical Laboratories
- **Instructions:** Centrifuge at room temperature. Aliquot 1.0 mL of serum into plastic vial. **Freeze** at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
- **Note:** Make sure “unconjugated” is requested on requisition. Stable frozen for only 14 days.
- **LIS Mnemonic:** DHEA UNCON

**DHEA-S**

- **Tube/Specimen:** Gold Stoppered 5.0 mL SST
- **Requisition:** CD0002
PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

Instructions: DHEA-S is a replacement test for urinary 17-Ketosteroids.

Shipping: Separate serum within 5 hours of collection. Serum stable for 8 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Dehydroepiandrosterone Sulphate

LIS Mnemonic: DHEAS

---

DHEAS
(Patients under 11 years old ONLY)

Tube/Specimen: Gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Separate serum within 5 hours of collection. Freeze and send frozen serum. Send copy of requisition.

Stability: Serum stable for 8 days at 2 to 8°C.

LIS Mnemonic: DHEAS

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Dialysate Fluid
see specific test for instructions.

Division: Clinical Chemistry - Core

---

Diastase
see Amylase

Division: Clinical Chemistry - Core

---

DIC Screen
Includes D-Dimer, INR (PT), PTT, Fibrinogen and Thrombin Time

Division: Hematopathology - Core

---

Differential WBC Count
see Profile

Division: Hematopathology - Core

---

Differential, Manual
see Blood Film, Differential, Manual

Division: Hematopathology - Microscopy

---

Digoxin

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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PLM Laboratory Test Catalogue

Instructions: For informative results specimen should be taken just prior to medication, or 8 hours after the drug has been administered.

LIS Mnemonic: DIG

---

**Dihydrohodamine (DHR)**

Tube/Specimen: 5.0 mL green topped Sodium Heparin **AND** 5.0 mL green topped Sodium Heparin for a CONTROL from an unrelated healthy donor. Label the CONTROL as “Normal Control”.

Referred Out: Mayo Medical Laboratories

Instructions: **Do Not Centrifuge!**
- Keep samples ambient.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

Stability: 48 hours

LIS Mnemonic: MISC REF

---

**Dihydrotestosterone (DHT)**

Tube/Specimen: Gold topped SST tube preferred. Lavender topped EDTA tube, Sodium heparin tube and Lithium heparin tubes acceptable.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.
- Aliquot 1.0 mL of serum or plasma into plastic vial.
- Send copy of requisition.

Stability: 7 days at 2 to 8°C and 3 months frozen.

LIS Mnemonic: DHT

---

**Dilantin**  
*see Phenytoin*

Division: Clinical Chemistry - Core

---

**Diphenylhydantoin**  
*see Phenytoin, Free*

Referred Out: In-Common Laboratories

---

**Diphtheria Antitoxin**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.
Note:  This test will be referred out by the laboratory.
LIS Mnemonic:  RO DIPHTH

Direct Antiglobulin Test
Tube/Specimen:  Lavender Stoppered 6.0 mL EDTA (BD# 367863)
Requisition:  CD0001_05_2019
Division:  Transfusion Medicine
Instructions:  Indicate on requisition date and time required.
Comments:  NSHA CL-BP-040 Venipuncture for Blood Specimen Collection
Alternate Names:  DAT Coombs Test

Direct Bilirubin  see Bilirubin Direct, Plasma
Division:  Clinical Chemistry - Core

DLI  see Donor Lymphocyte Infusion
Division:  Hematopathology - Flow Cytometry

Donor Lymphocyte Infusion
Tube/Specimen:  Lavender stoppered 4.0 mL EDTA
Requisition:  CD0002C
Division:  Hematopathology - Flow Cytometry
Instructions:  Specimens must arrive in the Flow Cytometry lab within 24 hours of collection and by 14:00 hours on Friday (or the day before a holiday). The volume of product collected is required on the requisition. The requisition must accompany the specimen to the Flow laboratory.
Shipping:  Maintain specimen at room temperature.
LIS Mnemonic:  T CELL SUB

Dopamine, Urine  see Catecholamines, Urine
Division:  Clinical Chemistry - Toxicology

Doxepin Level
Tube/Specimen:  Royal Blue Trace Element SERUM tube (BD368380)
Referred Out:  In-Common Laboratories
Instructions:  Centrifuge at room temperature.
PLM Laboratory Test Catalogue


Note: Plain red topped (serum) and lavender topped EDTA (plasma) tubes are also acceptable; must indicate specimen type on tube.

LIS Mnemonic: DOX

Drug Levels
(Micro Mycobacteriology)

Tube/Specimen: Plain red topped
Referred Out: Infectious Disease Pharmacokinetics Laboratory
Instructions: Ship as Category B

Drugs of Abuse Screen, Random Urine

Tube/Specimen: Random collection using mid-stream technique to avoid bacterial contamination in a plain container.
Requisition: CD0002
Division: Clinical Chemistry – Toxicology
Instructions: Specimen required: 30 mL urine aliquot from well-mixed collection.
Comments: Testing includes amphetamines, benzodiazepines, quetiapine, cannabinoids, cocaine metabolite, opiates, phencyclidine, and ritalin. This test is done for medical purposes only; it will not be done for pre-employment, work related or legal matters.
Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.
LIS Mnemonic: U DS M

D’Xylose Tolerance Test

Tube/Specimen: Only available at HI Out-patient Blood Collection. Ordering physician must pre-book by calling 902-473-2452. Two gold topped SST tubes; the first to be collected Fasting; the second to be drawn 1 hour post-D-Xylose drink.
Referred Out: In-Common Laboratories
Instructions: Centrifuge and aliquot serum in referred-out transfer vials. Freeze immediately. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.
LIS Mnemonic: DXT DXT F DXT 1

E+ see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

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**E2**

**see** Estradiol

**Division:** Clinical Chemistry - Core

---

**Eastern Equine Encephalitis**

**see ARBO Virus**

**Division:** Virology-Immunology

---

**EB Virus**

**see** Epstein - Barr Virus Antibodies

**Division:** Virology-Immunology

---

**EBV PCR**

**Tube/Specimen:** One Lavender stoppered 4.0 mL EDTA tube.

**Requisition:** CD0002

**Division:** Virology-Immunology

**Instructions:** Store whole blood at 2°C to 25°C for no longer than 24 hours. Separate plasma by centrifuging at 3000g for 20 minutes. Separated plasma should be shipped at 2°C to 8°C within 6 days, if longer freeze at -20°C and ship frozen.

**Note:** This test is reserved for post-transplant patients and those with hematological malignancies only upon request. For infectious mononucleosis testing or pre-transplant EBNA testing refer to Epstein – Barr Virus section below.

**Alternate Names:**
- EBV Viral Load
- Epstein Barr Virus Viral Load
- Epstein Barr Virus PCR

**LIS Mnemonic:** EBVPCR

---

**Echinococcosis**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** QE 7125

**Division:** Virology-Immunology

**Instructions:** Clinical data should be indicated on the requisition.

**Note:** This test will be referred out by the laboratory.

**LIS Mnemonic:** RO ECHINO

---

**eGFR, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core
PLM Laboratory Test Catalogue

Instructions: Age and gender must be included.

Note: eGFR should not be used when plasma creatinine is changing rapidly, in pregnancy, age less than 18, or for drug dosing; and should be interpreted with caution in extremes of body habitus eGFR <60 mL/min/1.73mE2 and/or Albumin to Creatinine Ratio (ACR) ≥ 3 mg/mmol for >3 months are diagnostic criterion for Chronic Kidney Disease (CKD).
For more information, refer to the latest Kidney Disease: Improving Global Outcomes (KDIGO) guidelines.
Reported eGFR is based on the CKD-EPI 2021 equation that does not use a race coefficient.

Alternate Names: Estimated Glomerular Filtration Rate

LIS Mnemonic: eGFR

Ehrlichia see Hem Microorganism

Division: Hematopathology-Microscopy

Ehrlichia PCR

Tube/Specimen: 4.0 mL Lavender topped EDTA tube
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO EHRPCR

Ehrlichia Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO EHRSER

Elastase, Stool see Fecal Elastase

Referred Out: In-Common Laboratories

Electrolytes (Na, K), Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry – Core
Comments: Specimens must be delivered to the laboratory within 2 hours of collection. Testing for Electrolytes include Sodium (Na), Potassium (K).

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: E+
Lytes

LIS Mnemonic: LYTES (NA, K)

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**Electrolytes, Urine**

**Tube/Specimen:** 24-hour urine collection (preferred) or random collection; no preservative; refrigerate during collection.

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** Amount required: 5 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

**Comments:** This test includes Urine NA, Urine K and Urine Cl. Testing on 24 hour specimens includes Urine Creatinine.

**Shipping:** Transport at room temperature.
Record Total Volume on both the specimen aliquot and the requisition

**LIS Mnemonic:** U24 LYTES

---

**Electrophoresis of Protein** see Protein Electrophoresis, Serum

**Division:** Clinical Chemistry - Immunology

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**Emerging Bacterial Pathogens/ Pathogenic Neisseria, Syphilis, and Vaccine Preventable Bacterial Diseases**
(Neisseria meningitides, Neisseria gonorrhoeae, 
Haemophilus influenza, Bordetella)

**Tube/Specimen:** Isolate, Susceptibility Testing, Biotyping, Phenotyping, Legal Case Workup, Serology, Genotyping, Genetic Finger Typing, Molecular Detection

**Referred Out:** National Microbiology Laboratory

**Instructions:** Shipped as Biological Substances Category B

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**ENA Screen** see Anti-nuclear Antibody

**Division:** Immunopathology

**Comments:** Testing includes antibodies to ENA, LA (or SSB), RO (or SSB), RNP, Sm, SCL-70 and JO-

---

**Endomysial Antibody** see Tissue Transglutaminase

**Division:** Immunopathology
### Enteric Diseases Program:
#### Escherichia coli 0157

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>National Microbiology Laboratory</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Shipped as Biological Substances Category A</td>
</tr>
</tbody>
</table>

### Enteric Diseases Program:
#### Listeria monocytogenes

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Isolate, Serotyping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>National Microbiology Laboratory</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Shipped as Biological Substances Category B.</td>
</tr>
</tbody>
</table>

### Enteric Diseases Program:
#### Salmonella species

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Tissue Culture Cytotoxicity Assay, Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>National Microbiology Laboratory</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Shipped as Biological Substances Category B (S. typhi, if isolated, may be sent as a Precautionary Category A)</td>
</tr>
</tbody>
</table>

### Enteric Diseases Program:
#### Shigella species

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Tissue Culture Cytotoxicity Assay, Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>National Microbiology Laboratory</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Shipped as Biological Substances Category B except S. dysenteriae which requires Category A.</td>
</tr>
</tbody>
</table>

### Enterohemorrhagic Ecoli requests

<table>
<thead>
<tr>
<th>Referred Out:</th>
<th>IWK-Microbiology Lab</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instructions:</td>
<td>Shipped as Biological Substance Category B.</td>
</tr>
</tbody>
</table>

### Enterovirus

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>CSF (0.5 mL sterile sample)/Stool/Throat swab/Respiratory specimens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0432/CD0433</td>
</tr>
<tr>
<td>Division:</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Comments:</td>
<td>CSF, IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens require CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting lab.</td>
</tr>
</tbody>
</table>
Eosinophil Count

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology – Core
Alternate Names: Total Eosinophil Count

Eosinophil, Nasal Smear

Tube/Specimen: Nasal smear
Requisition: CD0002
Division: Hematopathology - Microscopy
Instructions: Specimen is sent to Microbiology and prepared on slide; then sent to Microscopy to be stained and viewed.

Eosinophil, Sputum

Tube/Specimen: Collect in polypropylene container with no preservative.
Requisition: CD0002
Division: Hematopathology - Microscopy
Instructions: Specimen is sent to Microbiology and prepared on slide; then sent to Microscopy to be stained and viewed.

Eosinophil, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection in a plain container.
Requisition: CD0002
Division: Hematopathology – Microscopy
Instructions: Specimen required: 10 mL urine aliquot from a well-mixed collection. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Stability: Room temperature 2 hours and 2 to 8°C (preferred) for 24 hours.
LIS Mnemonic: Eo US

Epinephrine  
see Catecholamines, Total Plasma
Epinephrine, Urine  
*see* Catecholamines, Urine

Epival  
*see* Valproate

EPO  
*see* Erythropoietin

Epoxide Level 10, 11  
*see* Carbamazepine-10, 11 Epoxide

**Epstein - Barr Virus**

- Tube/Specimen: Gold Stoppered 5.0 mL SST
- Requisition: CD0002A/CD0002B
- Division: Virology-Immunology
- Comments: Clinical data should be indicated on the requisition.
- Note: EBNA IgG testing will be performed on all EBV serology requests. VCA IgM and IgG testing will only be performed on EBNA negative specimens.
- LIS Mnemonic: EBNA

**Erythropoietin**

- Tube/Specimen: Gold Stoppered 5.0 mL SST
- Requisition: CD0002
- Division: Clinical Chemistry - Core
- Instructions: Since diurnal variation of erythropoietin exists, it is important to collect the samples at a consistent time of day. Morning samples taken between 7:30 am and 12:00 noon have been recommended. High circulating biotin levels may reduce results by more than 10% of the true value. Patients must discontinue any biotin supplement at least 3 days prior to testing.
- Comments: EDTA tubes are unacceptable.
- Shipping: Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.
- Alternate Names: EPO
ESR

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Lavender Stoppered 4.0 mL EDTA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Hematopathology - Core</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Test must be performed within 10 hours of collection. Unacceptable if specimen more than 10 hours old.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>Sedimentation Rate</td>
</tr>
</tbody>
</table>

Estradiol

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Shipping:</td>
<td>Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>E2</td>
</tr>
<tr>
<td></td>
<td>17 Beta Estradiol</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>E2</td>
</tr>
</tbody>
</table>

Ethanol

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Plain red topped tube.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Centrifuge at room temperature. Aliquot 1.0 mL of serum into plastic vial. Send copy of requisition.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>Ethosux</td>
</tr>
</tbody>
</table>

Ethyl Alcohol

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Plain Red Tube 6 or 10 mL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>Common Laboratories</td>
</tr>
<tr>
<td>Instructions:</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>Ethosux</td>
</tr>
</tbody>
</table>

Ethylene Glycol

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Plain Red Tube 6 or 10 mL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>Common Laboratories</td>
</tr>
<tr>
<td>Instructions:</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>Ethosux</td>
</tr>
</tbody>
</table>
PLM Laboratory Test Catalogue

Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Comments: Analysis includes quantitation of Glycolic Acid, the primary metabolite of Ethylene Glycol.
Alternate Names: Glycolic Acid
LIS Mnemonic: ETH GLY

ETOH see Alcohol, Serum
Division: Clinical Chemistry - Core

Extractable-Nuclear Antibodies see Anti-nuclear Antibody
Division: Immunopathology

F68KD (hsp-70)
Tube/Specimen: One gold topped SST tube
Referred Out: Mayo Medical Laboratories
Instructions: Centrifuge at room temperature.
Aliquot at least 2.0 mL serum and freeze.
Send copy of requisition.
Stability: Ambient – 48 hours; Refrigerated – 5 days; Frozen – 1 year
LIS Mnemonic: F68KD

Facioscapulohumeral Dystrophy (FSHD) DNA Testing
Tube/Specimen: Two 10.0 mL Lavender topped EDTA tubes. Do not collect on Thursday or Friday
Referred Out: Molecular Genetics Diagnostic Laboratory
Instructions: Keep samples at room temperature.
Send Children’s Hospital of Eastern Ontario (CHEO) Form and Consent Form with samples.
LIS Mnemonic: Miscellaneous Referred-Out

Factor Assays II, V, VII, X, VIIIIC, IX, XI, XII
Tube/Specimen: Single assay - 1 Light Blue Stoppered Tube 2.7 mL, must be a full draw.
Multiple assays - 3 Light Blue Stoppered Tubes 2.7 mL, must be a full draw.
Requisition: CD0002
Division: Hematopathology - Coagulation
Comments: Indicate Factors required on the requisition.
Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma for a single factor and add one aliquot for every additional factor ordered (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

Exception: FXIII (Factor 13) is not performed at the QEII. Referring hospitals are to send sample directly to In-Common Laboratories.

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**Factor Assay Chromogenic VIII**

**Tube/Specimen:** Single assay - 1 Light Blue Stoppered Tube 2.7 mL, must be a full draw.

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Comments:** Indicate Chromogenic Factor FVIII required on the requisition.

**Referrals:** Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

**Instruction:** Chromogenic FVIII is only available to be ordered by Hematologists—all other orders will be cancelled.

**Alternate Names:** Chrom Factor VIII

Chrom FVIII

**LIS Mnemonic:** Chrom FVIII

---

**Factor Assay Chromogenic IX**

**Tube/Specimen:** Single assay - 1 Light Blue Stoppered Tube 2.7 mL, must be a full draw.

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Comments:** Indicate Chromogenic Factor IX required on the requisition.

**Referrals:** Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

**Instruction:** Chromogenic FIX is only available to be ordered by Hematologists—all other orders will be cancelled.

**LIS Mnemonic:** Chrom FIX

---

**Factor V Leiden Mutation**

**Tube/Specimen:**

- 4.0 mL EDTA Lavender stoppered - One tube sufficient for both FV and PT mutation
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability - 14 days at 4°C.
- Bone marrow: 1 tube, minimum volume 1 mL. Stability - 14 days at 4°C.
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C or 7 days frozen.
- DNA: Stability – 3 months at 4°C or frozen.

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:** Blood/bone marrow must be kept at 4°C, accompanied by requisition.

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
As per hereditary thrombophilia best practice testing guidelines, Factor V Leiden gene mutation testing is restricted to hematologists, medical geneticists, neurologists, and general internists for both adult and pediatric populations.

Alternate Names: FV gene mutation
FV G1691 A mutation

LIS Mnemonic: 2LAVDNA

---

**Factor VIII C Inhibitor**

**Tube/Specimen:** 2 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Referrals:** Send 4 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.

**Alternate Names:** Bethesda Assay
Bethesda Inhibitor
Bethesda (Factor VIII C)

---

**Factor VIII Chromogenic Inhibitor**

**Tube/Specimen:** 2 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw.

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Comments:** Indicate Chromogenic Factor FVIII Inhibitor required on the requisition.

**Referrals:** Send 4 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.

**Instruction:** FVIII Chromogenic Inhibitor is only available to be ordered by Hematologists-all other orders will be cancelled.

**Alternate Names:** Chrom VIII Inhib
Chromogenic Bethesda (Factor 8) Inhibitor
Chromogenic Bethesda (Factor VIII) Assay
Chromogenic Bethesda (Factor VIII) Inhibitor
Chromogenic Coagulation Bethesda Assay
Chromogenic Bethesda (Factor 8)
Chromogenic Bethesda (Factor VIII C)

**LIS Mnemonic:** Chrom VIII Inhibitor

---

**Factor IX Inhibitor**

**Tube/Specimen:** 2 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Referrals:** Send 4 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.
Alternate Names: Bethesda (Factor IX) Assay
Bethesda (Factor IX) Inhibitor

Factor VIII Mutation
see Hemophilia Carrier Testing
Division: Molecular Diagnostics

Factor XIII Antigen or Activity
Tube/Specimen: 4.5 mL Light Blue topped Sodium Citrate tube
Referred Out: Hamilton General Hospital
Instructions: Send to Hematopathology Coagulation Lab for processing.
LIS Mnemonic: Miscellaneous Hematology

Factor XIII Assay
Tube/Specimen: 4.5 mL Light Blue topped Sodium Citrate tube
Referred Out: Hamilton General Hospital (Nova Scotia Health Central Zone specimens only, see comment)
Instructions: Send to Hematopathology Coagulation Lab for processing.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
LIS Mnemonic: FXIII or Factor XIII Assay
Comment: FXIII (Factor 13) is not performed at the QEII. Referring hospitals, outside of Central Zone, are to send specimens directly to Hamilton General Hospital.

Farmer's Lung
see Aspergillosis/Farmer's Lung
Division: Virology-Immunology

Fascioliasis – IFA
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

Fat, Fecal
see Fecal Fat 72 Hour
PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

Fe
Division: Clinical Chemistry - Core

see Iron, Plasma

FE, Liver
Referred Out: In-Common Laboratories

see Iron Level Liver RO

Fecal Calprotectin
Referred Out: In-Common Laboratories

see Calprotectin, Fecal

Fecal Chloride
Tube/Specimen: 5.0 mL Random stool sample in naturally liquid form. Formed stool is not acceptable.

Instructions:
Store and send cold.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic:
Fecal Chloride
ST CL

Fecal Elastase
Tube/Specimen: 5.0g Random stool sample

Instructions:
Send frozen.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic:
ELAS F

Fecal Electrolytes
(Includes Sodium and Potassium-may order individually)

Tube/Specimen: 5.0 mL Random stool sample in naturally liquid form. Formed stool is not acceptable.

Instructions:
Send at room temperature.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic:
Fecal electrolytes
Fecal Fat 72 Hr

Tube/Specimen: Timed stool sample MUST be collected in approved containers. Containers such as metal cans are not acceptable. Approved stool collection containers may be obtained by calling the Referred-Out and Research Bench at 902-473-7237. 72 hour samples are preferred, but non-72 hour samples are accepted; actual time MUST be indicated.

Referred Out: In-Common Laboratories

Instructions: Do not accession for non-Nova Scotia Health Central Zone Hospitals

Stable refrigerated for 180 days.

Send copy of requisition.

LIS Mnemonic: ST FAT

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Fecal Osmolality  

see Osmolality Fecal

Referred Out: In-Common Laboratories

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Ferritin

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.

LIS Mnemonic: FER

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Fetal Hemoglobin

(Hgb F)

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology – Immunology

Alternate Names: Hemoglobin F

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Fibrinogen

Tube/Specimen: Light Blue Stoppered 2.7 mL buffered sodium citrate, must be a full draw

Requisition: CD0002

Division: Hematopathology - Core

Instructions: Part of DIC Screen

Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.
Filaria – IFA

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO FILARIA

FIP1P1/PDGFRα see Hypereosinophilic Syndrome

Referred Out: Mayo Medical Laboratories

Fitzgerald Factor (HMWK)

Tube/Specimen: 4.5 mL light blue topped Sodium Citrate tube.
Referred Out: Hamilton General Hospital
Instructions: Send to Hematopathology Coagulation Lab for processing.
Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.
LIS Mnemonic: Fitzgerald

FK 506

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: Trough whole blood should be collected before medication. Specimen should be in Lab by 1200 PM to be done the same day.
The time sample collected should be indicated on the requisition and tubes. Time of last medication should be indicated on the requisition.
Comments: Pre-dose (trough) specimen is required.
Shipping: Mix whole blood, transfer whole blood to a plastic tube. Freeze and send on dry ice.
Note: This determination can be done on micro samples when necessary.
Alternate Names: Tacrolimus Tacro
LIS Mnemonic: TACRO

Fletcher Factor (Prekallikrein)
PLM Laboratory Test Catalogue

Tube/Specimen: 4.5 mL light blue topped Sodium Citrate tube.
Referred Out: Hamilton General Hospital
Instructions: Send to Hematopathology Coagulation Lab for processing.
Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.
LIS Mnemonic: Fletcher

Flow Crossmatch
Referred Out: Immunology and Genetics Laboratory

Flow Cytometry
Division: Hematopathology – Flow Cytometry

FLT3/NPM1
Tube/Specimen: 4.0 mL EDTA Lavender stoppered Tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
DNA: Stability – 3 months at 4°C or frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.
Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
LIS Mnemonic: 2LAVDNA

Fluoxetine Level
Tube/Specimen: Plain red topped tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot serum in plastic vial. Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
Note: Royal Blue Trace Element SERUM tube (BD368380) and Lavender topped EDTA plasma tubes are also acceptable. Must indicate sample type on tube.
LIS Mnemonic: FLUOX
Folate, Red Cell

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Referred Out: In-Common Laboratories
Instructions: Collect two EDTA lavender tubes: one for RBC Folate at ICL, one for Hematocrit (HCT) in-house. If CBC has been collected on the same collection, HCT value will be included in the CBC result.
Note: Ensure a separate specimen for Hematocrit (or CBC) has been sent for testing before freezing the RBC Folate tube.
Note: Ensure HCT value is obtained before shipping specimen to ICL.
Ship frozen.
Stability: Ambient 2 hours, Refrigerated 72 hours, Frozen 1 month.
Alternate Names: RBC Folate
Red Blood Cell Folate
LIS Mnemonic: RBC FOL

Folate, Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Can be done on the same tube as Vitamin B12 and Ferritin.
Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: Serum Folate
Folic Acid
LIS Mnemonic: FOL

Folic Acid

see Folate, Serum
Division: Clinical Chemistry - Core

Follicle Stimulating Hormone

see FSH
Division: Clinical Chemistry - Core

Formic Acid

see Methanol
Division: Clinical Chemistry - Toxicology

FRDIL

see Phenytoin, Free
Referred Out: In-Common Laboratories
### Free Erythrocyte Protoporphyrins
- **See**: Protoporphyrin, Erythrocyte
- **Referred Out**: In-Common Laboratories

### Free Phenytoin
- **See**: Phenytoin, Free
- **Referred Out**: In-Common Laboratories

### Free Prostate Specific Antigen
- **See**: PSA, Free
- **Division**: Clinical Chemistry - Core

### Free T3
- **Tube/Specimen**: Gold Stoppered 5.0 mL SST
- **Requisition**: CD0002
- **Division**: Clinical Chemistry - Core
- **Shipping**: Separate serum within 5 hours of collection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer.
- **Alternate Names**: Free Triiodothyronine
- **LIS Mnemonic**: FT3 T3 FREE

### Free T4
- **See**: Thyroxine, Free
- **Division**: Clinical Chemistry - Core

### Free Triiodothyronine
- **See**: Free T3
- **Division**: Clinical Chemistry – Core

### Frisium
- **See**: Clobazam
- **Division**: Clinical Chemistry - Toxicology

### Fructosamine
- **Tube/Specimen**: Gold topped SST tube.
- **Referred Out**: In-Common Laboratories
- **Instructions**: Centrifuge at room temperature. Hemolyzed or icteric (jaundiced) samples are not acceptable. Aliquot 2.0 mL serum in plastic vial. Freeze at once. Send copy of requisition.
PLM Laboratory Test Catalogue

LIS Mnemonic: Fructosam

FSH
Tube/SPECimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: Follicle Stimulating Hormone
LIS Mnemonic: FSH

FSH MD
Referred Out: Molecular Genetics Diagnostic Laboratory

FV G1691 A Mutation
Division: Molecular Diagnostics

FV Gene Mutation
Division: Molecular Diagnostics

FXIII
Referred Out: Hamilton General Hospital

G6PD
Referred Out: In-Common Laboratories

Gabapentin Level
Tube/SPECimen: Plain red topped tube.
Referred Out: In-Common Laboratories
LIS Mnemonic: GABA or Gabapentin RO
GAD65 Antibody Glutamic Acid Decarboxylase  see Anti-GAD

Referred Out:  In-Common Laboratories

Galactomannan Testing

Tube/Specimen:  Gold Stoppered 5.0 mL SST or Bronchial Wash (BRW)/Lavage (BAL)
Requisition:  CD0002/CD0432/CD0433
Division:  Virology-Immunology
Instructions:  Specify test requested on the Microbiology requisition.
Comments:  Only one specimen of each type will be processed per week. The most recent collection will be processed.
Testing is only approved for patients from Hematology, 8A, 8B, 6B, Transplant or ID. Any requests from other ordering locations will require director approval.
LIS Mnemonic:  GALACT

Gamma Globulins  see Immunoglobulins (GAM)

Division:  Clinical Chemistry - Core

Gamma Glutamyl  see Gamma GT, Plasma

Division:  Clinical Chemistry - Core

Gamma GT, Plasma

Tube/Specimen:  Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition:  CD0002
Division:  Clinical Chemistry - Core
Alternate Names:  Gamma Glutamyl Transpeptidase
Gamma Glutamyltransferase
GGT
LIS Mnemonic:  GGT

Ganglioside Antibody  see GM1 Ganglioside Antibody or GQ1B IgG Antibody  (Physician must specify)

Referred Out:  In-Common Laboratories

Ganglioside GQ1B IgG Antibody  see GQ1B IgG Antibody

Referred Out:  In-Common Laboratories

Gastrin
**Gene Rearrangements**  
**see specific test (bcl-1, bcl-2, BCR/abl)**

**Genetic Testing for C282Y**  
**see Hemochromatosis**

**Gen Probe AMTD, CSF and Tissue**  
*(Amplified Mycobacterium Tuberculosis Detection)*

**Gentamicin Level**

---

**Tube/Specimen:** Gold Stoppered 5.0 mL SST on ice  
Patient must be fasting (12 hours or longer). Unknown or Not Fasting status will not be processed.

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** High circulating biotin levels may reduce results by more than 10% of the true value. Patients must discontinue any biotin supplement at least 3 days prior to testing.  
Specimens collected at QEII HSC must be placed on ice and sent to the processing area immediately. Separate the serum from the cells in a refrigerated centrifuge within 1 hour. Aliquot and freeze immediately.

**Stability:** Frozen: 30 days

**Shipping:** Send 1.0 mL frozen serum. Thawed specimens are unacceptable.

**LIS Mnemonic:** GAST

---

**Alternate Names:** Aminoglycoside Level

---

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GGT  
see Gamma GT, Plasma

Division: Clinical Chemistry - Core

GH  
see Human Growth Hormone

Division: Clinical Chemistry - Core

GH-RH  
see Growth Hormone-Releasing Hormone

Referred Out: Mayo Medical Laboratories

Gleevec Blood Monitoring

Tube/Specimen: 4.0 mL Green topped Sodium Heparin tube. **Do not collect Friday or after 1:00 pm! Keep on ice.**

Referred Out: Warnex Medical Laboratories

Instructions: Send Gleevec Blood Monitoring Form along with sample.

LIS Mnemonic: Misc. Referred-Out

Globulin  
see Protein Total and Albumin Plasma

Division: Clinical Chemistry - Core

Glucagon

Tube/Specimen: Collect two 4 mL or one 6 mL chilled lavender topped EDTA tube(s). **Place on ice.** Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at 4°C. Aliquot 2.0 mL plasma in plastic vial. **Freeze immediately.** Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: Glucagon RO

Glucose-6-Phosphate Dehydrogenase (G6PD)

Tube/Specimen: 4.5 mL lavender topped EDTA tube.

Referred Out: In-Common Laboratories
Instructions: Keep refrigerated. 
Do NOT freeze. 
Do not accession for non-Nova Scotia Health Central Zone Hospitals 
Send copy of requisition.

LIS Mnemonic: G6PD

---

**Glucose AC, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** Specimens must be delivered to the laboratory within 2 hours of collection. Check off AC Glucose on the requisition. 
Patient should be fasting for at least 8 hours.

**Alternate Names:** AC Blood Sugar 
                   Blood Sugar

**LIS Mnemonic:** GLU AC

---

**Glucose Challenge Test, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:** Give the patient 50 grams glucose drink. Specimen is collected one (1) hour after the drink is finished. 

**Note:** This test is for pregnant patients. The patient must not be fasting.

**Alternate Names:** 1-hour GCT

**LIS Mnemonic:** 1 HR GCT 
                  TRUTOL

---

**Glucose, Fluids**

**Tube/Specimen:** Submit only one of the following specimens:
Spinal Fluid: 1.0 mL Spinal Fluid collected in sterile plastic screw top tube
Dialysate Fluid: 10 mL Dialysate Fluid collected in sterile plastic screw top tubes
Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Shipping:** If sending specimen from outside QEII HSC, transport at room temperature.

**LIS Mnemonic:** CSF GLU 
                  DF GLU
### Glucose PC, Plasma

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Light Green 4.5 mL Lithium heparin and gel for plasma separation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Instructions</td>
<td>Specimens must be delivered to the laboratory within 2 hours of collection. In order to ensure that timed determinations are taken properly, please give Blood Collection Service at least 30 minutes prior notice. Blood Collection does not take appointments after 1530 hours. Check off PC Glucose on the requisition.</td>
</tr>
<tr>
<td>Alternate Names</td>
<td>Sugar PC</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>GLU PC GLU PC 2HR</td>
</tr>
</tbody>
</table>

### Glucose Profile, Plasma

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Light Green 4.5 mL Lithium heparin and gel for plasma separation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Instructions</td>
<td>Drawn four times over a 24 hour period 1 hr AC &amp; 2 hr PC breakfast 1 hr AC &amp; 2 hr PC</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>GLU AC GLU PC 2HR</td>
</tr>
</tbody>
</table>

### Glucose Random, Plasma

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Light Green 4.5 mL Lithium heparin and gel for plasma separation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>GLU R</td>
</tr>
</tbody>
</table>

### Glucose Tolerance Test (GDM), Plasma

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Light Green 4.5 mL Lithium heparin and gel for plasma separation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Instructions</td>
<td>For glucose tolerance testing for gestational diabetes mellitus (GDM) three specimens will be drawn: fasting, 60 minutes and 120 minutes after the patient has finished the glucose drink. Specimens must be labeled with collection times.</td>
</tr>
<tr>
<td>Comments</td>
<td><strong>Patient Preparation:</strong> Fasting and post dosage specimens are required. Patients must be fasting 8 hours. Collect fasting specimen. Patient is given the 75 g glucose</td>
</tr>
</tbody>
</table>
drink immediately after taking the fasting glucose blood sample.

Note: This test is for pregnant females.

Alternate Names: GTT
GTT2

LIS Mnemonic: GTT2GDM
2HR GTT GDM

Glucose Tolerance Test (Non-GDM), Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: For oral glucose tolerance on everyone except pregnant females, only 2 specimens will be drawn, the fasting specimen and a specimen 120 minutes after the patient has finished glucose drink. Specimens must be labeled with collection times.
Comments: Patient Preparation:
Fasting and post dosage specimens are required.
Patients must be fasting 8 hours. Collect fasting specimen. Patient is given the 75 g glucose drink immediately after taking the fasting glucose blood sample.
Note: This test is for males and non-pregnant females. For pregnant females see Glucose Tolerance Test (GDM), Plasma.
Alternate Names: GTT
GTT2

LIS Mnemonic: GTT2
2HR GTT NON GDM

Glucose, Urine

Random and 24-hour Urine Glucose testing no longer offered as of February 4, 2019

Glycolic Acid
see Ethylene Glycol

Division: Clinical Chemistry - Toxicology

Glycosylated Hemoglobin
see Hemoglobin A1C

Division: Clinical Chemistry - Immunology

GM1 Ganglioside Antibody
(Do Not Confuse with GQ1B IgG Antibody)

Tube/Specimen: Plain red topped tube. Gold topped SST tubes are not acceptable.
Referred Out: In-Common Laboratories
Instructions: Transfer 1.0 mL serum in each of two plastic vials. Freeze immediately.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
Gonadotropin Releasing Hormone (Gn-RH) 
(Do Not Confuse with GH-RH)

Tube/Specimen: Two gold topped SST tubes.
Referred Out: Mayo Medical Laboratories
Instructions: Aliquot 3.0 mL serum in plastic vial. Freeze immediately. If the specimen thaws, it is unsuitable for analysis. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

GP (Surface Glycoprotein Analysis-GP IbIX and IIbIIIa)

Tube/Specimen: One 4.5 mL light blue topped Sodium Citrate or one 7.0 mL yellow topped ACD tube.
Referred Out: McMaster University HSC
Instructions: Send to Hematopathology Coagulation lab for processing. Store and ship at room temperature.

GQ1B IgG Antibody (Do Not Confuse with GM1 Ganglioside Antibody)

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Stability: 21 days frozen.

Group and Crossmatch see Type and Screen (ABO/Rh and Antibody Screen)
Division: Transfusion Medicine

Group and Type see ABO Group and Rh Type
Division: Transfusion Medicine

Growth Hormone see Human Growth Hormone
Growth Hormone Releasing Hormone (GH-RH)
(Do Not Confuse with Gn-RH)
Tube/Specimen: Two gold topped SST tubes.
Referred Out: Mayo Medical Laboratories
Instructions: Aliquot 3.0 mL serum into plastic vial. **Freeze immediately.**
If the specimen thaws, it is unsuitable for analysis.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

**LIS Mnemonic:** FIRGH

---

**GTT**
see Glucose Tolerance Test, Plasma

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**GTT2**
see Glucose Tolerance Test, Plasma

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**H Pylori**
see Helicobacter Pylori Stool Antigen

**Note:** After Nov 1, 2016 Helicobacter pylori serology will no longer be performed. Stool antigen testing is the preferred testing method. If active infection is suspected please submit a fresh stool in a sterile container.

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**H63D**
see Hemochromatosis

---

**Haemophilus influenza**
**Routine typing from sterile sites or questionable outbreaks**

Tube/Specimen: Isolate, Typing
Referred Out: IWK Microbiology Lab
Instructions: Shipped as Biological Substances Category B
Porter service for delivery

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**Hantavirus Serology**

Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
PLM Laboratory Test Catalogue

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO HANTA

Haptoglobin

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.

LIS Mnemonic: HAPTO

HAV

see Hepatitis A Testing

Division: Virology-Immunology

Hb

see Profile

Division: Hematopathology - Core

HCG (Quant), Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate plasma within 5 hours of collection. Plasma stable at 2 to 8°C for 7 days. Freeze and send frozen plasma, if longer.

Alternate Names: Chorionic Gonadotropin Beta-Subunit
HCG-Beta Subunit
Human Chorionic Gonadotropin

LIS Mnemonic: HCG BHCG QUANT

HCG Beta Subunit

see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

HCO3, Plasma

see Bicarbonate, Plasma
PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

HCT see Profile
Division: Hematopathology - Core

HDL-Cholesterol, Plasma
Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.
Alternate Names: High Density Lipoprotein Cholesterol
LIS Mnemonic: HDL

Heat Shock Protein see F68KD
Referred Out: Mayo Medical Laboratories

Heavy Metal Testing see Trace Element Panels
Referred Out: London HSC-Victoria Hospital

Heinz Bodies
Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology - Core

Helicobacter Pylori Stool Antigen
Tube/Specimen: Stool in sterile container.
Requisition: CD0432/ CD0433
Referred Out: IWK Microbiology Lab
Instructions: Send to VG Microbiology lab with original requisition. Microbiology will refer tests out. Refrigerate at 2 to 8°C. If stool cannot be submitted to the laboratory within 72 hours, the specimen should be frozen at -20°C.
Note: As of Nov 1, 2016, Helicobacter pylori serology will no longer be performed. Stool antigen testing is the preferred testing method. If active infection is suspected please submit a fresh stool in a sterile container as explained here.
LIS Mnemonic: IWKHP
**Hem Microorganism**

**Tube/Specimen:** Lavender Stoppered 4.0 mL EDTA tube or 4 Thick and 4 Thin Smears

**Requisition:** CD0002

**Division:** Hematopathology – Microscopy

**Comments:** Analysis includes Thick & Thin Smear Review

**Instructions:** EDTA specimens are acceptable if received in the Core Lab within 4 hours of collection; otherwise 4 Thick and 4 Thin smears are required.

**Stability:** EDTA specimen: 4 hours at room temperature.

**Alternate Names:**
- Anaplasma Smear
- Babesia Smear
- Ehrlichia Smear
- Microfilaria Smear
- Trypanosoma Smear

**LIS Mnemonic:**
- Hem Microorg
- Hem Microorganisms

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**Hematocrit**  
**Division:** Hematopathology - Core

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**Hemochromatosis**

**Tube/Specimen:**
- Lavender Stoppered 4.0 mL EDTA (preferred)
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4 degrees Celsius.
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4 degrees Celsius.
- Tissue: Send in saline at 4 degrees Celsius, or frozen on dry ice. Stability – 12 hours in saline at 4 degrees Celsius, or 7 days frozen.

**Requisition:** CD0002 or CD2573

**Division:** Molecular Diagnostics

**Instructions:**
- Blood/bone marrow must be kept at 4 degrees Celsius, accompanied by requisition.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- HLA-H
- HFE
- Human Leukocyte Antigen-H
- DNA Probe for Hemochromatosis
- Genetic Testing for C282Y
- C282Y
- H63D

**LIS Mnemonic:** HH

---

**Hemoglobin**  
**Division:** Hematopathology - Routine

---

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*Uncontrolled When Printed*
**Hemoglobin A1C**

**Tube/Specimen:** One Lavender stoppered 4.0 mL EDTA tube. This tube is not to be shared.

**Requisition:** CD0002

**Division:** Clinical Chemistry – Immunology

**Instructions:** The tube collected for this assay cannot be shared for other assays.

**Shipping:** Send whole blood at room temperature. Sample is acceptable at room temperature for 24 hours and 7 days at 2 to 8°C.

**Alternate Names:** Glycosylated Hemoglobin (Hgb A1C)

---

**Hemoglobin and Hematocrit, Body Fluid**

**Tube/Specimen:** Lavender Stoppered 4.0 mL EDTA Jackson Pratt Drain or JP Drain

**Requisition:** CD0002

**Division:** Hematopathology - Core

---

**Hemoglobin Electrophoresis**

**Tube/Specimen:** Lavender Stoppered 4.0 mL EDTA

**Requisition:** CD0002

**Division:** Hematopathology – Immunology

**Instructions:** Specimens must be analyzed within 7 days and stored between 2 to 8 degrees. Do not store at room temperature. Hospitals outside Central Zone must send a copy of the CBC report with the specimen.

**Alternate Names:** Thalassemia Screen, Alpha Thalassemia Screen

---

**Hemoglobin F**

**see Fetal Hemoglobin**

**Division:** Hematopathology - Immunology

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**Hemogram (i.e. Hb HCT WBC)**

**see Profile**

**Division:** Hematopathology - Core

---

**Hemophilia A Inversion**

**see Hemophilia Carrier Testing**

**Division:** Molecular Diagnostics

---

**Hemophilia and von Willebrand’s Disease Genotype**

**Tube/Specimen:** 4.0 mL EDTA Lavender stoppered tube(s).

---
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 5 days at 4°C or 1 month frozen.
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood must be kept at 4°C or frozen, accompanied by requisition.
Send sample to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at Queen’s University.

Alternate Names: Hemophilia A inversion
Factor VIII mutation

LIS Mnemonic: 2LAVDNA

Hemophilia Carrier Testing

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 5 days at 4°C or 1 month frozen.
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood must be kept at 4°C or frozen, accompanied by requisition.
Send sample to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at Queen’s University.

Alternate Names: Hemophilia A inversion
Factor VIII mutation

LIS Mnemonic: 2LAVDNA

Hemosiderin, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.

Requisition: CD0002

Division: Hematopathology – Microscopy

Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

Stability: Room temperature 2 hours and 2 to 8°C (preferred) for 24 hours.

LIS Mnemonic: U Hemosid

Heparin Induced Thrombocytopenia (HIT)

Tube/Specimen: Two Plain Red Tubes 6 or 10 mL (serum) and two Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw (plasma)

Requisition: CD0002

Division: Hematopathology - Coagulation

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Doc#: 19453

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Instructions: If sending frozen aliquots please double spin and clearly indicate which aliquots are plasma and which aliquots are serum. Please send 4 frozen 1.0 mL aliquots of serum and 3 frozen 1.0 mL aliquots of platelet poor plasma. Send frozen on dry ice. A QE Heparin Induced Thrombocytopenia Questionnaire Form #5970 must be entirely completed and must accompany the specimen. Both serum and plasma specimens must be platelet poor.

Comments: Specimens anticoagulated with heparin are not suitable for testing with this assay and must not be used. Specimens may be referred out to McMaster University HSC.

Alternate Names: HIT

<table>
<thead>
<tr>
<th>Test Name</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heparin XA</td>
<td>Hematopathology - Coagulation</td>
</tr>
<tr>
<td>Hepatitis A Antibody IgG</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Hepatitis A Antibody IgM</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Hepatitis A Immune Status</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Hepatitis A Testing</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Hepatitis B Core Antibody (Total IgG and IgM)</td>
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</tr>
<tr>
<td>Hepatitis B Core Antibody IgM</td>
<td>Virology-Immunology</td>
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**Hepatitis B Viral Load**

- **Tube/Specimen**: Gold Stoppered 5.0 mL SST tube
- **Requisition**: CD0002A/CD0002B
- **Division**: Virology-Immunology
- **Comments**: Quantitative
- **Alternate Name**: HBV DNA
- **LIS Mnemonic**: HBVVL

---

**Hepatitis C Antibody**

- **Tube/Specimen**: Two Gold Stoppered 5.0 mL SST tubes
- **Requisition**: CD0002A/CD0002B
- **Division**: Virology-Immunology
- **Comments**: Diagnosis
- **Alternate Name**: Anti HCV, HCV Antibody
- **LIS Mnemonic**: HEPC

---

**Hepatitis C Genotype**

- **Tube/Specimen**: Two Gold Stoppered 5.0 mL SST tubes
- **Requisition**: CD0002A/CD0002B
- **Division**: Virology-Immunology
- **LIS Mnemonic**: HEPCGENO

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**Hepatitis C Resistance**

- **Tube/Specimen**: Lavender stoppered 4.0 mL EDTA tube
- **Requisition**: Laboratory Requisition Form for NON-B.C. Patients Only
- **Division**: Virology-Immunology
- **Shipping**: Whole blood may be transported at 2 to 8°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes. Ship one 2mL aliquot at 2 to 8°C if it will be received within 48 hours otherwise ship plasma frozen.
Hepatitis C Riba

Tube/Specimen: Two Gold Stoppered 5.0 mL SST tubes
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Comment: Confirmatory antibody testing, qualitative
Alternate Name: HCV RIBA
LIS Mnemonic: HEPCRIBA

Hepatitis C Viral Load

Tube/Specimen: Two Gold Stoppered 5.0 mL SST tubes
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Comment: Quantitative
Alternate Names: HCV PCR
HCV RNA
HCV Viral Load
LIS Mnemonic: HCVVL

Hepatitis D

Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition. Patient must be HBsAG positive.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

Hepatitis E

Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

Her-2 neu FISH
Tube/Specimen: Tissue in paraffin block
Requisition: CD2573
Division: Molecular Diagnostics
Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Herpes Typing by Real Time PCR
Tube/Specimen: CSF (0.5 mL sterile sample), Swabs collected in viral transport media, sterile fluids, bronchial wash, tissues
Requisition: CD0432/CD0433
Division: Virology-Immunology
Comments: For CSF: IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens require a CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting location by the Microbiology laboratory.
Shipping: CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen. All other specimens store at 4°C up to 3 days, if longer freeze at -70°C
LIS Mnemonic: E BFME (CSF) E HSVVZ (all other specimens)

Hexosaminidase, Beta
Tube/Specimen: MALES and Non-pregnant Females: Plain red topped tube. Aliquot 2.0 mL serum in plastic vial. Freeze. Unsuitable if thawed. PREGNANT Females: Green topped heparinized tube. Do Not Centrifuge! Do Not Freeze!
Referred Out: Hospital for Sick Children Metabolic Diseases Laboratory
Instructions: Contact Referred-Out bench at 902-473-7237. Indicate if pregnant or on oral contraceptives. Indicate the Ethnicity/Race of the patient. Physician must complete applicable Sick Kids requisition for referral laboratory testing. If testing for Tay-Sachs Carrier Detection, submit completed Metabolic Diseases & Genome Diagnostics for Tay-Sachs requisition, otherwise submit the Metabolic Disease-Lysosomal Enzyme requisition.
LIS Mnemonic: MISC REF

HFE see Hemochromatosis
PLM Laboratory Test Catalogue

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**Hgb A1C**

see Hemoglobin AIC

Division: Clinical Chemistry - Immunology

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**HGH**

see Human Growth Hormone

Division: Clinical Chemistry - Core

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**High Density Lipoprotein**

see HDL-Cholesterol, Plasma

Division: Clinical Chemistry - Core

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**High Sensitive CRP**

see C-Reactive Protein – HS (High Sensitivity), Plasma

Division: Clinical Chemistry - Core

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**Histamine**

Tube/Specimen: Lavender topped EDTA tube.

Referred Out: Mayo Medical Laboratories

Instructions: Cool immediately on ice after collection. Centrifuge at 1500 rpm for 10 minutes at 4°C within 20 minutes of collection. Aliquot at least 1.0 mL plasma and freeze immediately. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: 28 days frozen.

LIS Mnemonic: Histamine

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**Histone Antibodies**

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Aliquot 1.0 mL serum. Freeze immediately. Send copy of requisition.

Note: Ship frozen.

LIS Mnemonic: HISAB

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**Histoplasma Capsulation**

see Histoplasmosis Serology

Division: Virology-Immunology

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**Histoplasmen**

see Histoplasmosis Serology
PLM Laboratory Test Catalogue

Division: Virology-Immunology

Histoplasmosis Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: For Histoplasmosis cultures, see the "Microbiology User’s Manual". This test will be referred out by the laboratory.
Alternate Names: Histoplasma Capsulation
Histoplasmen
LIS Mnemonic: RO HISTO

HIV Genotyping and Drug Resistance

Tube/Specimen: Lavender stoppered 4.0 mL EDTA tube
Requisition: Laboratory Requisition Form for NON-B.C. Patients Only
Division: Virology-Immunology
Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes. Ship one 2mL aliquot of plasma frozen.
LIS Mnemonic: RO HIVGDR

HIV Viral Load

see HIV-1 Viral Load

Division: Virology-Immunology

HIV-1 Viral Load

Tube/Specimen: Two Lavender Stoppered 4.0 mL EDTA tubes.
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes and ship two 2 mL aliquots at 2 to 8°C.
Alternate Names: HIV Viral Load
LIS Mnemonic: VLNS

HIV-1/HIV-2

Tube/Specimen: Gold Stoppered 5.0 mL SST

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### HLA-A

**Alternate Names:** AIDS Test, HTLV3, Human Immunodeficiency Virus

**LIS Mnemonic:** HIV

**Requisition:** CD0002A / CD0002B

**Division:** Virology-Immunology

**Alternate Names:**
- AIDS Test
- HTLV3
- Human Immunodeficiency Virus

**LIS Mnemonic:** HIV

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**Uncontrolled When Printed**

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**HLA-A**

**see HLA Typing Autoimmune**

**Division:** Hematopathology – Histocompatibility (HLA)

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**HLA Antibody Testing**

**Tube/Specimen:** 1 x 6 mL Serum Tube (Plain Red top or aliquoted)

**Division:** Hematopathology – Histocompatibility (HLA)

**Requisition:** CD0004

**Instructions:** Complete recipient clinical history in the section provided on the requisition (Multi-Organ Transplant-Recipient Clinical History)

**Shipping:** Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 96 hours of collection. Frozen serum specimens should be packed with sufficient dry ice/ice packs to arrive frozen. Specimens arriving after 3 pm on Friday will be processed the next business day.

**Notes:** Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Number) Phlebotomist must positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

**Alternate Names:**
- Cytotoxic Antibodies
- PRA

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**HLA-B**

**see HLA Typing Autoimmune**

**Division:** Hematopathology – Histocompatibility (HLA)

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**HLA-B27**

**see HLA Typing Autoimmune**

**Division:** Hematopathology - Histocompatibility (HLA)

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**HLA-B5701**

**see HLA Typing Autoimmune**

**Division:** Hematopathology - Histocompatibility (HLA)

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**HLA-C**

**see HLA Typing Autoimmune**

**Division:** Hematopathology - Histocompatibility (HLA)
HLA Crossmatch – Recipient

Tube/Specimen: 4 x 6 mL ACD (Solution B) tubes (Yellow top) and 1 x 6 mL serum (Red top or aliquot)

Requisition: CD0004

Division: Hematopathology – Histocompatibility (HLA)

Instructions: By appointment only. Samples must be received in the HLA laboratory by 0900 on the scheduled crossmatch date. Samples received after 0900 may not be processed. Complete recipient information in the section provided on the requisition. (Multi-Organ Transplant – Recipient Clinical Information)

KPD or CTR: Please indicate if recipient is part of the Kidney Paired Exchange or Canadian Transplant Registry by checking the box provided and indicating the patient’s registry number.

Shipping: Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 72 hours of collection.

Notes: Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Number) Phlebotomist must positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

HLA Crossmatch - Living Donor

Tube/Specimen: 4 x 6 mL ACD (Solution B) tubes (Yellow top)

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

Instructions: By appointment only. Samples must be received in the HLA laboratory by 0900 on the scheduled crossmatch date. Samples received after 0900 may not be processed. Complete live donor information in the section provided on the requisition (Multi-Organ Transplant-Live Donor)

Live Donor: Please indicate if donor is part of the Kidney Paired Exchange or Canadian Transplant Registry by checking the box provided and indicating the patient’s registry number.

Shipping: Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 72 hours of collection.

Notes: Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Number) Phlebotomist must positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

HLA Deceased Donor Typing and Crossmatch

Tube/Specimen: 8 x 6 mL ACD (Solution B) tubes (Yellow top) 2 x 4 mL EDTA tubes (Lavender top)

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

Shipping: Transport blood specimens at room temperature and protect from freezing. Typing specimens (EDTA) should arrive in the HLA laboratory within 7 days of collection. Crossmatch samples (ACD) should arrive in the HLA laboratory within 72 hours of collection. Complete the Deceased Donor information in the section provided on the requisition (Multi-Organ Transplant – Donor Information)

Notes: Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Number) Phlebotomist must positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.
**Phlebotomist must** positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

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### HLA DQ

**see HLA Typing Autoimmune**

**Division:** Hematopathology - Histocompatibility (HLA)

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### HLA DR

**see HLA Typing Autoimmune**

**Division:** Hematopathology - Histocompatibility (HLA)

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**HLA Typing-Autoimmune**

**Tube/Specimen:** 2 x 4 mL EDTA tubes (Lavender top)

**Requisition:** CD0004

**Division:** Hematopathology - Histocompatibility (HLA)

**Instructions:**
- **HLA B27** testing is limited to requests from rheumatologists, ophthalmologists and orthopedics only.
- **HLA B5701** testing is limited to requests from the ID clinic only.

**Shipping:** Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 7 days of collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

**Notes:** Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Number)
- **Phlebotomist must** positively identify the patient and include the date and time of collection.
- Specimens may not be accepted if the patient information and date and time of collection are incomplete.

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### HLA Typing- Bone Marrow Recipient and Donor (HLA-A, B, C, DR, DQ, DP)

**Tube/Specimen:** 2 x 4 mL EDTA tubes (Lavender top)

**3 x 500 μL EDTA Microtainer tubes for pediatric patients under 1 year of age**

**2 x buccal swabs**

**Requisition:** CD0004

**Division:** Hematopathology - Histocompatibility (HLA)

**Instructions:**
- **BMT Donor Typing**—Complete recipient information in the section provided on the requisition (Bone Marrow Transplant-Donor)

**Shipping:** Transport specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 7 days of collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

**Notes:** Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (full name and HCN or Medical Record Number). For pediatric peripheral blood collections less than 4 mL, additional specimens may be requested by the laboratory if required. For difficult collections, or when clinically warranted, the laboratory may accept lower minimum specimen requirements. Contact the laboratory for further information.
- **Phlebotomist must** positively identify the patient, sign the requisition in the box provided, and include the date and time of collection.
- Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

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### HLA Typing-Multi Organ Transplant Recipient and Donor (HLA-A, B, C, DR, DQ, DP)

**Tube/Specimen:** 2 x 4 mL EDTA tubes (Lavender top)

**Section:** Management System\PLM\General\PLM Website\General\Test Catalogue\

**Doc#:** 19453

*Version:* 162.0 Current

*Effective Date:* 1/16/2024

Page 129 of 239

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**Uncontrolled When Printed**
3 x 500 μL EDTA Microtainer tubes for pediatric patients under 1 year of age

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

Instructions: Recipient Typing - Complete recipient clinical history in the section provided on the requisition (Multi-Organ Transplant-Recipient Clinical History)

Donor Typing - Complete donor information in the section provided on the requisition (Multi-Organ Transplant-Donor Information)

KPD or CTR: Please indicate if recipient and donor belong to the Kidney Paired Exchange or Canadian Transplant Registry by checking the box provided and indicating the patient’s registry number.

Shipping: Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 7 days of collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

Notes: Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (full name and HCN or Medical Record Number). For pediatric collections less than 4 mL, additional specimens may be requested by the laboratory if required. For difficult collections, or when clinically warranted, the laboratory may accept lower minimum specimen requirements. Contact the laboratory for further information.

Phlebotomist must positively identify the patient, sign the requisition in the box provided, and include the date and time of collection. Specimens may not be accepted if the patient information, phlebotomist information and date and time of collection are incomplete.

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**HLA Typing Tissue Bank Donor** see HLA Typing-Multi Organ Transplant

Division: Hematopathology - Histocompatibility (HLA)

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**HLA-H** see Hemochromatosis

Division: Molecular Diagnostics

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**HMBS** see Acute Intermittent Porphyria gene mutation

Division: Molecular Diagnostics

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**HMGCR Antibodies** see Anti-HMGCR Antibodies

Referred Out: In-Common Laboratories

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**Homocysteine**

Tube/Specimen: Lavender topped EDTA tube. Patient should be fasting.

Referred Out: In-Common Laboratories

Instructions: Note: Specimen must be spun and separated within 1 hour of collection!

Centrifuge, aliquot 2.0 mL plasma and Freeze.

Outside hospitals may be accessioned.

Patient is preferred to be fasting but is not required.

Send copy of requisition.

Stability: Once centrifuged is 1 day at room temperature, 2 days refrigerated, and more than 2 days frozen.

LIS Mnemonic: HOMO
Homogentisic Acid  see Organic Acid Analysis
Referred Out: IWK Metabolic Lab

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**HPV DNA**

Tube/Specimen: Cervical specimen collected in Preservcyt solution (thin prep)

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

Comments: Testing restricted to Gynecology Oncology Clinic and Dr. Marshall (St. Martha’s Hospital).

Shipping: Specimens stable for 3 months at room temperature

LIS Mnemonic: HPV

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**HTLV 3**  see HIV-1/HIV-2

Division: Virology-Immunology

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**HTLV-1/HTLV-II Antibody**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

LIS Mnemonic: HTLV

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**Human Chorionic Gonadotropin**  see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

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**Human Growth Hormone**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Patient must be fasting for 8 hours prior to collection. Centrifuge specimen within 90 minutes of collection; aliquot and freeze immediately.

Shipping: Freeze immediately and send 1.0 mL frozen serum.

Stability: Frozen: 60 days

Alternate Names: GH

Growth Hormone
Human Immunodeficiency Virus  
Division: Virology-Immunology

Human Leukocyte Antigen  
Division: Hematopathology – Histocompatibility (HLA)

Human Leukocyte Antigen-H  
Division: Molecular Diagnostics

Hydatid Disease – IHA (Echinococcosis)
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: QE 7125
Division: Microbiology-Immunology
Note: This test will be referred out by the laboratory.

Hydroxybutyrate  
Referred Out: In-Common Laboratories

Hydroxymethylbilane Synthase Gene  
Division: Molecular Diagnostics

Hypereosinophilic Syndrome
Tube/Specimen: Lavender topped EDTA tube (whole blood) or bone marrow sample.
Referred Out: Mayo Medical Laboratories
Instructions: Hematopathology Molecular lab will process sample.
LIS Mnemonic: Misc. Hematology Referred Out

Hypermutation  
Division: Molecular Diagnostics

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Uncontrolled When Printed
<table>
<thead>
<tr>
<th>Test</th>
<th>Division</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDAT</td>
<td>Transfusion Medicine</td>
<td>see Type and Screen (ABO/Rh and Antibody Screen)</td>
</tr>
<tr>
<td><strong>Idiopathic Thrombocytopenia Purpura (ITP)</strong></td>
<td></td>
<td>see Autoimmune Thrombocytopenia Purpura</td>
</tr>
<tr>
<td>Referred Out:</td>
<td>McMaster University HSC</td>
<td></td>
</tr>
<tr>
<td><strong>IG gene rearrangement</strong></td>
<td>Molecular Diagnostics</td>
<td>see B-cell lymphoid clonality</td>
</tr>
<tr>
<td><strong>IG Heavy Chain</strong></td>
<td>Molecular Diagnostics</td>
<td>see B-cell lymphoid clonality</td>
</tr>
<tr>
<td><strong>IgA</strong></td>
<td>Clinical Chemistry – Core</td>
<td>see Immunoglobulins, (GAM)</td>
</tr>
<tr>
<td><strong>IgD</strong></td>
<td>In-Common Laboratories</td>
<td>see Immunoglobulin D</td>
</tr>
<tr>
<td><strong>IgE</strong></td>
<td>Clinical Chemistry - Core</td>
<td>see Immunoglobulin E</td>
</tr>
<tr>
<td><strong>IGF-1</strong></td>
<td>Clinical Chemistry - Core</td>
<td>see Insulin Like Growth Factor</td>
</tr>
<tr>
<td><strong>IgG</strong></td>
<td>Clinical Chemistry - Core</td>
<td>see Immunoglobulins, (GAM)</td>
</tr>
<tr>
<td><strong>IgG 4 Subclass</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tube/Specimen:</td>
<td>Gold topped SST tube.</td>
<td></td>
</tr>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
<td></td>
</tr>
<tr>
<td>Instructions:</td>
<td>Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. <strong>Freeze</strong> at once. Send copy of requisition.</td>
<td></td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>IgG 4</td>
<td></td>
</tr>
</tbody>
</table>
IgG Subclasses (IgG 1, IgG 2, IgG 3, IgG 4)

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.
Aliquot 1.0 mL serum into plastic vial. Freeze at once.
Send copy of requisition.

LIS Mnemonic: IgG Sub

IgG/TCR Gene Rearrangement

Division: Molecular Diagnostics

Alternate Names: TCR Gene Rearrangement

IGHV mutation status

See IGHV Somatic Hypermutation

IGHV Somatic Hypermutation

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA. If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: CLL hypermutation
Somatic hypermutation
Hypermutation
SHM
IGHV mutation status

LIS Mnemonic: 2LAVDNA

IgM

See Immunoglobulins, (GAM)

Division: Clinical Chemistry - Core

IGRA
**Imipramine Level**

**Tube/Specimen:** Plain red topped tube.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot serum into plastic vial. **Freeze**.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Note:**
- Royal Blue Trace Element SERUM tubes (BD#368380) and lavender topped EDTA (plasma) tubes are acceptable.
- Must indicate specimen type on aliquot tube (serum or plasma).

**LIS Mnemonic:** IMIP

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**Immunodeficiency Testing**

**Tube/Specimen:** Dark green stoppered 7.0 mL Lithium Heparin

**Requisition:** CD0002C

**Division:** Hematopathology-Flow Cytometry

**Instructions:**
- Specimens should arrive in the Flow Cytometry lab on the same day of collection, however, must arrive within 24 hours of collection and no later than 14:00 on Fridays (or the day before a holiday).
- The requisition must accompany the specimen to the Flow laboratory.

**Shipping:** Maintain specimen at room temperature.

**LIS Mnemonic:** CELL SM

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**Immunofibrinogen (Antigen)**

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PLM Laboratory Test Catalogue

Tube/Specimen: 4.5 mL light blue topped Sodium Citrate tube.
Referred Out: Hamilton General Hospital
Instructions: Send to Hematopathology Coagulation lab for processing.
LIS Mnemonic: Miscellaneous Hematology

Immunoglobulin D

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 1.0 mL of serum into plastic vial. Freeze at once. Send copy of requisition.
LIS Mnemonic: IGD

Immunoglobulin E

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Centrifuge and aliquot within 5 hours of collection.
Stability: 8 hours at room temperature, 3 days at 2 to 8°C and 6 months frozen at -20°C.
LIS Mnemonic: IGE

Immunoglobulins (GAM), Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Separate serum within 5 hours of collection. Serum stable for 4 months at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: Gamma Globulins
LIS Mnemonic: IMM

Immunoglobulins, Heavy

see Immunoglobulins (GAM)

Immunoglobulins, Free Light Chain

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\Doc#: 19453
Version: 162.0 Current
Effective Date: 1/16/2024
Page 136 of 239

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Uncontrolled When Printed
PLM Laboratory Test Catalogue

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Immunology
Shipping: Separate serum and freeze. Send frozen serum on dry ice. Send as a separate aliquot with no other testing ordered.

Indirect Antiglobulin Test  see Type and Screen (ABO/Rh and Antibody Screen)
Division: Transfusion Medicine

Indirect Bilirubin  see Bilirubin Indirect, Plasma
Division: Clinical Chemistry - Core

Infectious Mononucleosis  see Epstein-Barr Virus
Division: Microbiology-Immunology

Influenza/RSV/Other Viral Respiratory Testing
Tube/Specimen: Nasopharyngeal swab in viral transport media, Bronch wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural fluid
Requisition: CD0432/CD0433
Division: Virology-Immunology
Comments: An algorithm will be followed according to the season and patient location to determine what testing will be performed. Routine Influenza testing includes Influenza A, Influenza B and RSV. Viral respiratory testing includes Adenovirus, Parainfluenza virus 1/2/3/4, Enterovirus, Coronavirus 229E/NL63/OC43, Rhinovirus A/B/C, Bocavirus and Human metapneumovirus.
Shipping: Specimens are stable at 2 to 8°C for 3 days, if it will be received >3 days freeze at -70°C and ship on dry ice.
LIS Mnemonic: FLU (influenza A, B, RSV) (for all specimen types except lung tissue and pleural fluid)
E MRVP (Viral respiratory testing on all specimen types if criteria for testing met)
E FLU (lung tissue, pleural fluid)
Note: Avian influenza requests, a microbiologist must be notified. They will direct the specimen collection type and test request.

Inhibitor (Non Specific)  see Lupus Anticoagulant Screen
Division: Hematopathology - Coagulation

Inhibitor (Specific)  see Factor VIII C Inhibitor
Division: Hematopathology - Coagulation

Inorganic Phosphorous  see Phosphorous, Plasma
Division: Clinical Chemistry - Core

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INR (PT)

Tube/Specimen: Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition: CD0002
Division: Hematopathology – Coagulation
Alternate Names: Prothrombin Time

Insulin

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Patient should be fasting 8 hours prior to collection. Deliver specimen to lab within 60 minutes of collection. Separate serum from gel separator within 90 minutes of collection.
Shipping: Separate serum from gel separator within 90 minutes of collection. Freeze and send frozen serum.
Stability: Separated serum: 5 days at 2 to 8°C and 14 days at -20°C
LIS Mnemonic: INS

Insulin Antibodies

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 2.0 mL of serum into plastic vial. Freeze at once. Send copy of requisition.
LIS Mnemonic: Insulin Ab

Insulin like Growth Factor-1

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry – Core
Instructions: Specimen must be centrifuged within 90 minutes.
Shipping: Separate serum and freeze immediately.
Stability: Frozen: 6 months
Alternate Names: IGF-1
Somatomedin-C
Intact PTH

see Parathyroid Hormone Intact

Division: Clinical Chemistry - Core

Intercellular Skin Ab

see Anti-Pemphigus Antibodies

Division: Immunopathology

Interferon-beta Neutralizing Antibodies

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories


LIS Mnemonic: NABS

Interleukin 2 Receptor Alpha Chain (CD25)

Tube/Specimen: Plain Red topped tube (avoid gel separator tubes)

Referred Out: In-Common Laboratories

Instructions: Avoid all biotin supplements for 48 hours prior to specimen collection. Centrifuge at room temperature. Aliquot 1.0 mL of serum. Freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

Stability: Room temperature unacceptable. Refrigerated 24 hours. Frozen 30 days.

Alternate Names: Soluble CD25
Soluble IL-2 receptor alpha chain
sIL-2R alpha
sIL-2Ra

LIS Mnemonic: IL2R

Interleukin 6 Vitreous Fluid

Tube/Specimen: 1.0 mL Vitreous Fluid collected into sterile container.

Referred Out: In-Common Laboratories

Interleukin 10 Vitreous Fluid

Tube/Specimen: 1.0 mL Vitreous Fluid collected into sterile container.

Referred Out: In-Common Laboratories


Stability: Frozen 1 year at -70°C.

LIS Mnemonic: IL10FL

Intrinsic Factor Antibodies

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 3.0 mL of serum into plastic vial. Freeze at once. Send copy of requisition.

LIS Mnemonic: Intrins

INV 16 see Inversion 16

Division: Molecular Diagnostics

Inversion 16

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: INV 16

CBF beta-MYH11 gene fusion

LIS Mnemonic: 2LAVDNA
Iodine Plasma

**Tube/Specimen:** 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381).

**Referred Out:** In-Common Laboratories

**Instructions:** **Centrifuge ASAP!** Testing cannot be performed on whole blood. Aliquot plasma into plastic transfer vial. Keep refrigerated. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

**LIS Mnemonic:** Iodine P

---

**Ionized Calcium, Plasma**

**Tube/Specimen:** Light Green Stoppered 5.0 mL PST lithium heparin tube, must be a full draw. **Place on ice immediately after collection.** Transport sample to the lab immediately.

**Requisition:** CD0021

**Division:** Clinical Chemistry – Core

**Instructions:** Ideally no tourniquet should be used. Patient should not be allowed to exercise the forearm or pump fist. Samples should be placed on ice immediately after collection and must be centrifuged within 2 hours of collection. Post-spin specimens should be kept cold and unopened before analysis. If sample cannot be analyzed immediately, it can be stored unopened at 2 to 8°C up to 3 days.

**Shipping:** Transport spun samples on cold pack optimally within 24 hours of centrifugation. Do not use dry ice. Do not freeze. Unspun samples must be received in lab on ice within 2 hours of collection.

**Alternate Names:** Calcium Lvl Ionized

**LIS Mnemonic:** ICA

---

**Iron, Plasma**

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Alternate Names:** Fe

**Iron Binding**

**Total Iron Binding Capacity**

**LIS Mnemonic:** IRON/TIBC

---

**Iron Binding Capacity, Plasma** see Iron, Plasma

---

**Iron Level Liver RO**

**Tube/Specimen:** Sample may be sent cold in paraffin block, formaldehyde or other preservative. Unpreserved specimens should be stored and sent frozen.

---

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**Uncontrolled When Printed**
Islet Cell Antibody  see Anti-Pancreatic Islet Cell Antibody
Division: Immunopathology

Islet Transplant Program  see PRA/LAS
Referred Out: University of Alberta

Isoelectric Focusing (IEF)
Tube/Specimen: 4.5 mL Lavender topped EDTA tube.
Referred Out: IWK Hematology Lab
Instructions: Send to Hematopathology Coagulation lab for processing.
LIS Mnemonic: Miscellaneous Hematology

Isoenzyme, Alkaline Phosphatase  see Alkaline Phosphatase: Isoenzyme
Referred Out: In-Common Laboratories

Isohemagglutinin Titre  see ABO Antibody Titre
Division: Transfusion Medicine

Isopropanol  see Isopropyl Alcohol, Qualitative
Division: Clinical Chemistry - Toxicology

Isopropyl Alcohol, Qualitative
Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations.
Alternate Names: Isopropanol
LIS Mnemonic: METHANOL FORMIC ACID
PLM Laboratory Test Catalogue

ISOPROPANOL QUANTITATION

IWK Clinical Genomics
Tube/SPECIMEN: As per requisition
REFERRED OUT: IWK Clinical Genomics
INSTRUCTIONS: Do not accession. Keep sample at room temperature.

IWK Cytogenetics Testing
Tube/SPECIMEN: As per requisition
REFERRED OUT: IWK Cytogenetics Lab
INSTRUCTIONS: Do not accession. Keep sample at room temperature.

IWK Molecular Testing
Tube/SPECIMEN: As per requisition
REFERRED OUT: IWK Molecular Lab
INSTRUCTIONS: Do not accession. Keep samples at room temperature.

JAK2 (v6 7f) see Jak2 gene mutation
DIVISION: Molecular Diagnostics

JAK2 exon 12 see Next Generation Sequencing - Myeloid panel
DIVISION: Molecular Diagnostics

JAK2 gene mutation
Tube/SPECIMEN: Lavender Stoppered 4.0 mL EDTA
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. Alternatively, send fixed tissue in paraffin block.
DNA: Stability – 3 months at 4°C or frozen.
REQUISITION: CD0046 or CD2573
DIVISION: Molecular Diagnostics
INSTRUCTIONS: Blood/bone marrow must be kept at 4°C, accompanied by requisition. Any specimen referred from outside of Nova Scotia Health-Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.

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Uncontrolled When Printed
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Polycythemia vera
Thrombocyt hemia
JAK2 (v6 7f)

LIS Mnemonic: 2LAVDNA

---

**Jo-1**

see Anti-nuclear antibody

Division: Immunopathology

---

**Joint Fluid**

see Synovial Analysis

Division: Hematopathology - Core

---

**K+**

see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

---

**Keppra**

see Levetiracetam

Referred Out: In-Common Laboratories

---

**Kidney Function Tests**

see Creatinine, Plasma; Urea, Plasma; Albumin, Plasma or Uric Acid, Plasma

Division: Clinical Chemistry - Core

---

**Kininogen**

see Fitzgerald Factor

Referred Out: Hamilton General Hospital

---

**KIT Asp816Val**

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

---

**Kleihauer-Betke**

Tube/Specimen: Lavender topped EDTA tube. **Not performed on Males.**

Referred Out: IWK Hematology Lab

Instructions: Keep whole blood refrigerated.
**Do Not Centrifuge.**

Note: If specimens are from a non-Nova Scotia Health Central Zone Hospital; Do not accession and send directly to the IWK Hematology Lab.

LIS Mnemonics: Kleih
<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>KRAS</strong></td>
<td>see Next Generation Sequencing – Solid Tumor panel</td>
</tr>
<tr>
<td>Division</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td><strong>LA</strong></td>
<td>see Extractable-Nuclear Antibodies</td>
</tr>
<tr>
<td>Division</td>
<td>Immunopathology</td>
</tr>
<tr>
<td><strong>Lactate Dehydrogenase</strong></td>
<td>see LD, Serum</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry – Core</td>
</tr>
<tr>
<td><strong>Lactate, Plasma</strong></td>
<td>Grey topped Sodium Fluoride tube, completely filled and kept on ice.</td>
</tr>
<tr>
<td>Tube/Specimen</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Comments</td>
<td>Ensure sample is well mixed; invert minimum 8 times. Label tube with patient information with waterproof ink, immerse in a slurry of ice and water and deliver to Processing area within 30 minutes.</td>
</tr>
<tr>
<td>Shipping</td>
<td>Separate plasma immediately and no longer than 60 minutes from collection. Plasma aliquot is stable for 8 hours at 15 to 25°C or 14 days at 4 to 8°C.</td>
</tr>
<tr>
<td>Alternate Names</td>
<td>Lactic Acid</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>VLACT</td>
</tr>
<tr>
<td><strong>Lactate, Spinal Fluid (CSF)</strong></td>
<td>Sterile plastic screw-top tubes; send immediately to laboratory receiving area within 30 minutes of collection.</td>
</tr>
<tr>
<td>Tube/Specimen</td>
<td>QE 7850_12_05</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Comments</td>
<td>Centrifuge promptly and freeze supernatant; sample is stable for 24 hours refrigerated and 2 months frozen.</td>
</tr>
<tr>
<td>Alternate Names</td>
<td>Lactic Acid</td>
</tr>
<tr>
<td>LIS Mnemonic</td>
<td>CSF Lact Lvl</td>
</tr>
<tr>
<td><strong>Lactic Acid</strong></td>
<td>see Lactate, Plasma and Lactate, Spinal Fluid (CSF)</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td><strong>Lactic Dehydrogenase</strong></td>
<td>see LD, Serum</td>
</tr>
<tr>
<td>Division</td>
<td>Clinical Chemistry - Core</td>
</tr>
</tbody>
</table>
Lactose Tolerance, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Instructions: Collect bloods at 30, 60, 90, 120 and 180 minutes after patient has finished lactose drink.
Specimens must be labeled with collection times.
Comments:
Patient Preparation:
Note: This test is not offered to patients who are <16 years of age.
All Outpatient requests must be booked in advance at one of the following blood collection sites:
HI Blood Collection: 902-473-2452
DGH Blood Collection: 902-465-8305
HCH Blood Collection: 902-792-2037
Fasting and post dosage specimens are required. If glucose result on fasting specimen is >11.0 mmol/L the test will not be continued.
Patients must be fasting 8 hours.
Alternate Names: LTT
LIS Mnemonic: LTT3
3HR LTT

Lamictal
see Lamotrigine

Lamotrigine

Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Instructions: These determinations can be done on micro samples. Send at least 0.2 mL of serum.
Blood should be collected just prior to the next dose (trough collection).
Specimens should not be collected until the blood concentration is at steady state (3-4 half-lives).
Alternate Names: Lamictal
LIS Mnemonic: LAMOT

Latex Fixation
see Rheumatoid Factor

LAV
see HIV-1/HIV-2
LCMV (Lymphocytic Choriomeningitis Virus)

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Gold Stoppered 5.0 mL SST tube</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002A/CD0002B</td>
</tr>
<tr>
<td>Division:</td>
<td>Microbiology-Immunology</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Clinical data should be indicated on the requisition.</td>
</tr>
<tr>
<td>Note:</td>
<td>This test will be referred out by the laboratory.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>RO ROSEr</td>
</tr>
</tbody>
</table>

LD, Fluids

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Miscellaneous Body Fluid: 10.0 mL Body Fluid in sterile plastic screw top tubes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Shipping:</td>
<td>If sending specimen from outside QEII HSC, transport at room temperature.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>Lactate Dehydrogenase</td>
</tr>
<tr>
<td></td>
<td>LDH</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>BF LD</td>
</tr>
</tbody>
</table>

LD, Serum

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Clinical Chemistry - Core</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Requests for testing will only be processed if clinical details are provided in brackets next to the LD request. The term ‘Do not cancel’ will not be accepted.</td>
</tr>
<tr>
<td>Alternate Names:</td>
<td>Lactate Dehydrogenase</td>
</tr>
<tr>
<td></td>
<td>LDH</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>LD</td>
</tr>
</tbody>
</table>

LDH

| Division:                  | Clinical Chemistry - Core                                                        |

LDL-Cholesterol, Plasma

<table>
<thead>
<tr>
<th>Tube/Specimen:</th>
<th>Light Green 4.5 mL Lithium heparin and gel for plasma separation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
</tbody>
</table>
**LEAD, Whole Blood**

**Tube/Specimen:** Royal Blue Trace Element K2 EDTA tube (BD368381).

**Referred Out:** In-Common Laboratories

**Instructions:** Do Not Centrifuge!
Ship refrigerated. Do not freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

**Stability:** 20 days at room temperature and 15 months at 2 to 8°C or frozen.

**LIS Mnemonic:** Lead only
Lead Level RO

---

**Legionella**

**Tube/Specimen:** Urine collected in dry sterile container

**Requisition:** CD0432/CD0433

**Division:** Virology-Immunology

**Note:** Ship at room temperature up to 24 hours or 2 to 8°C within 14 days

**LIS Mnemonic:** I LEGAG

---

**Leishmaniasis – IFA**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** CD0002A/CD0002B

**Division:** Virology-Immunology

**Instructions:** Clinical data should be indicated on the requisition.

**Note:** This test will be referred out by the laboratory.

**LIS Mnemonic:** RO LEISH

---

**Leptospirosis PCR**

**Tube/Specimen:** Sterile urine container, no preservative/Urine

**Requisition:** CD0002A/CD0002B

---

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**Uncontrolled When Printed**
PLM Laboratory Test Catalogue

Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
LIS Mnemonic: RO ROSER

Leptospirosis Serology
Tube/Specimen: Gold Stopped 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
LIS Mnemonic: RO ROSER

Leukemia and Lymphoma Screening – Bone Marrow
Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin
Requisition: CD0046
Division: Hematopathology-Bone Marrow
Instructions: Specimen to be collected at the same time as Bone Marrow Aspiration. Specimens should arrive in the Flow Cytometry lab on the same day of collection, however, must arrive within 24 hours of collection and no later than 14:00 on Fridays (or the day before a holiday). Maintain specimen at room temperature. The requisition must accompany the specimen to the Flow laboratory.
Shipping: An unstained bone marrow slide, peripheral blood slide, patient diagnosis and a copy of the CBC results with differential and requisition must accompany all specimens collected outside the QEII VG site. Note: For specimens collected outside of the QEII VG site please notify the Flow Cytometry laboratory (902-473-5549) in advance when requesting this test. Provide patient name, health card number and referral hospital contact information.
LIS Mnemonic: CELL SM

Leukemia and Lymphoma Screening – Lymph node, Tissue (including Fine Needle Aspirates), CSF and Body Fluids
Please note that these instructions refer only to the portion of the specimen that is being processed for cell surface marker analysis / flow cytometry testing; if the specimens need to be sent for histological, cytological, molecular or other specialized testing please ensure that proper collection procedures are followed as well for those tests. These instructions do not provide information on how to best partition the specimen for the different tests.
Tube/Specimen: Lymph Node/Tissue:
The portion of the lymph node or tissue specimen that is being submitted for cell surface marker / flow cytometry analysis is to be collected and immediately placed in RPMI 1640 medium.
CSF:
Cerebrospinal fluid (CSF) specimens with a low number of cells can be collected without RPMI but need to be received by the Flow Cytometry Laboratory within 30 minutes after collection for adequate processing; if there is an expected delay in transport RPMI solution should be added.
Fluids:
Other body fluids including pleural and peritoneal fluids require the addition of RPMI only if the specimen is not being sent immediately to the laboratory.
Note: The time of collection and the time the RPMI solution is added should be indicated on the requisition. The amount of specimen and the
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Uncontrolled When Printed
Lipase, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: If sending specimen from outside QEII HSC transport frozen plasma on dry ice.
LIS Mnemonic: LIPASE

Lipid Profile

Division: Clinical Chemistry - Core

Lipid Screen

Division: Clinical Chemistry - Core

Lipid Testing

Division: Clinical Chemistry - Core

Lipoprotein (a) (LP(a))

(Do not confuse with APO A1 or B)

Tube/Specimen: Gold topped SST tube. Fasting is recommended by the testing site for best results, however not required.

Stability: Room temperature 24 hours, refrigerated at 2 to 8°C for 7 days and frozen for 6 months.

LIS Mnemonic: LPA

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Uncontrolled When Printed
Liquid biopsy  
see Circulating Tumor DNA

Division: Molecular Diagnostics

Lithium

Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Division: Clinical Chemistry - Core
LIS Mnemonic: LI

Lithium, Whole Blood
(Do not confuse with Lithium, RBC-no longer available)
(Ordering physician must specify)

Tube/Specimen: Royal Blue Trace Element K2 EDTA tube (BD368381).
Referred Out: In-Common Laboratories
Instructions: Do Not Centrifuge! Cannot be tested on plasma.
Ship refrigerated. Do not freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: LIWB

Liver FE, Liver Iron  
see Iron Level Liver RO

Referred Out: In-Common Laboratories

Liver Kidney Microsomal Antibodies (LKM)

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Aliquot serum and freeze.
Send copy of requisition.
LIS Mnemonic: LKMAB

Long Chain Fatty Acid  
see Very Long Chain Fatty Acid

Referred Out: In-Common Laboratories

Low Density Lipoprotein  
see LDL-Cholesterol, Plasma

Division: Clinical Chemistry – Core
### LTT

**See Lactose Tolerance, Plasma**  
**Division:** Clinical Chemistry - Core

### Ludomil

**See Maprotiline Level**  
**Referred Out:** In-Common Laboratories

### Lung Molecular Panel

**See Next Generation Sequencing – Solid Tumor panel**  
**Division:** Molecular Diagnostics

### Lupus Anticoagulant Screen

**Tube/Specimen:** Light Blue Stoppered 2.7 mL buffered sodium citrate x 2 tubes. Tubes must be a full draw.  
**Requisition:** CD0002  
**Division:** Hematopathology - Coagulation  
**Comments:** Includes screening and confirmatory evaluations to detect Lupus Anticoagulants. This is not the same as an anticardiolipin antibody test, which is often referred to as antiphospholipid antibody as well.  
**Referrals:** Send 3 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Handling Information) in polypropylene vials (12x75).  
**Alternate Names:** Inhibitor (Non Specific)

### Luteinizing Hormone

**See LH**  
**Division:** Clinical Chemistry - Core

### Lyme Antibodies

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Requisition:** CD0002A/CD0002B  
**Division:** Virology-Immunology  
**Alternate Names:** Anti Borrelia Antibodies  
Borrelia Antibodies  
Borrelia – Lyme  
**LIS Mnemonic:** LYME

### Lymphoma Protocol

**See B-cell lymphoid clonality**  
**Division:** Molecular Diagnostics

### Lymphoma Protocol

**See T-cell lymphoid clonality**  
**Section:** Management System\PLM\General\PLM Website\General\Test Catalogue\  
**Doc#:** 19453  
**Version:** 162.0 Current  
**Effective Date:** 1/16/2024  
**Page:** 153 of 239  

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**Uncontrolled When Printed**
Lysosomal Acid Lipase Activity

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube. Whole Blood – Do Not Centrifuge.

Referred Out: In-Common Laboratories

Instructions: Send to VG CSA; will be frozen upon arrival.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: LALAB

Lytes see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

Lytes, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

Macroprolactin

Tube/Specimen: One gold topped SST tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot serum into two separate aliquots of at least 1.0 mL each. Freeze!
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: MACPROL

MAG see Myelin Associated Glycoprotein Antibody

Referred Out: In-Common Laboratories

Magnesium, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Division: Clinical Chemistry – Core

LIS Mnemonic: MG

Magnesium, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain

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Uncontrolled When Printed
**Malarial Parasites**

**Tube/Specimen:** Lavender Stoppered 4.0 mL EDTA  
**Requisition:** CD0002  
**Division:** Hematopathology – Microscopy  
**Comments:** Analysis includes CBC, Manual Differential, Malarial rapid Screen, & Malarial Thick & Thin Smear Review.  
**Instructions:** EDTA specimens are acceptable if received in the Core Lab within 4 hours of collection; otherwise 4 Thick and 4 Thin smears are required.  
**Stability:** EDTA specimen: 4 hours at room temperature.

---

**Manganese, Plasma**

**Tube/Specimen:** 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)  
**Referred Out:** In-Common Laboratories  
**Instructions:** **Centrifuge ASAP!**  
Aliquot 3.0 mL plasma into plastic transfer vial. **Freeze.**  
Do not accession for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.  
**Utilization:** Plasma manganese is used for potential nutritional deficiency.  
**Stability:** 20 days at room temperature and 14 months at 2 to 8°C or frozen.  
**LIS Mnemonic:** MANGA P

---

**Manganese, Whole Blood**

**Tube/Specimen:** 6.0 mL Royal Blue Trace Element K2 EDTA tube (BD368381)  
**Referred Out:** In-Common Laboratories  
**Instructions:** **DO NOT Centrifuge!**  
Ship refrigerated. **Do not freeze.**  
Do not accession for non-Nova Scotia Health Central Zone Hospitals

---

The electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.  
Uncontrolled When Printed
PLM Laboratory Test Catalogue

Send copy of requisition.

Utilization: Blood manganese is used for toxicity.
Stability: 20 days at room temperature and 14 months at 2 to 8° C or frozen.
LIS Mnemonic: MANGA WB

Maprotiline Level

Tube/Specimen: Plain red topped tube.
Referred Out: In-Common Laboratories
Note: Royal Blue Trace Element SERUM tubes (BD368380) and lavender topped EDTA plasma tubes are acceptable; indicate sample type on tube.
LIS Mnemonic: MAPROT

Maternal Antibodies Collection

Tube/Specimen: Gold topped SST tube.
Referred Out: IWK Laboratory
Instructions: Send directly to IWK refrigerated.
LIS Mnemonic: MATSCRN

Measles Antibody

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.
Alternate Names: Rubeola
LIS Mnemonic: MEM (IgM Diagnosis) MEG (IgG Immunity)

Measles PCR

Tube/Specimen: Urine collected in dry sterile container, nasopharyngeal swab collected in UTM or throat swab collected in UTM
Requisition: CD0432/CD0433
Division: Virology-Immunology
Shipping: Swabs are stable at 2 to 8°C for 2 days, urine is stable at 2 to 8°C for 24 hours. If longer freeze and ship frozen.

LIS Mnemonic: E MEASLES

Melanoma Associated Retinopathy Panel (MARP) see Anti-Retinal Autoantibody
Referred Out: Mayo Medical Laboratories

Mellaril see Thioridazine Level
Referred Out: In-Common Laboratories

Mercury
Tube/Specimen: Royal Blue Trace Element K2 EDTA tube (BD368381).
Referred Out: In-Common Laboratories
LIS Mnemonic: Mercury

Mercury Level, Random Urine or 24-Hour Urine
Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.
Referred Out: In-Common Laboratories
Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection. Record Total Volume of the 24-hour urine on both the aliquot and the requisition. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Avoid seafood consumption for 5 days prior to collection. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.
Stability: Room temperature 1 day, 2 to 8°C (preferred) for 3 months and frozen for 1 year.
LIS Mnemonic: U Merc 24
U Merc

Metanephrines, 24 Hour Urine
Tube/Specimen: 24 hour urine collected with 25 mL of 6 mol/L (6N) HCL. Refrigerate during collection.
Referred Out: In-Common Laboratories
Instructions: Specimen required: 50 mL urine aliquot of pH adjusted and well-mixed collection. Record Total Volume of the 24-hour urine on both the aliquot and the requisition.
PLM Laboratory Test Catalogue

Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate. Patients should be off Methyldopa for 5 days prior to and during collection. Restrict caffeine, nicotine and alcohol 24 hours prior to and during collection. Refer to Appendix A for pH adjustment instructions.

Stability: 2 to 8ºC for 2 months or frozen for 90 days.

LIS Mnemonic: U24 Metan

-----------------------------------------------------------------------------------------------------------------------------
Metanephrines, Plasma
Tube/Specimen: Lavender topped EDTA tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
Aliquot at least 1.0 mL of plasma within 2 hours of collection and freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: FRMET P

-----------------------------------------------------------------------------------------------------------------------------
Met HB
see Methemoglobin
Division: Clinical Chemistry - Core

-----------------------------------------------------------------------------------------------------------------------------
Methanol
Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations.

Comments: Analysis includes quantitation of Formic Acid, the primary toxic metabolite of Methanol.
Alternate Names: Methyl Alcohol
Formic Acid
LIS Mnemonic: METHANOL
FORMIC ACID
ISOPROPAOL QUANTITATION

-----------------------------------------------------------------------------------------------------------------------------
Methemoglobin
Tube/Specimen: Dark green stoppered, lithium heparinized whole blood on ice (tube must be full).
Requisition: CD3211_05 – 2022
Division: Clinical Chemistry - Core
Comments: Label barrel or tube with patient information in waterproof ink, immerse in slurry of ice and water and deliver to Processing Area within 30 minutes.
PLM Laboratory Test Catalogue

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 473-4340 when specimen is in transport and when it is expected. Specimen must be kept cold but not frozen.

Alternate Names: Met Hb

LIS Mnemonic: METHB

---

Methotrexate

Tube/Specimen: Plain Red Stoppered 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: These determinations can be done on micro samples. Send at least 0.1 mL of serum for each.

Blood should be collected at various time intervals, according to the protocol being used.

Sample should be protected from the light (wrap the tube in tin foil).

Stability: 72 hours at room temperature; 14 days at 2 to 8°C; 28 days frozen

Alternate Names: Celontin

LIS Mnemonic: MTX

---

Methyl Alcohol see Methanol

Division: Clinical Chemistry - Toxicology

---

Methylmalonic Acid Quantitative

Tube/Specimen: Gold topped SST tube.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.5 mL of serum into plastic vial and freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: 48 days frozen.

LIS Mnemonic: MMAS

---

MHA-TP see Syphilis Serology

Division: Virology-Immunology

---

Microalbumin, Urine see Albumin, Urine

Division: Clinical Chemistry - Core

---

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Uncontrolled When Printed
<table>
<thead>
<tr>
<th>Test</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microfilaria</td>
<td>Hematopathology-Microscopy</td>
</tr>
<tr>
<td>Microglobulin, Beta 2, Urine</td>
<td>see Beta 2 Microglobulin, Urine</td>
</tr>
<tr>
<td>Microsatellite Instability Testing</td>
<td>see MSI</td>
</tr>
<tr>
<td>Microsomal Antibodies</td>
<td>see Anti-Thyroid Peroxidase Antibodies</td>
</tr>
<tr>
<td>Mitotane</td>
<td>Plain Red tube, In-Common Laboratories</td>
</tr>
<tr>
<td>Mix (50-50)</td>
<td>see PT 50% Mix or PTT 50% Mix</td>
</tr>
<tr>
<td>MLPA</td>
<td>see CLL MLPA</td>
</tr>
<tr>
<td>MMF</td>
<td>see Mycophenolate</td>
</tr>
<tr>
<td>Mofetil</td>
<td>see Mycophenolate</td>
</tr>
<tr>
<td>Molecular Testing for IWK</td>
<td>see IWK Molecular Testing</td>
</tr>
</tbody>
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*Uncontrolled When Printed*
<table>
<thead>
<tr>
<th>Test Description</th>
<th>Referred Out</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mono</td>
<td>see Epstein-Barr Virus</td>
<td>Microbiology-Immunology</td>
</tr>
<tr>
<td>Monosialoganglioside Gm1 (IgM)</td>
<td>see GM1 Ganglioside Antibody</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Monospot</td>
<td>see Epstein-Barr Virus</td>
<td>Microbiology-Immunology</td>
</tr>
<tr>
<td>MPA</td>
<td>see Mycophenolate</td>
<td>Clinical Chemistry - Toxicology</td>
</tr>
<tr>
<td>MPL</td>
<td>see Next Generation Sequencing – Myeloid panel</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td>MPL exon 10 mutation</td>
<td>see Next Generation Sequencing – Myeloid panel</td>
<td>Molecular Diagnostics</td>
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<tr>
<td>Mpox Virus PCR</td>
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<tr>
<td>Tube/Specimen: Swab collected in UTM, aspirate, tissue</td>
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<tr>
<td>Requisition: CD0432/CD0433</td>
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<tr>
<td>Division: Virology-Immunology</td>
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<tr>
<td>Shipping: Specimens are stable at 2 to 8°C for 3 days. If longer freeze and ship frozen.</td>
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<td>LIS Mnemonic: E MKPX</td>
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<tr>
<td>MSI</td>
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<tr>
<td>Tube/Specimen: Tissue in paraffin block.</td>
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<td>Requisition: CD2573</td>
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<tr>
<td>Division: Molecular Diagnostics</td>
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<tr>
<td>Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.</td>
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<tr>
<td>Alternate Names: Microsatellite instability testing</td>
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</tbody>
</table>
MTHFR gene mutation

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. Alternatively, send fixed tissue in paraffin block.
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA. If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
Alternate Names: Methylene tetrahydrofolate reductase
LIS Mnemonic: MTHFR GENE

Mucopolysaccharide Screen, Urine (Polysaccharide Screen) (Acid Mucopolysaccharide)

Tube/Specimen: Collect a random urine sample; first morning collection preferred.

Referred Out: In-Common Laboratories

Instructions: Aliquot 5 mL of well mixed urine; freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Not stable at room temperature; 2 to 8°C for 1 week and frozen >1 week.

Note: Provide age, gender and clinical history to facilitate interpretation of analytical findings and recommendation for further testing or consultation.

LIS Mnemonic: U MUCO

Mumps Antibody

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology

LIS Mnemonic: MPSG (IgG Immunity)
MPSM (IgM Diagnosis)-only performed upon request from Public Health, all others will be canceled and be tested for Mumps IgG

Mumps PCR

Tube/Specimen: Urine collected in dry sterile container and buccal swab collected in UTM

Requisition: CD0432/CD0433
PLM Laboratory Test Catalogue

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 8°C for 2 days, urine is stable at 2 to 8°C for 24 hours. If longer freeze and ship frozen.

LIS Mnemonic: E MPS

----------

Muscle Autoimmune Myositis Panel see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

----------

Mutation analysis of BCR-abl transcripts see Next Generation Sequencing-Myeloid Panel

(BCR-ABL Mutation, ABL Kinase domain mutation)

Division: Molecular Diagnostics

----------

MYC FISH

Tube/Specimen: Tissue in paraffin block

Requisition: CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

----------

Mycobacteriology Referred-out Identification, M. leprae request, Susceptibility, Genotyping Services

Tube/Specimen: Isolate or Mgit Suspension, Identification, M. leprae testing request (skin scraping slides and or tissues on slide or block)

Referred Out: National Reference Centre for Mycobacteriology (NRCM)

Instructions: Susceptibility, Genotyping Services M. tuberculosis (MTB) shipped with Category A requirements

Non MTB shipped as Biological Substances Category B

Remaining shipped as Exempt Human Specimens

National Reference Centre for Mycobacteriology (NRCM) requisition

----------

Mycobacteriology Referred-out specimens for Mycobacterium leprae (skin scraping slides and or Tissue on slide or block)

Tube/Specimen: Skin scraping slides and or tissues on slide or block

Referred Out: NHDP

Instructions: Shipped as Exempt Human Specimens

National Hansen’s Disease Programs (NHDP) requisition

LIS Mnemonic: ROSP

----------

Mycology (Sporothrix, Coccidioides immitis, Cryptococcus, Histoplasma capsulatum, Blastomyces dermatitidis, Aspergillosis)

Tube/Specimen: Isolate

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\
Doc#: 19453

Version: 162.0 Current
Effective Date: 1/16/2024
Page 163 of 239

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Uncontrolled When Printed
Referred Out: National Centre for Mycology
Instructions: Primarily shipped as Biological Substances category B. If classified as Category A, appropriate handling occurs. Specimens are shipped mainly for identification, confirmation of identification or susceptibility.

Mycology (18S)

Tube/Specimen: Isolate
Referred Out: The Hospital for Sick Children
Instructions: Primarily shipped as Biological Substances category B. If classified as Category A, appropriate handling occurs. Specimens are shipped mainly for identification, confirmation of identification or may involve susceptibility.

Mycophenolate

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: This determination can be done on micro samples when necessary. Centrifuge at room temperature within 2 hours of collection and aliquot a minimum of 0.2 mL of plasma into a plastic vial.
Stability: Plasma: 1 week at 2 to 8 °C and frozen for 6 months.
Whole Blood: 2 hours at room temperature. Refrigerated and frozen samples are not acceptable.
Comments: Pre-dose specimen is required.
Alternate Names: MPA
MMF
CellCept
Mofetil
LIS Mnemonic: MYCO

Mycoplasma genitalium

Tube/Specimen: Aptima Multitest swab, urine collected in dry sterile container.
Requisition: CD0432/CD0433
Division: Virology-Immunology
Shipping: Swabs are stable at 2 to 30°C for 60 days, urine is stable at 2 to 30°C for 24 hours.
LIS Mnemonic: MYGEN

Mycoplasma PCR

Tube/Specimen: Amies swab, Throat (specimen of choice) or Nasopharyngeal swab
Requisition: CD0432/CD0433
Division: Microbiology-Immunology

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Uncontrolled When Printed
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

---

**MYD88**  
see Next Generation Sequencing – Myeloid panel

**Division:** Molecular Diagnostics

---

**Myelin Associated Glycoprotein (MAG) Antibody**

**Tube/Specimen:** Gold topped SST tube.
**Referred Out:** In-Common Laboratories
**Instructions:** Centrifuge at room temperature. Aliquot serum and freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

**Stability:** Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.
**LIS Mnemonic:** MAG

---

**Myelin Oligodendrocyte Glycoprotein (MOG) Antibody**  
see Neuromyelitis Optica (NMO_IgG)

**Referred Out:** In-Common Laboratories

---

**Myeloma Screen, Serum & Plasma**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST & Light Green 4.5 mL Lithium heparin and gel for plasma separation
**Requisition:** CD0002
**Division:** Clinical Chemistry - Immunology
**Note:** This is a care set, used for ordering convenience, composed of the following 3 assays: Immunoglobulins (GAM), Total Protein, and Protein Electrophoresis. Please see separate listings for each of these in this catalogue for details.
**LIS Mnemonic:** MYELOMA SCREEN

---

**Mysoline**  
see Primidone Level

**Referred Out:** In-Common Laboratories

---

**N-Acetylprocainamide**  
see Procainamide/NAPA Level

**Referred Out:** In-Common Laboratories

---

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Uncontrolled When Printed
N-Methylhistamine, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container. Preservative 6M Hydrochloric Acid or Sodium Carbonate is acceptable. Refrigerate during collection.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection. Record Total Volume on both the aliquot and the requisition. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHISU24

N-Methylhistamine, Random Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHIS U

Na+ see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

NAAT testing for Microbiology Donor Transplant

Tube/Specimen: Two 4.0 mL EDTA Lavender topped tubes.

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Send whole blood to 4th floor Microbiology for processing. Send copy of requisition.

LIS Mnemonic: NAAT

NABS see Interferon beta Neutralizing Antibodies

Referred Out: In-Common Laboratories

Nasopharyngeal aspirate for Bordetella pertussis (Culture or PCR)

Tube/Specimen: Nasopharyngeal aspirate
Neonatal Autoimmune Thrombocytopenia

**Tube/Specimen:**  
From Mother and Father: Seven (7.0 mL) yellow topped ACD tubes or nine (4.5 mL) light blue topped sodium citrate tubes and one plain red topped tube.  
From Baby: One (2.0 mL) lavender topped EDTA tube.

**Referred Out:** McMaster University HSC  
**Instructions:** Send to Hematopathology Coagulation lab for processing.

**LIS Mnemonic:** Miscellaneous Hematology

---

Neoral  
see Cyclosporine

**Division:** Clinical Chemistry - Toxicology

---

Neuromyelitis Optica (NMO_IgG), CSF

**Tube/Specimen:** Minimum 1.0 mL CSF.

**Referred Out:** In-Common Laboratories  
**Instructions:** Aliquot in plastic vial. Freeze at once.  
Do not accession or refer for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.  
**Stability:** Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.  
**LIS Mnemonic:** NMOFC

---

Neuromyelitis Optica (NMO_IgG), Serum

**Tube/Specimen:** Gold topped SST tube.

**Referred Out:** In-Common Laboratories  
**Instructions:** Centrifuge at room temperature.  
Aliquot 2.0 mL serum into plastic vial. Freeze.  
Do not accession or refer for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.  
**Stability:** Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.  
**LIS Mnemonic:** NMO

---

Neurontin  
see Gabapentin Level

**Referred Out:** In-Common Laboratories
**Neutrophil Oxidative Burst**

*see Dihydrododamine (DHR)*

**PLM Laboratory Test Catalogue**

Referred Out: Mayo Medical Laboratories

---

**Next Generation Sequencing – Myeloid Panel**

**Tube/Specimen:** 4.0 mL EDTA Lavender stoppered tube
- Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
- Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
- Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
- DNA: Stability – 3 months at 4°C or frozen.

**Requisition:** CD0046 or CD2573

**Division:** Molecular Diagnostics

**Instructions:**
- Blood/bone marrow must be kept at 4°C, accompanied by requisition.
- Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
- If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

**Alternate Names:**
- ABL Kinase domain mutation
- BCR-ABL Mutation
- CALR
- JAK2 exon 12
- KIT Asp816Val
- MPL
- MPL exon 10 mutation
- Mutation Analysis of BCR-abl transcripts
- MYD88
- NGS
- QBCRA-Mutation Analysis
- TP53 mutation

**LIS Mnemonic:** 2LAVDNA

---

**Next Generation Sequencing - Solid Tumor Panel**

**Tube/Specimen:** Tissue in paraffin block.

**Requisition:** CD2573

**Division:** Molecular Diagnostics

**Instructions:** To be ordered only by a Nova Scotia Health Central Zone pathologist.

**Alternate Names:**
- BRAF
- KRAS
- Lung Molecular Panel

---

**NGS**

*see Next Generation Sequencing-Myeloid Panel*

**Division:** Molecular Diagnostics

---

**Niacin**

*see Vitamin B3*
### Nicotinic Acetylcholine Receptor Antibody  
**See Acetylcholine Receptor Antibodies**

**Referred Out:** In-Common Laboratories

<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
<th>Tube/Specimen</th>
<th>Instructions</th>
<th>Stability</th>
<th>LIS Mnemonic</th>
</tr>
</thead>
<tbody>
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### NMDA (NR1) Receptor Antibody, Serum or CSF

**Tube/Specimen:** Gold topped SST tube or 3.0 mL CSF

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. **Freeze.** Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition.

**Stability:** Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

**LIS Mnemonic:** NMDA  
NMDA CSF

<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Clinical Chemistry - Toxicology</td>
</tr>
</tbody>
</table>

### Noradrenaline  
**See Catecholamines, Total Plasma**

**Referred Out:** In-Common Laboratories

<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
<th>Division</th>
</tr>
</thead>
<tbody>
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<td></td>
<td></td>
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### Nordoxepin  
**See Doxepin Level**

**Referred Out:** In-Common Laboratories

### Norepinephrine  
**See Catecholamines, Total Plasma**

**Referred Out:** In-Common Laboratories

### Norepinephrine, Urine  
**See Catecholamines, Urine**

**Division:** Clinical Chemistry - Toxicology

### Norfluoxetine  
**See Fluoxetine Level**

**Referred Out:** In-Common Laboratories

<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
<th>Division</th>
</tr>
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<tbody>
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### Norovirus PCR

**Tube/Specimen:** Stool collected in dry sterile container.

**Requisition:** CD0432/CD0433

**Division:** Virology-Immunology

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PLM Laboratory Test Catalogue

Comments: Assay tests for Rotavirus and Adenovirus as well.

Shipping: Specimens are stable at 2 to 8°C for 3 days. If longer freeze and ship frozen.

LIS Mnemonic: E RAN

---

Nortriptyline  see Amitriptyline

Referred Out: In-Common Laboratories

---

NT-ProBNP

Tube/Specimen: Light Green 4.5 mL Lithium heparin gel separator tube/plasma (2.0 mL)
Requisition: CD0002A or CD0002B
Division: Clinical Chemistry - Core
Instructions: Centrifuge at room temperature within 2 hours after collection. Shipping from other zones: Serum; aliquot 2.0 mL into a plastic vial. Store and send at -20°C
Stability: 6 days at 2 to 8°C; 1 year at -20°C
Comments: The test will be canceled if a repeat request is made within 6 months of previous, unless for specific clinical reasons, “Do not cancel NT-ProBNP (or BNP)” is written on the requisition form.
Alternate Names: N-terminal B-Type natriuretic peptide (BNP)
LIS Mnemonic: BNP

---

Nuclear Factor  see Anti-Nuclear Antibody

Division: Immunopathology

---

Occult Blood, Stool

Tube/Specimen: Random stool collection
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Amount Required: Smear of stool on hemoccult card
Comments: Specimen is smeared on hemoccult card by patient or nursing staff. Specimens in other containers will not be accepted. Patients should follow a high fiber diet for 3 days prior to and during collection. All meats, turnip, horseradish, gravy, meat drippings, iron pills and vitamin C preparations should be restricted.
LIS Mnemonic: ST OB

---

Oligoclonal Bands

Tube/Specimen: Minimum 1.0 mL CSF and a minimum 1.0 mL of serum (plain red or gold topped tube), ideally collected at the same time, but no more than 48 hours apart.

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Both samples are required for testing.

Referred Out: In-Common Laboratories

Instructions: CSA (VG & HI sites): Centrifuge, aliquot and freeze serum in the CSA receiving area. Centrifuge, aliquot and freeze at least 1.0 mL serum. Freeze at least 1.0 mL CSF. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Testing includes immunoglobulins. Send copy of requisition.

LIS Mnemonic: Oligo

Organic Acid Analysis, Urine

Tube/Specimen: 10.0 mL random urine. Collection should be a “clean catch” technique to minimize bacterial contamination.

Referred Out: IWK Metabolic Lab

Instructions: Freeze. Timed specimens are accepted (8-hour, 12-hour or 24-hour collections) Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to the IWK Metabolic Lab

LIS Mnemonic: ORGAT

Osmolality, Fecal

Tube/Specimen: 5.0 mL random stool sample in naturally liquid form.

Referred Out: In-Common Laboratories

Instructions: Formed stool not acceptable. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: OSMO F

Osmolality, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: OSMO

Osmolality, Random or 24-Hour Urine

Tube/Specimen: Random collection using mid-stream technique to eliminate bacterial contamination in a plain container (preferred), or 24-hour urine collection in a plain container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 162.0 Current
Doc#: 19453
Effective Date: 1/16/2024
Page 171 of 239

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Uncontrolled When Printed
PLM Laboratory Test Catalogue

Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

Stability: Room temperature for 3 hours, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U OSMO
              U24 OSMO

Osteocalcin

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature within 4 hours of collection.
             Aliquot at least 1.0 mL serum and freeze.
             Do not accession for non-Nova Scotia Health Central Zone Hospitals
             Send copy of requisition.
Stability: Ambient 8 hours, refrigerated 3 days, frozen 3 months.
LIS Mnemonic: OSTEO

Ovarian Cancer Antigen see CA125

Division: Clinical Chemistry - Core

Oxalate, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container. Refrigerate during collection.
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Specimen required: 4 mL urine aliquot of pH adjusted and well-mixed collection.
             Record Total Volume of the 24-hour urine on both the specimen aliquot and requisition.
             Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
             Patients should refrain from taking excessive amounts of Vitamin C or from consuming Vitamin C rich food for at least 48 hours prior to urine collection.
             Refer to Appendix A for pH adjustment instructions.
             Random Oxalate specimens require a pH <8.0.
Stability: Room temperature for 1 hour, 2 to 8°C (preferred) for 7 days (pH<3.0) and frozen for 2 weeks (pH<3.0).
LIS Mnemonic: U24 OXA
              U OXA R [IWK samples only]

Oxygen Content see Blood Gases

Division: Clinical Chemistry - Core

Oxygen Saturation see Blood Gases

Division: Clinical Chemistry - Core

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Uncontrolled When Printed
Pancreatic Cyst Fluid for Amylase and CEA  
see Amylase and CEA, Pancreatic Cyst Fluid and  
CEA and Amylase, Pancreatic Cyst Fluid

Division: Clinical Chemistry - Core

Pancreatic Polypeptide

Tube/Specimen: Two lavender topped EDTA tubes. Keep cold on ice!  
Patient must be fasting 8 hours prior to collection unless instructed otherwise by the ordering physician.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge (refrigerated centrifuge is not required), aliquot 3.0 mL plasma in plastic vial and freeze immediately.  
Do not accession or refer for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.

LIS Mnemonic: HPP

Paraneoplastic Antibodies, CSF (Includes anti Ri, Yo, Hu)

Tube/Specimen: Minimum 2.0 mL CSF

Referred Out: In-Common Laboratories

Instructions: Aliquot at least 2.0 mL CSF into plastic vial. Freeze at once.  
Do not accession or refer for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.

LIS Mnemonic: PNP CSF

Paraneoplastic Antibodies, Serum (Includes anti Ri, Yo, Hu)

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.  
Aliquot 3.0 mL serum into plastic vial. Freeze at once.  
Do not accession for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.

Stability: Room temperature 4 days; refrigerated at 2 to 8 ºC for 7 days and frozen >6 months.

LIS Mnemonic: PNP Ab

Parasite Identification

Tube/Specimen: Organism for identification

Referred Out: Nova Scotia Museum of Natural History

Instructions: Shipped as Category B.
Parasite Screening

Tube/Specimen: Stool collected in SAF fixative
Requisition: CD0432/CD0433
Division: Virology-Immunology
Comments: EIA for Giardia/Cryptosporidium is done unless there is a history indicated on the requisition of travel, immigration, immunosuppression, worm seen in stool, or for children under 16. Indicate relevant information on the requisition.
Shipping: Specimen in SAF fixative can be shipped at room temperature within 7 days
LIS Mnemonic: PARSCR (EIA screen)
M PAR (if any of the information above is indicated)

Parathyroid Hormone Intact

Tube/Specimen: One Lavender stoppered 4.0 mL EDTA tube. This tube is not to be shared.
Requisition: CD0002
Division: Clinical Chemistry – Core
Instructions: The tube collected for this assay cannot be shared for other assays. Overnight fasting (8 hours) is preferred. Please indicate fasting status.
Shipping: Plasma can be stored for 48 hours at 2 to 8°C. Freeze and send frozen plasma, if longer.
Alternate Names: Intact PTH
PTH Intact
LIS Mnemonic: PTH

Parathyroid Hormone Related Peptide
Parathyroid Hormone Related Protein

Referred Out: In-Common Laboratories

Paroxetine Level

Tube/Specimen: Plain red topped tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot serum into plastic vial and freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition. Note: Royal Blue Trace Element SERUM tube (BD368380) and lavender topped EDTA plasma tubes also acceptable. Indicate sample type on aliquot tube.
LIS Mnemonic: PAROX
Paroxysmal Nocturnal Hemoglobinuria

Tube/Specimen: Lavender stoppered 4.0 mL EDTA
Requisition: CD0002C
Division: Hematopathology – Flow Cytometry
Instructions: Specimen must arrive in Flow Cytometry within 24 hours of collection and no later than 14:00 on Fridays (or day before Holiday). The requisition must accompany the specimen to the Flow laboratory.
Note: Please notify Flow Cytometry lab at 902-473-5549 when requesting this test.
Alternate Names: PNH CD55/59 Testing
LIS Mnemonic: SM PNH

Partial Thromboplastin Time see PTT

Division: Hematopathology - Core

Parvovirus B19 Antibody

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Comments: In investigating a viral exanthem, rubella and measles serology should also be requested.
Instructions: Indicate on the requisition if immunity (IgG) or recent infection (IgM) is required.
LIS Mnemonic: PARVG (IgG Immunity) PARVM (IgM Diagnosis)

Parvovirus PCR

Tube/Specimen: One Lavender stoppered 4.0 mL EDTA tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes and ship one 2 mL aliquot at 2 to 8°C.
LIS Mnemonic: RO PARVOPCR

Paxil see Paroxetine Level

Referred Out: In-Common Laboratories

PBG, Random Urine see Porphyrin Precursors, Random Urine
PBG Deaminase  
see Porphobilinogen Deaminase

PCP (Pneumocystis jirovecii) PCR

- Tube/Specimen: BAL, bronchial wash, induced sputum, bronchial brush, tissue
- Requisition: CD0432/CD0433
- Division: Virology-Immunology/Bacteriology
- Comments: Positive or indeterminate PCR specimens will have DFA testing performed.
- Shipping: Specimens are stable at 2 to 8°C for 3 days for PCR. However, they must be received in the Central Zone microbiology laboratory within 24 hours for slide preparation.
- LIS Mnemonic: E PCP

Pemphigoid Antibody  
see Anti-Pemphigoid Antibody

Peripheral Smear

- Division: Hematopathology - Microscopy
- Comments: Can be done with Profile

PFA  
see Platelet Function Assay

pH, Body Fluid

- Tube/Specimen: Body Fluid collected anaerobically in a pre-heparinized Blood gas syringe on ice.  
  Maximum heparin ratio must be <10 IU/mL fluid  
  Recommended volume: 1 mL  
  Minimum volume: 0.7 mL
- Requisition: CD0002
- Division: Clinical Chemistry - Core
- Instructions: Do not transport with needle attached. Label barrel with patient information in waterproof ink, immerse in a slurry of ice water and deliver to Processing Area immediately. Indicate fluid type on requisition.
- Shipping: Specimen must be kept cold but not frozen.
**Phenobarbital**

**Tube/Specimen:** Plain Red Tube 6 or 10 mL

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:**
- These determinations can be done on micro samples. Send at least 0.5 mL of serum for each.
- Blood should be collected just prior to the next dose (trough collection).
- Specimens should not be collected until the blood concentration is a steady state (3-4 half-lives).

**Alternate Names:** Dilantin

LIS Mnemonic: PHENO

**Phenytoin**

**Tube/Specimen:** Plain Red Tube 6 or 10 mL

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Instructions:**
- Blood should be collected just prior to next dose (trough collection).
- Specimens should not be collected until the blood concentration is at a steady state (3-4 half-lives).

**Alternate Names:** Dilantin

LIS Mnemonic: PHENY

**Phenytoin, Free**

*(Do Not Confuse with Phenytoin)*

**Tube/Specimen:** Plain red topped tube. **Physician’s order MUST state “Free” or “HPLC”**.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature and aliquot at least 1.0 mL serum into a plastic vial.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Stability:**
- One month refrigerated or 6 months frozen. Specimen may be re-frozen once.

LIS Mnemonic: FRDIL

**Philadelphia Chromosome**

*see BCR/abl Translocation (RT PCR)*

**Division:** Molecular Diagnostics

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**Uncontrolled When Printed**
### Phosphatase, Alkaline

**Division:** Clinical Chemistry - Core

### Phosphate

**Division:** Clinical Chemistry - Core

### Phosphorous Inorganic

**Division:** Clinical Chemistry - Core

### Phosphorous, Plasma

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Alternate Names:** Inorganic Phosphorous Phosphate Phosphorus, Inorganic PO4  
**LIS Mnemonic:** PHOS

### Phosphorous, Random Urine or 24-Hour Urine

**Tube/Specimen:** Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Instructions:** Specimen required: 4 mL urine aliquot from pH adjusted and well-mixed collection.  
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.  
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.  
Refer to Appendix A for pH adjustment instructions.  
**Stability:** Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.  
**Alternate Names:** Inorganic Phosphorous Phosphate Phosphorus, Inorganic PO4  
**LIS Mnemonic:** U24 PHOS U PHOS

### PI Typing

**see Alpha-1-Antitrypsin Phenotyping**
Pituitary Gonadotropins see LH

Division: Clinical Chemistry - Core

Plasma Hemoglobin

Tube/Specimen: Dark green stoppered lithium heparin tube
Requisition: CD0002
Division: Hematopathology - Core
Shipping: Send whole blood to the laboratory within three hours of collection. If shipping is delayed, double-spin and freeze the plasma. Send the frozen sample on dry ice.

Plasminogen

Tube/Specimen: Light Blue topped Sodium Citrate tube.
Referred Out: Hamilton General Hospital
Instructions: Send copy of requisition and specimen to Hematopathology Coagulation lab for processing.
Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.
LIS Mnemonic: Plasminogen

Plasminogen Activator Inhibitor

Tube/Specimen: Light Blue topped Sodium Citrate tube. Patient should not be on anticoagulant therapy.
Referred Out: Mayo Medical Laboratories
Instructions: Send copy of requisition and sample to Hematopathology Coagulation lab for processing.
Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.
LIS Mnemonic: PAI

Platelet Aggregation

Requisition: CD0002
Division: Hematopathology - Coagulation
Instructions: Prior arrangements for analysis must be made with Hematology Lab phone 902-473-4059 by an approved Hematologist. Blood is taken under supervision of Advanced Coagulation Technologist. Lab must know all patients’ medication for past 10 days.

Platelet Count see Profile
PLM Laboratory Test Catalogue

Division: Hematopathology - Core

Platelet Function Assay
Tube/Specimen: Three light-blue stoppered plastic 2.7 mL Sodium Citrate tubes. Collection must follow a non-additive tube. Collect a lavender stoppered EDTA tube and order a CBC. Keep specimens at room temperature.

Division: Hematopathology - Coagulation

Instructions: Samples must be received within three (3) hours of collection. Traumatic draws should be avoided. Test is available Monday to Friday until 1600 hours.

Comments: Patient medications and bleeding/bruising history should be listed on separate lab questionnaire indicated below. The VG AC Platelet Function Analyzer Questionnaire Form 5972 must be entirely completed and must accompany the specimens.

Alternate Names: PFA

Platelet Function Studies see Platelet Aggregation

Division: Hematopathology - Coagulation

Platelet Typing see Anti-Platelet Antibody

Referred Out: McMaster University Health Sciences Centre

PML-RAR gene fusion
Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C. Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: RAR alpha Retinoic acid receptor Translocation (15; 17) t (15;17)

LIS Mnemonic: 2LAVDNA

Pneumococcal Immunity
Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO PNEUMO

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**Pneumococcal Typing**  
(Blood, CSF, Sterile site isolates)

Tube/Specimen: Blood, CSF, sterile site isolates.
Referred Out: National Microbiology Laboratory
Instructions: Shipped as Category B.

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**PNH**  
see Paroxysmal Nocturnal Hemoglobinuria

Division: Hematopathology – Flow Cytometry

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**PNP Antibodies**  
see Paraneoplastic Antibodies, Serum and Paraneoplastic Antibodies, CSF

**PNP Antibodies, CSF**

Referred Out: In-Common Laboratories

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**PO4**  
see Phosphorus, Plasma

Division: Clinical Chemistry - Core

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**Polycythemia Vera**  
see Jak2 gene mutation

Division: Molecular Diagnostics

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**Polyoma PCR**

Tube/Specimen: One lavender stoppered 4.0 mL EDTA tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes and ship one 2 mL aliquot at 2 to 8°C.
LIS Mnemonic: POLY

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**Polysaccharide Screen**  
see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

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**Porphobilinogen Deaminase**

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\  
Doc#: 19453  
Version: 162.0 Current  
Effective Date: 1/16/2024  
Page 181 of 239

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Uncontrolled When Printed
(ALA Dehydratase, Uro-I-Synthetase, Hydroxymethylbilane Synthase (Do Not Confuse with Hydroxymethylbilane Synthase Gene))

**Tube/Specimen:** Dark green topped Lithium Heparin tube wrapped in foil to **protect from light** and a lavender topped EDTA tube.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Send dark green topped heparinized tube wrapped in foil to the Referred-out bench; **Do Not Centrifuge!**
- Send lavender topped EDTA tube to Hematopathology – Core lab for a hematocrit.
- Do not freeze.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**LIS Mnemonic:** PBGD

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**Porphykins, Blood**

**see Porphyrin Screen, Plasma**

**Referred Out:** In-Common Laboratories

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**Porphyrin Precursors, Random Urine or 24-Hour Urine**

(Do Not Confuse with PBGD)

**Tube/Specimen:** **Protect from light and refrigerate!**
- Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection in a container with 5g Sodium Carbonate.
- Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection in a container with 5g Sodium Carbonate.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Specimen required: 20 mL aliquot of well-mixed urine covered in foil to protect from light.
- Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Stability:** Refrigerated 2 days; frozen 1 month

**Alternate Names:** Delta-Aminolevulinic Acid
Porphobilinogen

**LIS Mnemonic:** PBGRU

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**Porphyrin Screen, 24-Hour Urine**

**Tube/Specimen:** 24-hour urine collection in container with 5g Sodium Carbonate

**Protect from light and refrigerate during and after collection!**

**Referred Out:** In-Common Laboratories

**Instructions:**
- Specimen required: 20 mL aliquot of well-mixed urine covered in foil to protect from light.
- Record total volume.
- Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
- Preservative MUST be added, and sample frozen within 2 days of collection.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Stability:** Refrigerated 2 days; frozen 1 month (Apr 26/16)

**LIS Mnemonic:** PORPHS U
**Porphyrin Screen, Plasma**

**Tube/Specimen:** Foil-covered Lavender topped EDTA tube.

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature and aliquot 2.0 mL plasma. Protect from light and freeze immediately. Avoid hemolysis. Store and send frozen. Do not accession for non-Nova Scotia Health Central Zone Hospitals

**Stability:** Frozen: 2 months

**LIS Mnemonic:** MISC REF

---

**Porphyrin Screen, Fecal**

**Tube/Specimen:** 50g stool in a sterile container. Protect from light!

**Referred Out:** In-Common Laboratories

**Instructions:** Freeze.

**LIS Mnemonic:** ST Porph

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**Post-BMT**

**Division:** Molecular Diagnostics

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**Post-BMT recipient**

**Division:** Molecular Diagnostics

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**Post Transfusion Purpura**

**Tube/Specimen:** Seven (7.0 mL) Yellow topped ACD tubes or nine (4.5 mL) Light Blue topped Sodium Citrate tubes and one (10.0 mL) Red topped tube.

**Referred Out:** McMaster University HSC

**Instructions:** Send to Hematopathology Coagulation lab for processing. Do not accession for non-Nova Scotia Health Central Zone Hospitals

---

**Potassium, Fluids**

**Tube/Specimen:** Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core
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PLM Laboratory Test Catalogue

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
LIS Mnemonic: PREALB

Pre-BMT donor
Division: Molecular Diagnostics

Pre-BMT recipient
Division: Molecular Diagnostics

Pregnancy, Urine
Qualitative urine HCG (urine pregnancy) testing will no longer be offered as of Feb 4, 2019

Prekallikrein
Referred Out: Hamilton General Hospital

PRENAT
Tube/Specimen: Lavender topped EDTA tube.
Referred Out: IWK
Instructions: Send directly to IWK refrigerated. Do not send to Referred-out and Research bench.
LIS Mnemonic: PRENAT

Primidone Level
Tube/Specimen: Plain Red topped tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 0.5 mL of serum into a plastic vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.
LIS Mnemonic: Prim

Procarainamide/NAPA Levels
Tube/Specimen: Plain Red topped tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
Aliquot 1.0 mL of serum into a plastic vial. **Freeze**.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

**LIS Mnemonic:** Proc/NAPA

---

**Profile, AutoDiff**

**Tube/Specimen:** Lavender Stopped 4.0 mL EDTA

**Requisition:** CD0002

**Division:** Hematopathology - Core

**Comments:** Testing includes automated differential, WBC count, hematocrit (HCT), hemoglobin (HB), platelet count, and RBC count.

**Note:** Differentials are automatically performed on every profile. If there are concerns then a manual differential will be performed.

**LIS Mnemonic:**
- CBC
- CBC Auto Diff
- CBC WAM
- Profile Auto Diff
- Profile, P

---

**Profile, AutoDiff with Citrate for Platelet**

**Tube/Specimen:** Lavender Stopped 4.0 mL EDTA and Light Blue Stopped plastic 2.7 mL Sodium Citrate tubes; must be a full draw.

**Requisition:** CD0002 – write ‘Citrate for Platelet’ under ‘Other tests’

**Division:** Hematopathology – Core

**Instructions:** DO NOT CENTRIFUGE

**Comments:** Testing includes automated differential, WBC count, RBC count, hematocrit (HCT), hemoglobin (HB), and platelet count (result from Citrate, if needed).

**Note:** CBC with AutoDiff testing is completed on EDTA sample. If platelet clumping is present, the platelet count will be enumerated from the Citrate sample.

**LIS Mnemonic:** CITRATE

---

**Profile, Manual Differential**

**Tube/Specimen:** Lavender Stopped 4.0 mL EDTA

**Requisition:** CD0002

**Division:** Hematopathology – Microscopy

**Comments:** Testing includes CBC.

**LIS Mnemonic:** PM
**Profile, No Diff**

**Tube/Specimen:** Lavender Stoppered 4.0 mL EDTA  
**Requisition:** CD0002  
**Division:** Hematopathology - Core  
**Comments:** *Request available for Nova Scotia Health Central Zone Inpatient Services and Clinics only*  
Testing includes Hematocrit (HCT), Hemoglobin (HB), Platelet Count, Red Cell Count and WBC.  
**LIS Mnemonic:** CBCND, CBC No Auto Diff, Profile No Diff, PND

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**Progesterone**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Comments:** This test must not be confused with 17-Hydroxyprogesterone.  
**Shipping:** Separate serum within 5 hours of collection. Serum stable when removed from gel separator for 10 days at 2 to 8°C. Freeze and send frozen serum, if longer.  
Progesterone sample must be poured off from gel barrier primary SST tubes into an aliquot tube. Serum remaining in gel barrier SST tubes have shown decreases in progesterone levels.  
**LIS Mnemonic:** PROG

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**Proinsulin**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Fasting is recommended by the testing site for best results, however not required.**  
**Referred Out:** In-Common Laboratories  
**Instructions:**  
Centrifuge at 4°C.  
Aliquot 1.0 mL of serum into a plastic vial. Store and send frozen.  
Send copy of requisition.  
**LIS Mnemonic:** Proinsulin

---

**Prolactin**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Shipping:** Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.  
**LIS Mnemonic:** PROL

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Uncontrolled When Printed
**Prostatic Specific Antigen**

**see PSA**

**Division:** Clinical Chemistry - Core

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**Protein C Activity**

**Tube/SPECIMEN:** Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Referrals:** Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

---

**Protein Electrophoresis**

**Tube/SPECIMEN:**

- a) Nova Scotia Health Central Zone collection: Gold Stoppered 5.0 mL SST & Light Green 4.5 mL Lithium heparin and gel for plasma separation.
- **OR**
- b) Outside of Nova Scotia Health Central Zone collection: Gold Stoppered 5.0 mL SST only.

**Requisition:** CD0002

**Division:** Clinical Chemistry - Immunology

**Comments:** Testing includes Total Protein and Protein Electrophoresis.

**Shipping:** Outside of Nova Scotia Health Central Zone collection: Separate and send 2 frozen aliquots of serum from Gold stoppered 5.0 mL SST. **Do Not Send Frozen Plasma**

**Alternate Names:** Electrophoresis of Protein

---

**Protein S (Free)**

**Tube/SPECIMEN:** Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Referrals:** Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

---

**Protein Total, Fluids**

**Tube/SPECIMEN:** Submit only one of the following specimens:

- Spinal Fluid: 1.0 mL Spinal Fluid collected in sterile plastic screw top tube
- Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes.

**Requisition:** CD0002

**Division:** Clinical Chemistry - Core

**Shipping:** If sending specimen from outside QEII HSC, transport at room temperature.
PLM Laboratory Test Catalogue

Alternate Names: TP
LIS Mnemonic: CSF TP
BF TP

-------------------------------------------------------------

Protein Total, Plasma
Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Blood must be collected with minimum stasis.
Alternate Names: TP
Total Protein
LIS Mnemonic: TP

-------------------------------------------------------------

Protein Total, Random Urine or 24-Hour Urine
Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection
Record Total Volume of 24-hour urine on both the aliquot and the requisition.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.
Alternate Names: U PCR
LIS Mnemonic: U24 TP
U PCR

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Prothrombin gene mutation
Tube/Specimen: 4.0 mL EDTA Lavender stoppered - One tube sufficient for both FV and PT mutation
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
DNA: Stability – 3 months at 4°C or frozen.
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.
As per hereditary thrombophilia best practice testing guidelines, Prothrombin gene mutation testing is restricted to hematologists, medical geneticists, neurologists, and general internists for both adult and pediatric populations.
Alternate Names: PT 20210 mutation

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PLM Laboratory Test Catalogue

PSA
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 24 hours at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: Prostate Specific Antigen
LIS Mnemonic: PSA

PSA, Free
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 24 hours at 2 to 8°C. Freeze and send frozen serum, if longer. Include age of patient.
Alternate Names: Free Prostate Specific Antigen
LIS Mnemonic: FPSA

Pseudocholinesterase
see Acetylcholinesterase, Plasma
Division: Clinical Chemistry – Core

Pseudocholinesterase Phenotyping
see Cholinesterase Phenotyping
Referred Out: In-Common Laboratories

PT
see INR (PT)
Division: Hematopathology - Core

PT 20210 mutation
see Prothrombin Gene Mutation
Division: Molecular Diagnostics

PT 50% Mix
Tube/Specimen: Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition: CD0002
Division: Hematopathology - Coagulation
**PLM Laboratory Test Catalogue**

**Instructions:** This test is done only when the INR (PT) is abnormal.

---

### PTH Intact

**Division:** Clinical Chemistry - Core

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### PTH Related Peptide

**Tube/Specimen:** Green topped Sodium Heparin tube, BD#366480. Lithium Heparin tubes are **NOT** acceptable.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot 1.0 mL plasma into plastic vial and **freeze at once**.
- Record primary tube type (i.e. Sodium Heparin) on the aliquot label.
- Do not accession for non-Nova Scotia Health Central Zone Hospitals
- Send copy of requisition.

**Stability:** Room temperature and refrigerated – 7 days; frozen – 28 days.

**LIS Mnemonic:** PTHRP

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### PTP Antibody Testing

**Referred Out:** McMaster University HSC

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### PTT

**Tube/Specimen:** Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Core

**Instructions:**
- Indicate on requisition if patient is on any anticoagulants.

**Alternate Names:** Partial Thromboplastin Time

---

### PTT 50% Mix

**Tube/Specimen:** Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

**Division:** Hematopathology - Coagulation

**Instructions:** This test is done only when the PTT is abnormal.

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### PTT Dade

**Tube/Specimen:** Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

**Requisition:** CD0002

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*Uncontrolled When Printed*
Division: Hematopathology - Coagulation

Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

Alternate Names: DADE

---

**Pyridoxal Phosphate**
*see Vitamin B6 Level*

**Pyridoxic Acid**

**Pyridoxine**

Referred Out: In-Common Laboratories

---

**Pyruvate**
*(Do Not Confuse with Pyruvate Kinase)*

Tube/Specimen: Collectors MUST call Clinical Chemistry (VG 473-4340; HI 473-4843) for instructions prior to collection. Samples must be collected at QEII and received at either the HI Stat Lab or VG Core Lab within 30 minutes of collection. Green topped Lithium Heparin whole blood tube. Place on ice!

Referred Out: In-Common Laboratories

Instructions: Clinical Chemistry must make a filtrate from the sample before sending it to the Referred-out bench; untreated samples are not suitable for analysis. Freeze: if the specimen thaws, it is not suitable for analysis. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: Pyruvate

---

**Pyruvate Kinase, Whole Blood**

Tube/Specimen: Yellow topped ACD tube. Keep refrigerated!

Referred Out: Mayo Medical Laboratories

Instructions: 6.0 mL Lavender topped EDTA tube is also acceptable. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

Stability: Refrigerated – up to 20 days.

LIS Mnemonic: Pyr Kin

---

**Q-Fever**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Comments: This test will be referred out be the laboratory.

Alternate Names: Coxiella Burnetii

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\Doc#: 19453

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QBCRA – Mutation Analysis  
Division: Molecular Diagnostics

QuantiFERON®-TB Gold  
Referred Out: St. John Regional Hospital

Quantitative BCR/abl  
Division: Molecular Diagnostics

Quinidine Level  
Tube/Specimen: Plain Red topped tube.
Referral Out: In-Common Laboratories
Instructions: Centrifuge at room temperature. Aliquot 1.0 mL of serum into a plastic vial. Send copy of requisition.
LIS Mnemonic: Quinid

RA Titre  
Division: Clinical Chemistry - Core

Rabies Immunity  
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO RABIES

Rapamycin  
Division: Clinical Chemistry - Toxicology

RAR alpha  
Division: Clinical Chemistry - Toxicology

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Uncontrolled When Printed
Division: Molecular Diagnostics

RARa  see PML – RAR gene fusion

Division: Molecular Diagnostics

RAST Tests (Allergy Testing)

Tube/Specimen: Gold topped SST tube. A copy of the RAST requisition MUST accompany the specimen.

Referred Out: IWK

Instructions: Centrifuge at room temperature. Aliquot at least 2.0 mL of serum into a plastic vial. A copy of the RAST requisition MUST accompany the specimen. Do Not Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK lab.

LIS Mnemonic: RAST Tests

RBC Folate  see Folate, Red Blood Cell

Division: Clinical Chemistry - Core

RBC (Red Blood Cell) Mineral Analysis
(Do Not Confuse with Trace Elements)

Tube/Specimen: Two Royal Blue topped Potassium EDTA tubes (BD368381) provided in the Doctor’s Data kit. Collect with 22 gauge needle or greater. Patient must complete credit card information on Doctor’s Data requisition inside kit. A receipt will be sent to the patient from Doctor’s Data. If kits are not available, call the Referred-out bench at 902-473-7237 to have some sent.

Referred Out: Doctor’s Data

Instructions: Centrifuge at room temperature for 20 minutes. Remove the plasma and buffy coat and discard. Leave the cells in the bottom of the tubes and reseal with original caps and parafilm. Minimum 2 mL of cells required. Refrigerate until shipment. Do not freeze! Do not accession for non-Nova Scotia Health Central Zone Hospitals

LIS Mnemonic: RBC MA

Reagin Screen Test  see Syphilis Serology

Division: Virology-Immunology

Red Blood Cell Folate  see Folate, Red Cell

Division: Clinical Chemistry - Core
Red Cell Count  
see Profile
Division: Hematopathology – Core

Red Cell Folate  
see Folate Red Cell
Division: Clinical Chemistry – Core

Red Cell Survival
Division: Molecular Diagnostics
Comments: This determination is done by Nuclear Medicine. Phone 902-473-7510 to make arrangements.

Reducing Substances, Stool
Tube/Specimen: 3g of random, loose stool.
Referred Out: Mayo Medical Laboratories
Instructions: Freeze immediately!
Note: Specimens from timed collections (24, 48, and 72 hour) or formed stool are not acceptable.
Stability: Frozen – 7 days
LIS Mnemonic: ST Reduce

Reptilase Test
Tube/Specimen: Light blue topped Sodium Citrate tube.
Referred Out: Hamilton General Hospital
Instructions: Send to Hematopathology Coagulation lab for processing.
LIS Mnemonic: REPTILASE

Reticulocyte Count
Tube/Specimen: Lavender Stopped 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology - Core
Comments: Profile must be ordered with test.

Retinoic Acid Receptor  
see PML-RAR gene fusion
Division: Molecular Diagnostics
Retinoic Acid Receptor Alpha  see PML – RAR gene fusion
Division: Molecular Diagnostics

Retinol  see Vitamin A
Referred Out: In-Common Laboratories

Reverse T3 (Reverse Triiodothyronine, RT3, T3 Reverse)
Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions Aliquot 2.0 mL serum. Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
Stability: Frozen - 28 days; room temperature/refrigerated - 7 days.
LIS Mnemonic: REVT3

RF Quantitative  see Rheumatoid Factor, Quantitative
Division: Clinical Chemistry - Core

Rheumatoid Factor, Quantitative
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Separate serum within 5 hours of collection.
Stability: Serum stable for 2 days at 2 to 8°C. Freeze and send serum frozen, if longer.
Alternate Names: RF Quantitative
LIS Mnemonic: RFQ

Riboflavin  see Vitamin B2
Referred Out: In-Common Laboratories

Rickettsia
Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Rivotril  see Clonazepam

RNP  see Anti-Nuclear Antibody (ANA)

RO  see Anti-Nuclear Antibody (ANA)

ROS1 FISH

Rotavirus PCR

Routine typing of Haemophilus influenza (From sterile sites or questionable outbreaks)
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Uncontrolled When Printed
Sandimmune IV  
see Cyclosporine

Division:  Clinical Chemistry - Toxicology

SARS-CoV-2 PCR

Tube/Specimen: Nasopharyngeal swab in viral transport media, nose/throat Aptima Multitest swab, throat gargle, bronchial wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural fluid.

Requisition: CD0432/CD0433

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 8°C for 4 days. Gargle specimens are stable at 2 to 30°C for 2 days. Bronchial wash and sputum specimens are stable at 2 to 8°C for 3 days.

LIS Mnemonic: NCOV (routine request)  
E NCOVST (stat request)

Schillings Test

Division: Molecular Diagnostics

Comments: Patient is sent to Nuclear Medicine 3rd Floor, ACC Building.

Schistosomiasis-IFA

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition. Refer to "Microbiology User’s Manual" for collection procedures.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO SCHISTO

SCL-70  
see Anti-Nuclear Antibody (ANA)

Division: Immunopathology

Sedimentation Rate  
see ESR

Division: Hematopathology - Core

Selenium Level

Tube/Specimen: Royal Blue topped Trace Element K2 EDTA tube (BD368381).

Referred Out: In-Common Laboratories
Instructions: **Centrifuge ASAP!**
Aliquot 3.0 mL plasma into plastic transfer vial. **Freeze at once!**
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

Utilization: Plasma selenium is used for potential nutritional deficiency.

Stability: 20 days at room temperature and 14 months at 2 to 8° C or frozen.

LIS Mnemonic: Selenium

---

**Serotonin Level**

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.
Aliquot 1.0 mL serum and freeze ASAP!
A low tryptophan diet is recommended for 48 hours prior to collection.
During this period, patient must abstain from avocados, bananas, coffee, plums, pineapple, tomatoes, walnuts, hickory nut, Mollusks, eggplant, and medications such as aspirin, corticotropins, MAO inhibitors, phenacetin, catecholamines, reserpine and nicotine.
Do not accession for non-Nova Scotia Health Central Zone Hospitals.
Send copy of requisition.

Stability: Room temperature 48 hours, refrigerated 1 month, frozen 3 months.

LIS Mnemonic: Serotonin

---

**Serotonin, 24 Hour Urine**

Tube/Specimen: 24-hour urine collected in a container with 30 mL 6N HCL as a preservative. **Do Not Use Boric acid.**

Referred Out: In-Common Laboratories

Instructions: Specimen required: 10 mL urine from a well-mixed collection.
Record Total Volume of 24-hour urine on both the aliquot and the requisition.
Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
A low tryptophan diet is recommended for 48 hours prior to collection.
During this period, patient must abstain from avocados, bananas, coffee, plums, pineapple, tomatoes, walnuts, hickory nut, Mollusks, eggplant and medications such as aspirin, corticotropins, MAO inhibitors, phenacetin, catecholamines, reserpine and nicotine.
Do not accession for non-Nova Scotia Health Central Zone Hospitals.
Send copy of requisition.

Stability: Room temperature 48 hours, refrigerated 1 month, frozen 3 months.

LIS Mnemonic: U24 SERO

---

**Serum Folate**

see Folate Serum

---

**Sex Hormone Binding Globulin**

Tube/Specimen: Gold Stoppered 5.0 mL SST

---
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 8 days at 2 to 8°C. Freeze and send frozen serum, if longer.
LIS Mnemonic: SHBG LEVEL

---

**Sezary Cells**

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology – Microscopy
Comments: Analysis must include a CBC, Auto Differential, and Manual Differential.

---

**SGOT, Plasma**  see Aspartate Aminotransferase (AST), Plasma
Division: Clinical Chemistry - Core

---

**SGPT, Plasma**  see Alanine Aminotransferase (ALT), Plasma
Division: Clinical Chemistry - Core

---

**SHM**  see IGHV Somatic Hypermutation
Division: Molecular Diagnostics

---

**Short Tandem Repeats**  see Chimerism Analysis for BMT (STR)
Division: Molecular Diagnostics

---

**Sickle Cell Screen**

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology - Core

---

**Sinequan**  see Doxepin Level
Referred Out: In-Common Laboratories

---

**Sirolimus**

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Tube/Specimen: lavender stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Clinical Chemistry - Toxicology
Instructions: Results are available same day for specimens received by 1200. This determination can be done on micro samples when necessary.
Comments: Pre-dose specimen is required.
Shipping: Specimens can be stored at 2 to 8°C for 24 hours; if over 24 hours, mix whole blood, transfer to a plastic tube, freeze and send frozen whole blood on dry ice.
Alternate Names: Rapamycin
LIS Mnemonic: SIRO

Skin Basement Membrane Ab see Anti-Pemphigoid Antibody
Division: Immunopathology

SM see Autoantibodies Panel
Division: Immunopathology

Sodium, Fluids
Tube/Specimen: Submit only one of the following specimens:
10.0 mL Dialysate Fluid collected in sterile plastic screw top tubes.
Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: If sending specimen from outside QEII HSC, transport at room temperature.
LIS Mnemonic: DF NA BF NA

Sodium, Plasma see Electrolytes (Na, K), Plasma
Division: Clinical Chemistry - Core

Sodium, Stool see Fecal Electrolytes
Referred Out: In-Common Laboratories

Sodium, Random Urine or 24-Hour Urine
Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.
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**Spinal Fluid**  
**see specific test for instructions.**

**Spinal Fluid Lactate**  
**see Lactate, Spinal Fluid**

**SSA**  
**see Anti-Nuclear Antibody (ANA)**

**SSB/LA**  
**see Anti-Nuclear AB (ANA)**

**ST OB**  
**see Occult Blood, Stool**

**Stem Cell Enumeration – Peripheral Blood, Apheresis Product and BM Harvest**

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Lavender Stoppered 4.0 mL EDTA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition</td>
<td>CD0002C</td>
</tr>
<tr>
<td>Division</td>
<td>Hematopathology - HLA</td>
</tr>
</tbody>
</table>

**Instructions:**
- Specimens should be received within 30 minutes or less after collection to ensure optimal results.
- The HLA laboratory (902-473-7841) should be notified in advance when requesting this test.
- The volume of product collected is required on the requisition (exception; Peripheral Blood).
- Unrelated Donor (MUD) specimens arriving after 16:00 hours are to be stored at 4°C overnight and will be tested the following day.
- The requisition must accompany the specimen to the Flow laboratory.

**Shipping:**  
Maintain specimen at room temperature.

**Alternate Name:**  
CD34 TESTING

**LIS Mnemonic:**  
Peripheral Blood – CD34 PRE  
Apheresis Product – CD34 HARV

**Stone**  
**see Calculus Analysis**

**Referred Out:**  
In-Common Laboratories
Stool Chloride  \(\text{see Fecal Chloride}\)
Referred Out: In-Common Laboratories

Stool Electrolytes  \(\text{see Fecal Electrolytes}\)
Referred Out: In-Common Laboratories

Stool Fat  \(\text{see Fat, Fecal}\)
Referred Out: In-Common Laboratories

Stool for Calprotectin  \(\text{see Calprotectin, Fecal}\)
Referred Out: In-Common Laboratories

STR  \(\text{see Chimerism Analysis for BMT}\)
Division: Molecular Diagnostics

Streptococcus, Group B
Tube/Specimen: Vaginal or rectal swabs for culture
Referred Out: IWK
Instructions: Shipped as Biological Substance Category B.

Strongyloides Serology
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO STRONG

Sugar PC  \(\text{see Glucose PC, Plasma}\)
Division: Clinical Chemistry - Core

Sulfonylurea
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Uncontrolled When Printed
<table>
<thead>
<tr>
<th>Test Code</th>
<th>Description</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>t(14:18)</td>
<td>see BCL2-IGH gene fusion</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td>T(15:17)</td>
<td>see PML-RAR gene fusion</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td>t(2:5)</td>
<td>see ALK-NPM gene fusion</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td>t(4:11)</td>
<td>see AF4-MLL gene fusion</td>
<td>Molecular Diagnostics</td>
</tr>
<tr>
<td>t(8:21)</td>
<td>see AML1-ETO gene fusion</td>
<td>Molecular Diagnostics</td>
</tr>
</tbody>
</table>

### T3, Free
- **Tube/Specimen:** Gold Stoppered 5.0 mL SST
- **Requisition:** CD0002
- **Division:** Clinical Chemistry - Core
- **Shipping:** Separate serum within 5 hours of collection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer
- **Alternate Names:** Free Triiodothyronine
- **LIS Mnemonic:** FT3 T3 FREE

### T4, Free
- **Description:** see Thyroxine, Free
- **Division:** Clinical Chemistry - Core

### T790M
- **Description:** see Circulating Tumor DNA
- **Division:** Molecular Diagnostics

### TAB (MA)
- **Description:** see Anti-Thyroid Peroxidase Antibodies
- **Division:** Clinical Chemistry - Core
**TAB (TA)**

**see Anti-Thyroglobulin Antibodies**

**Division:** Clinical Chemistry - Core

---

**Tacrolimus**

**see FK 506**

**Division:** Clinical Chemistry - Toxicology

---

**Taeniasis**

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

**Requisition:** QE 7125

**Division:** Virology - Immunology

**Instructions:** Clinical data should be indicated on the requisition.

**Note:** This test will be referred out by the laboratory.

---

**T Cell Subsets**

**Tube/Specimen:** Lavender stoppered 4.0 mL EDTA

**Requisition:** CD0002C

**Division:** Hematopathology - Flow Cytometry

**Instructions:** This test is offered Monday to Friday except Holidays. Blood must arrive in the Flow Cytometry lab within 24 hours of collection and by 14:00 hours on Friday (or the day before a holiday). The requisition must accompany the specimen to the Flow laboratory.

**Shipping:** Maintain specimen at room temperature.

A copy of the CBC report (including WBC and lymphocyte percent/absolute count), patient diagnosis and requisition must accompany the specimen when collected outside of the QEII VG site.

**Alternate Names:** CD4 Cells, CD4 Cell Marker, CD8 counts

**LIS Mnemonic:** T CELL SUB

---

**T-cell Gene Rearrangement**

**see T-cell lymphoid clonality**

**Division:** Molecular Diagnostics

---

**T-cell lymphoid clonality**
Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s)
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.
Alternatively, send fixed tissue in paraffin block.
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition.
Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the DNA.
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: T-cell gene rearrangement
TCR beta chain
Lymphoma protocol

LIS Mnemonic: 2LAVDNA

---

TCR beta chain

Division: Molecular Diagnostics

---

TCR Gene Rearrangement

Division: Molecular Diagnostics

---

Tegretol

Division: Clinical Chemistry - Core

---

Tegretol Epoxide

Referred Out: In-Common Laboratories

---

Testosterone

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.
LIS Mnemonic: TESTOS

---

Tetanus Immunity

Tube/Specimen: Gold Stoppered 5.0 mL SST

Section: Management System\PLM\General\PLM Website\General\Test Catalogue
Doc#: 19453

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Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO TET

Thalassemia

see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

Thalassemia Screen

see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

Thallium, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination in a plain container or 24-hour urine collection in a plain container.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection. Record Total Volume of 24-hour urine on both the aliquot and the requisition. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: Room temperature for 1 day, 2 to 8˚C (preferred) for 3 months and frozen for 1 year.

LIS Mnemonic: U24 Thal

U THAL

Thallium, Whole Blood

Tube/Specimen: Royal Blue topped Trace Element K2 EDTA tube (BD368381)

Referred Out: In-Common Laboratories

Instructions: Do not centrifuge! Test cannot be performed on plasma.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: Thallium

Theophylline

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\Doc#: 19453

Version: 162.0 Current
Effective Date: 1/16/2024
Page 211 of 239

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PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

Instructions: These determinations can be done on micro samples, send at least 0.5 mL of serum for each. Blood should be collected just prior to next dose and after a steady state concentration has been achieved (4-5 half-lives).

Alternate Names: Aminophylline

LIS Mnemonic: THEO

Thermal Amplitude  
see Cold Agglutinin Titre

Division: Transfusion Medicine

Thiamine (Vitamin B1), plasma

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube. Wrap in tinfoil within 1 hour of collection to protect from light.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze immediately!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Unsuitable if thawed.

Send copy of requisition.

Stability: 6 months

LIS Mnemonic: Thiam

Thiamine Whole Blood (Vitamin B1)

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube collected after 12 to 14 hour fast. Wrap in tinfoil within 1 hour of collection to protect from light.

Referred Out: In-Common Laboratories

Instructions: Freeze whole blood!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

For deficiency testing

Send copy of requisition.

Stability: 14 days

LIS Mnemonic: VITB1 WB

Thiocyanate Level

(Do not confuse with Cyanide)

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot at least 2.0 mL serum. Keep refrigerated.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.
PLM Laboratory Test Catalogue

LIS Mnemonic: THIOCY

---

**Thiopurine Metabolites**  
( TPMT Metabolite; Prometheus Thiopurine Metabolites)  
(Do not confuse with Thiopurine Methyltransferase Phenotyping or Genotype)

**Tube/Specimen:** One 6.0 mL Lavender topped EDTA tube.

**Referred Out:** Mayo Medical Laboratories

**Instructions:** *Do not centrifuge.*  
Do not accession for non-Nova Scotia Health Central Zone Hospitals  
Send copy of requisition.

**Stability:** Room temperature for 72 hours, refrigerated for 8 days.

**LIS Mnemonic:** MISC REF

---

**Thiopurine Methyltransferase: Genotype**  
( TPMT Genotyping)  
(Do not confuse with Thiopurine Methyltransferase Genotype or Thiopurine Metabolite)

**Blood Collection:** *Collect MONDAY ONLY!!*  
Requisition MUST specify “Genotype”, otherwise order Thiopurine Methyltransferase: Phenotyping (TPMP).  
Notify Referred-out bench at 902-473-7237 that specimen is being collected.  
Patients have been directed to arrive at blood collection during the following times:

- **BBBC:** 7-10 am Monday Only  
- **Cobequid:** Collected to meet 10 am run Monday Only  
- **Dartmouth:** Collected to meet 10 am run Monday Only  
- **Hants:** Collected to meet 9:30 am run Monday Only  
- **HICS:** 7-10 am Monday Only  
- **SCCS:** 7-10 am Monday Only  
- **STMB:** Collected to meet 10 am run Monday Only  
- **VGCS:** 7-10 am Monday Only  
- **WLBC:** Book appointment 7-9 am Monday Only

**Tube/Specimen:** One Lavender topped EDTA tube.

**Referred Out:** In-Common Laboratories

**Instructions:** *Do not centrifuge.*  
Send copy of requisition.

**Stability:** Specimen must be received at the referral lab within 7 days of collection.

**LIS Mnemonic:** MISC REF

---

**Thiopurine Methyltransferase: Phenotyping**  
( TPMT Phenotyping)  
(Do not confuse with Thiopurine Methyltransferase Genotype or Thiopurine Metabolite)

**Blood Collection:** *Collect MONDAY ONLY!!*  
Notify Referred-out bench prior to collection at 902-473-7237; leave a message if necessary.

**Section:** Management System\PLM\General\PLM Website\General\Test Catalogue\  
**Doc#:** 19453  
**Version:** 162.0 Current  
**Effective Date:** 1/16/2024  
**Page:** 213 of 239

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Patients have been directed to arrive at blood collection during the following times:

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Collection Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRBC</td>
<td>7-10 am Monday Only</td>
</tr>
<tr>
<td>Cobequid</td>
<td>Collected to meet 10 am run Monday Only</td>
</tr>
<tr>
<td>Dartmouth</td>
<td>Collected to meet 10 am run Monday Only</td>
</tr>
<tr>
<td>Hants</td>
<td>Collected to meet 9:30 am run Monday Only</td>
</tr>
<tr>
<td>HICS</td>
<td>7-10 am Monday Only</td>
</tr>
<tr>
<td>SCCS</td>
<td>7-10 am Monday Only</td>
</tr>
<tr>
<td>STMB</td>
<td>Collected to meet 10 am run Monday Only</td>
</tr>
<tr>
<td>VGCS</td>
<td>7-10 am Monday Only</td>
</tr>
<tr>
<td>WLBC</td>
<td>Book appointment 7-9 am Monday Only</td>
</tr>
</tbody>
</table>

Tube/Specimen: 4.0 mL Lavender topped EDTA tube only (6.0 mL Lavender topped EDTA tube will be rejected.)
Referred Out: In-Common Laboratories

Instructions: If CBC hasn’t been ordered on the same collection or on another specimen collected on the same day, collect a separate 4.0 mL Lavender topped EDTA tube for Hemoglobin testing.
Do not centrifuge.
Do not freeze! Keep refrigerated.
Send specimen in original container; do not transfer to polypropylene transfer vial.
Tubes with multiple overlaying labels or tubes and caps wrapped with parafilm will be rejected.
The specimen must be accompanied by a hemoglobin (included in CBC result) result determined on the same collection day.
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.

LIS Mnemonic: TPMP

Thioridazine Level

Tube/Specimen: Plain red topped tube.
Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature
Aliquot at least 3.0 mL serum into plastic transfer vial. Freeze at once.
Send copy of requisition.

LIS Mnemonic: Thioridaz

Thrombin Time

Tube/Specimen: Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition: CD0002
Division: Hematopathology - Core

Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75)

Thrombocythemia see Jak2 gene mutation
Division: Molecular Diagnostics

Thrombopoietin
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Uncontrolled When Printed
# Thyroid Function Tests
**see TSH**

**Division:** Clinical Chemistry - Core

---

## Thyroid Receptor Antibody

**Tube/Specimen:** Gold topped SST tube.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot 1.0 mL serum into plastic transfer vial and freeze.
- Indicate thyroid status of patient including presence of exophthalmos.
- Lipemic or hemolyzed samples are not acceptable.
- Send copy of requisition.

**Stability:** Refrigerated 3 days, frozen 2 months

**Alternate Names:** Thyrotropin Binding Inhibitory Ig TBII  
Thyrotropin Receptor Antibody  
Long Acting Thyroid Stimulator LATS

**LIS Mnemonic:** TRAB

---

## Thyroid Stimulating Hormone
**see TSH**

**Division:** Clinical Chemistry - Core

---

## Thyroid Stimulating Immunoglobulin (TSI)

**Tube/Specimen:** Gold topped SST tube.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot 1.0 mL serum into plastic transfer vial. **Freeze at once.**
- Send copy of requisition.

**LIS Mnemonic:** TSIQST

---

## Thyroxine Binding Globulin (TBG)
*(Do not confuse with Thyrotropin Binding Inhibitory Ig-TBII)*

**Tube/Specimen:** Gold topped SST tube.

**Referred Out:** In-Common Laboratories

**Instructions:**
- Centrifuge at room temperature.
- Aliquot 1.0 mL serum into plastic transfer vial. **Freeze at once.**
- Send copy of requisition.

**LIS Mnemonic:** TBG
Thyroxine, Free

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: T4 Free
Free T4
LIS Mnemonic: FT4
T4 FREE

Tissue Transglutaminase see Anti-Tissue Transglutaminase

Division: Immunopathology

Tobramycin Level

Tube/Specimen: Plain Red Tube 6 or 10 mL
Requisition: CD0002
Division: Clinical Chemistry - Core
Comments: Tobramycin may be administered using 2 dosing strategies:
If tobramycin is administered once daily (much larger than traditional doses) for patients who have good renal function and have no other exclusions, e.g. Endocarditis, dialysis, surgical prophylaxis, burns (>20%), only pre specimens are required. Take Pre (trough) blood specimen 6 hours before next dose is administered. If tobramycin is administered more often (q8 – 12 hours), both pre and post specimens are required. Take Post (peak) blood specimen 30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. Take Pre (trough) blood specimen 30 minutes before next dose is administered.
The time specimen was collected (pre/post) should be indicated on the requisition and tubes. For information call the laboratory at 902-473-6886.

Alternate Names: Aminoglycoside Level
LIS Mnemonic: TOB PRE
TOB POST
TOB TNS

Tofranil see Imipramine Level

Referred Out: In-Common Laboratories

Total Bilirubin see Bilirubin Total, Plasma

Division: Clinical Chemistry - Core

Total CO2, Plasma see Bicarbonate, plasma

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Division: Clinical Chemistry - Core

Total Eosinophil Count  see Eosinophil Count
Division: Hematopathology - Core

Total Iron Binding Capacity  see Iron, Plasma
Division: Clinical Chemistry - Core

Total Protein, Plasma  see Protein Total, Plasma
Division: Clinical Chemistry - Core

Total VDB  see Bilirubin Total, Plasma
Division: Clinical Chemistry - Core

Toxocariasis IFA & IHA
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO TOXOC

Toxoplasmosis
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Note: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.
LIS Mnemonic: TOXOG (IgG)
TOXOM (IgM)

Toxoplasmosis Avidity
Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\Doc#: 19453
Version: 162.0 Current
Effective Date: 1/16/2024
Page 218 of 239

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PLM Laboratory Test Catalogue

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSE

Toxoplasmosis PCR

Tube/Specimen: Amniotic Fluid (minimum 1 mL), CSF (minimum 1 mL), 4.0 mL EDTA Lavender stoppered tube (minimum 3 mL), Pleural Fluid (minimum 1 mL), Vitreous Fluid (minimum 1 mL), Bronchio-alveolar lavage (minimum 10 mL), Tissue

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition. For amniotic fluid presence of IgM and IgG in the mother must be confirmed first.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSE

TP see Protein Total, Plasma

Division: Clinical Chemistry - Core

TP53 mutation see Next Generation Sequencing – Myeloid Panel

Division: Molecular Diagnostics

TPMT Genotyping see Thiopurine Methyltransferase: Genotype

Referred Out: In-Common Laboratories

TPMT Metabolite see Thiopurine Metabolites

Referred Out: Mayo Medical Laboratories

TPMT Phenotyping see Thiopurine Methyltransferase: Phenotyping

Referred Out: In-Common Laboratories

TPPA see Syphilis

Division: Virology-Immunology

Trace Element Panels

(Do not confuse with RBC Mineral Analysis)
PLM Laboratory Test Catalogue

Tube/Specimen: Royal Blue topped Trace Element K2 EDTA tube (BD368381)

*Patient must pre-pay Nova Scotia Health for test prior to sample collection*
Toxic Panel on Erythrocytes = $70.00
Essential Panel on Erythrocytes = $70.00
Total Panel on Erythrocytes = $110.00
Total Panel on Plasma = $85.00

Referred Out: London HSC-Victoria Hospital

Instructions: Centrifuge at room temperature.
Aliquot plasma into polypropylene transfer vial using a plastic pipette.
Remove the buffy coat from the red cells and discard. Do not discard the red cells.
Remove a small amount of red cells to ensure no plasma remains.
Aliquot remaining red cells into a polypropylene vial. Do Not Freeze.
Do not accession for non-Nova Scotia Health Central Zone Hospitals

LIS Mnemonic: Trace Elem

---

Transferrin
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: Separate serum within 5 hours of collection.
Stability: Serum stable for 3 days at 2 to 8°C. Freeze and send frozen serum, if longer
LIS Mnemonic: TRF

---

Translocation (11:14) see BCL1-IGH gene fusion
Division: Molecular Diagnostics

---

Translocation (14:18) see BCL2-IGH gene fusion
Division: Molecular Diagnostics

---

Translocation (15:17) see PML-RAR gene fusion
Division: Molecular Diagnostics

---

Translocation (2:5) see ALK-NPM gene fusion
Division: Molecular Diagnostics

---

Translocation (4:11) see AF4-MLL gene fusion
Division: Molecular Diagnostics
Translocation (8:21) see AML1-ETO gene fusion
Division: Molecular Diagnostics

Translocation (9:22) see BCR-ABL gene fusion
Division: Molecular Diagnostics

Trichinellosis
Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0432/CD0433
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO TRICH

Tricyclic Screen (TCA) Physician must specify name of drug(s)

Triglycerides, Fluids
Tube/Specimen: Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes.
Requisition: CD0002
Division: Clinical Chemistry - Core
Shipping: If sending specimen from outside QEII HSC, transport at room temperature.
LIS Mnemonic: BF TRIG

Triglycerides, Plasma
Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.
LIS Mnemonic: TRIG

Triiodothyronine, Free see T3, Free
Division: Clinical Chemistry - Core

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Uncontrolled When Printed
Trimipramine Level

**Tube/Specimen:** Royal Blue topped Trace Element SERUM tube (BD368380)

**Referred Out:** In-Common Laboratories

**Instructions:** Centrifuge at room temperature. Aliquot serum into plastic transfer vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

**Note:** Plain red topped tubes and lavender topped EDTA tubes are acceptable. Indicate serum or plasma on aliquot tube.

**LIS Mnemonic:** TRIMI

---

Triptil (see Protriptyline Level)

**Referred Out:** In-Common Laboratories

---

Trophyrema Whipplei

**Tube/Specimen:** Whole blood: 4.0 mL EDTA Lavender stoppered tube (2 mL) or bone marrow: 4.0 mL EDTA Lavender stoppered tube CSF (0.5 mL), biopsy or tissue - frozen at time of collection and shipped on dry ice.

**Requisition:** CD0432/CD0433

**Division:** Microbiology-Immunology

**Instructions:** Clinical data should be indicated on the requisition.

**Note:** This test will be referred out by the laboratory.

**LIS Mnemonic:** RO ROSER

---

Troponin T-HS (High Sensitivity), Plasma

**Tube/Specimen:** Light Green 4.5 mL Lithium heparin and gel for plasma separation

**Requisition:** CD0002

**Division:** Clinical Chemistry – Core

**Note:** A separate specimen tube is required for Troponin T-HS analysis. Failure to provide a separate specimen may prolong test turn-around time.

**Shipping:** Plasma stable for 72 hours at 2 to 8°C. Freeze and send frozen plasma, if longer.

**LIS Mnemonic:** TROP T HS

---

Trypanosoma (see Hem Microorganism)

**Division:** Hematopathology-Microscopy
**Trypanosomiasis**

Tube/Specimen: Gold Stoppered 5.0 mL SST  
Requisition: CD0002A/CD0002B  
Division: Microbiology-Immunology  
Instructions: Clinical data should be indicated on the requisition including whether American or African Trypanosoma is requested.  
Note: This test will be referred out by the laboratory.  
LIS Mnemonic: RO TRYP

**Tryptase**

Tube/Specimen: Gold topped SST tube.  
To assess anaphylaxis, collect specimen between 15 to 180 minutes after suspected anaphylactic event.  
To assess systemic mastocytosis or mast cell activation syndrome the specimen may be collected at any time.  
Referred Out: In-Common Laboratories  
Instructions: Centrifuge as soon as possible.  
Aliquot 1.0 mL serum into plastic transfer vial.  
Send copy of requisition.  
Stability: 7 days at 2 to 8°C and 30 days frozen.  
LIS Mnemonic: Tryptase

**TSH**

Tube/Specimen: Gold Stoppered 5.0 mL SST  
Requisition: CD0002  
Division: Clinical Chemistry - Core  
Shipping: Separate serum within 5 hours of collection.  
Stability: Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.  
Alternate Names: Thyroid Stimulating Hormone  
LIS Mnemonic: TSH

**TSH Receptor Antibody**  
**see Thyroid Receptor Antibody**

**TSH Receptor Antibody**  
**see Thyroid Receptor Antibody**

**TSH Receptor Antibody**  
**see Thyroid Receptor Antibody**

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Section: Management System\PLM\General\PLM Website\General\Test Catalogue\  
Doc#: 19453  
Version: 162.0 Current  
Effective Date: 1/16/2024  
Page 223 of 239

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Uncontrolled When Printed
TTG  see Anti-Tissue Transglutaminase
Division: Immunopathology

TTP Assay  see Adams-13 Testing
Referred Out: London HSC-Victoria Hospital

Tularemia (Francisella tularensis)
Tube/Specimen: Gold Stoppered 5.0 mL SST tube
Requisition: CD0002A/CD0002B
Division: Microbiology-Immunology
Instructions: Clinical data should be indicated on the requisition.
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO ROSER

Tylenol  see Acetaminophen
Division: Clinical Chemistry - Core

Type and Crossmatch  see Type and Screen (ABO/Rh and Antibody Screen)
Division: Transfusion Medicine

Type and Screen (ABO/Rh and Antibody Screen)
Tube/Specimen: Lavender Stoppered 6.0 mL EDTA (BD# 367863)
Requisition: CD0001_05_2019
Division: Transfusion Medicine
Instructions: Indicate on requisition date and time required, the planned procedure, transfusion, and pregnancy history. Send copy of patient’s antibody card if patient has known antibodies.
Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection
Note: Inpatient Extended Type and Screen protocol testing valid for 21 days unless patient is transfused platelets/red cells then testing valid for 96 hours only.
Pre-admission protocol Type and Screen testing valid for crossmatching until 2 days post of scheduled surgical date. NOTE: If date unknown the sample can be held for a surgery date up to 42 days from the sample draw date.
Outpatient Type and Screen testing valid for 96 hours.
Do not send specimens from patients who have not consented to transfusion (i.e. Jehovah Witness).
Alternate Names: Group and Crossmatch
Crossmatch
Type and Crossmatch
Unbound Calcium  
Division: Clinical Chemistry - Core

---

Urate, 24-Hour Urine
Tube/Specimen: 24-hour urine collection in a plain container.
Requisition: CD0002
Division: Clinical Chemistry - Core
Instructions: pH entire 24 hour collection to >8.0 with 1N NaOH upon receipt; it is not acceptable to add preservative to an aliquot. Specimen required: 4 mL urine aliquot from a pH adjusted and well-mixed collection. Refer to Appendix A for pH adjustment instructions when multiple tests are required from the same 24-hour collection. Record Total Volume of 24-hour urine on both the specimen aliquot and the requisition. Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.
Stability: Room temperature for 1 hour, 2 to 8°C (preferred) for 7 days (pH>8.0) and frozen for 2 weeks (pH>8.0).
Alternate Names: Uric Acid Urine
LIS Mnemonic: U24 URIC ACID U24 URATE

---

Urea Nitrogen, Plasma  
Division: Clinical Chemistry - Core

---

Urea Nitrogen, Urine  
Division: Clinical Chemistry - Core

---

Urea, Fluids
Tube/Specimen: Submit only one of the following specimens:
Dialysate Fluid: 10.0 mL Dialysate Fluid collected in sterile plastic screw top tubes,
Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes
Requisition: CD0002
Division: Clinical Chemistry - Core
LIS Mnemonic: DF UREA BF UREA

---

Urea, Plasma
Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation
Requisition: CD0002
Division: Clinical Chemistry - Core
Urea, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Record the ‘Original Container Type’ on the requisition as Plain, Acid or Sodium Carbonate.

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

Alternate Names: Urea Nitrogen, Urine

LIS Mnemonic: U24 UREA

Uric Acid, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry – Core

Stability: 7 days at 2 to 8°C; 90 days frozen

LIS Mnemonic: URIC

Uric Acid, Plasma on Ice (Rasburicase protocol)

Tube/Specimen: Pre-chilled Light Green 4.5 mL Lithium heparin and gel for plasma separation

The sample must be promptly placed on ice and analyzed within 2 hours to prevent ex-vivo metabolism of uric acid by Rasburicase.

Deliver to lab within 1 hour of collection to allow for preanalytical processing time.

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Rasburicase protocol for Uric Acid is for the determination of uric acid levels in patients treated with Rasburicase.

A pre-chilled Light Green 4.5 mL Lithium heparin and gel for plasma separation will be collected and promptly placed on ice.

The iced specimen and its accompanying requisition will be sent to LCSC to be entered into LIS using the orderable: Uric Acid on Ice.

The specimen will be spun in a refrigerated centrifuge; once centrifuged, the labeled tube will be placed back on ice and sent to appropriate laboratory for analysis.

LIS Mnemonic: URIC ACID ON ICE

Uric Acid Rasburicase protocol
Uric Acid, Urine  see Urate, Urine
Division: Clinical Chemistry - Core

--------------------
Urinalysis (including microscopic examination if required)
Tube/SPECIMEN: 10 to 50 mL random urine collected in sterile plastic screw top container
Requisition: CD0002
Division: Clinical Chemistry - Core
Comments: Urine will be initially examined only for color, clarity, and chemical analysis (by dipstick). Microscopic analysis will only be performed if urine is cloudy, turbid or if chemical analysis demonstrates an abnormality in color, blood, protein, leukocyte esterase or nitrite. Note that only microscopic elements that reach the threshold for reporting will be displayed. Deliver to Laboratory within 2 hours of collection. Keep at room temperature. Urinalysis will be cancelled on samples that are >8 hours from collection time to the point of analysis.
LIS Mnemonic: UA (Cplt)

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Urinary Catecholamines  see Catecholamine, Urine
Division: Clinical Chemistry - Toxicology

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Urinary Cross Links  see C-Telopeptide
(Pyridinium Telopeptide and other Peptides)
Referred Out: In-Common Laboratories

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Urine HCG, Qualitative
Qualitative urine HCG (urine pregnancy) testing will no longer be offered as of Feb 4, 2019

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Uro-1-Synthetase  see Porphobilinogen Deaminase
Referred Out: In-Common Laboratories

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Uroporphyrin, 24-Hour Urine  see Porphyrin Screen, 24-Hour Urine
Referred Out: In-Common Laboratories

--------------------
V W F  see VonWillebrand Workup
Division: Hematopathology - Coagulation

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V W F Activity  see VonWillebrand Workup
Division: Hematopathology - Coagulation
### VWF Antigen

**Division:** Hematopathology - Coagulation  
**See:** VonWillebrand Workup

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### Valproate

**Tube/Specimen:** Plain Red Tube 6 or 10 mL  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Instructions:** These determinations can be done on micro samples; send at least 0.1 mL of serum.  
**Comments:** There is a poor correlation between serum concentration of Valproate and efficacy as an anticonvulsant drug.  
**Alternate Names:** Epival, Depakene  
**LIS Mnemonic:** VAL

---

### Valproic Acid

**See:** Valproate

---

### Vancomycin Level

**Tube/Specimen:** Plain Red Tube 6 or 10 mL  
**Requisition:** CD0002  
**Division:** Clinical Chemistry - Core  
**Instructions:** Take Pre (trough) blood specimen immediately before dose is administered. Take Post (peak) blood specimen 2 hours after dose is administered. The time specimen was collected (pre/post) should be indicated on the requisition and tubes.  
**Comments:** Post (peak) Vancomycin levels are only required in certain circumstances (e.g. changing renal function, poor response to therapy, resistant organism, and pharmacokinetic analysis). For information call the laboratory at 902-473-6886.  
**Alternate Names:** Aminoglycoside Level  
**LIS Mnemonic:** VAN PRE, VAN POST, VAN TNS

---

### Variable Number Tandem Repeats (VNTR)

**See:** Chimerism Analysis for BMT

**Division:** Molecular Diagnostics

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### Varicella Zoster Immune Status

**Tube/Specimen:** Gold Stoppered 5.0 mL SST

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Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Instructions: Requisition must indicate immune status.
Alternate Names: Chicken Pox Titre
LIS Mnemonic: VZI

**Varicella Zoster PCR**

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>CSF (0.5 mL sterile sample), swabs collected in viral transport media, sterile fluids, bronchial wash, tissues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0432/CD0433</td>
</tr>
<tr>
<td>Division:</td>
<td>Virology-Immunology</td>
</tr>
<tr>
<td>Comments:</td>
<td>For CSF: IWK, PEL, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens require a CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting location by the Microbiology laboratory. Shipping: CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen. All other specimens store at 4°C up to 3 days, if longer freeze at -70°C.</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>E BFME (CSF)</td>
</tr>
<tr>
<td></td>
<td>E HSVVZ (all other specimens)</td>
</tr>
</tbody>
</table>

**Vascular Endothelial Growth Factor**

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Lavender topped K2EDTA tube.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referred Out:</td>
<td>In-Common Laboratories</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Centrifuge and aliquot 1 mL plasma within 4 hours of collection. Refrigerate or freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition. Stability: Room temperature 4 hours, refrigerate 48 hours, frozen 1 year.</td>
</tr>
<tr>
<td>Alternate name:</td>
<td>VEGF-D</td>
</tr>
<tr>
<td>LIS Mnemonic:</td>
<td>MISC REF</td>
</tr>
</tbody>
</table>

**Vasculitis Panel**
(ANCA)
(Includes Anti-MPO, Anti-PR3, Anti-GBM)

<table>
<thead>
<tr>
<th>Tube/Specimen</th>
<th>Gold Stoppered 5.0 mL SST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requisition:</td>
<td>CD0002</td>
</tr>
<tr>
<td>Division:</td>
<td>Microbiology Immunology</td>
</tr>
<tr>
<td>Synonyms:</td>
<td>ANCA, Anti-Neutrophil Cytoplasmic Antibody, Anti-GBM, Anti-Glomerular Basement Membrane, Anti-MPO, Anti-Myeloperoxidase, Anti-PR3, Anti-Proteinase 3</td>
</tr>
</tbody>
</table>
PLM Laboratory Test Catalogue

Vasoactive Intestinal Polypeptide
(VIP)

Tube/Specimen: Lavender topped EDTA tube. Patient fasting status is preferred as levels may be increased otherwise.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge and aliquot minimum 1 mL plasma into a plastic vial. Freeze at once. Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: Frozen 90 days.

LIS Mnemonic: VIP

Vasopressin see Copeptin

ADH (Anti-Diuretic Hormone/Vasopressin) testing is no longer available at the QEII laboratory or any of the referral laboratories. Please refer to Copeptin testing as a surrogate for ADH.

VDB see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

VDRL

Tube/Specimen: CSF minimum 200 µL

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: For serum specimens see Syphilis Serology

Shipping: Ship at 2 to 8°C up to 2 days, if longer freeze at -70°C.

LIS Mnemonic: I VDRL

Very Long Chain Fatty Acid

Tube/Specimen: Lavender topped EDTA tube. Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot 2.0 mL of plasma into plastic vial. Freeze at once. Serum from gold topped SST tube is acceptable; indicate sample type on aliquot.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: VLCFA
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Instructions: Centrifuge at room temperature. Aliquot 2.0 mL of plasma into plastic vial. **Wrap in tinfoil to protect from light! Freeze.** Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

Stability: Frozen – 56 days

LIS Mnemonic: NIACIN

---

**Vitamin B6 Level**  
**(Pyridoxic Acid)**

Tube/Specimen: Two Lavender topped EDTA tubes. **Wrap in tinfoil immediately to protect from light!**

Note: Sample must be centrifuged and frozen within 1 hour of collection.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 2.0 mL of plasma into plastic vial. **Wrap in tinfoil to protect from light! Freeze.** Unsuitable for analysis if thawed. Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

LIS Mnemonic: Vit B6

---

**Vitamin B12**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection.

Stability: Serum stable at 2 to 8°C for 7 days. Freeze and send frozen serum, if longer.

LIS Mnemonic: B12  
VIT B12

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**Vitamin C**

Tube/Specimen: Dark green topped Lithium Heparin tube. **Wrap in tinfoil to protect from light.**

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 2.0 mL of plasma into plastic vial. **Wrap in tinfoil to protect from light! Freeze at once!** Do not accession for non-Nova Scotia Health Central Zone Hospitals. Send copy of requisition.

Note: Light green topped Lithium Heparin PST tube is acceptable

LIS Mnemonic: VIT C

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**Vitamin D Level, Serum**

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\  
Doc#: 19453

Version: 162.0 Current  
Effective Date: 1/16/2024  
Page 232 of 239

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Uncontrolled When Printed
(Do not confuse with Vitamin D (1, 25 dihydroxy) Level)

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002
Division: Clinical Chemistry - Core
Comments: Assay measures both D2 and D3
Note: Vitamin D (1, 25 Dihydroxy) Level is a separate procedure that is referred out to In-Common Laboratories.
Stability: Serum is stable for 3 days at room temperature and 12 days at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names: Vitamin D (25 Hydroxy)
25 OH Vitamin D
Calcidiol
Vit D Level
Vit D 25 Level
Vitamin D3
LIS Mnemonic: VIT D 25 LEVEL
VIT D 25OH
VIT D LEVEL

Vitamin D (1, 25-dihydroxy) Level

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
Aliquot 1.0 mL serum into plastic transfer vial. Freeze at once!
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: VIT D 1, 25

Vitamin E Level

Tube/Specimen: Gold topped SST tube. Wrap in tinfoil to protect from light.
Referred Out: In-Common Laboratories
Instructions: Centrifuge at room temperature.
Aliquot 2.0 mL serum into plastic transfer vial. Protect from light! Freeze at once!
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: VIT E

VNTR see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Voltage-gated Calcium Channel Antibody

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Uncontrolled When Printed
Voltage-gated Potassium Channel Antibody
(VGKC)

Tube/Specimen: Gold topped SST tube.
Referred Out: In-Common Laboratories
Instructions: Aliquot at least 1.0 mL serum. Freeze!
Do not accession for non-Nova Scotia Health Central Zone Hospitals
Send copy of requisition.
LIS Mnemonic: VGKC

Stability:
Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

Von Willebrand Disease Genotype

Tube/Specimen: 4.0 mL Lavender topped EDTA tube(s).
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL.
DNA
Requisition: CD0046 or CD2573
Division: Molecular Diagnostics
Instructions: Blood must be kept at 4°C or frozen and must be accompanied by the requisition.
Send sample to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at Queen’s University.
Stability:
Peripheral blood: 5 days at 4°C or frozen
DNA: 3 months at 4°C or frozen
Alternate Names: VWD genotype
LIS Mnemonic: 2LAVDNA

Von Willebrand Factor Multimer Assay

Tube/Specimen: Light blue topped sodium citrate tube.
Referred Out: Mayo Medical Laboratories
Instructions: Send sample and copy of requisition to Hematopathology Coagulation lab for processing.
Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.
Von Willebrand Workup

Tube/Specimen: 3 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw
Requisition: CD0002
Division: Hematopathology - Coagulation
Comments: Testing includes VWF Ristocetin Cofactor, VWF Antigen, and Factor VIII.
Referrals: Send 3 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).
Alternate Names: VWF, VWF Antigen, VWF Activity

Voriconazole Level

Tube/Specimen: Dark green topped (Lithium heparin) tube.
Requisition: CD0002
Division: Microbiology-Immunology
Instructions: A trough sample should be drawn into a dark green topped lithium heparin tube.
Minimum 1.0 mL plasma is required.
The sample can be centrifuged at 4000g for 10 minutes, plasma separated and shipped frozen if it will not arrive within 24 hours.
The time specimen was collected (pre) should be indicated on the requisition and tubes.
Note: This test will be referred out by the Microbiology lab.
LIS Mnemonic: RO VORI

Water Deprivation Test see Anti-Diuretic Hormone

Referred Out: In-Common Laboratories

WBC see Profile

Division: Hematopathology - Core

WBC Count and Differential, Body Fluid

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA
Requisition: CD0002
Division: Hematopathology - Core
Shipping: If sending specimen from outside QEII HSC, transport at room temperature.
West Nile Virus IgM Antibody

Tube/Specimen: Gold Stoppered 5.0 mL SST
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Note: This test will be referred out by the laboratory.
LIS Mnemonic: RO WNV

West Nile Virus PCR

Tube/Specimen: Lavender stoppered 4.0 mL EDTA
Requisition: CD0002A/CD0002B
Division: Virology-Immunology
Note: PCR testing done primarily for the purpose of Donor Screening. For diagnosis, please consult a Microbiologist.
Instructions: Separate plasma by centrifugation at 3000g for 20 minutes. Ship plasma frozen.
LIS Mnemonic: WNV

Western Equine Encephalitis

see ARBO Virus

Division: Virology-Immunology

Xylose Absorption Test

see D’Xylose Tolerance Test

Referred Out: In-Common Laboratories

Zarontin

see Ethosuximide Level

Referred Out: In-Common Laboratories

Zika Virus PCR

Tube/Specimen: Gold Stoppered 5.0 mL SST/Urine collected in a dry sterile container
Requisition: CD0432/ CD0433
Division: Microbiology-Immunology
Required Info: Travel history, travel dates, date of onset and clinical symptoms.
Zika Clinical Information Data Sheet must be completed and submitted with the sample.
Note: This test will be referred out by the laboratory.
Zika Virus serology (IgM/IgG) no longer available. PCR testing will be performed if criteria for testing met.
LIS Mnemonic: RO ZIKA

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Uncontrolled When Printed
Zika Virus Serology

**Tube/Specimen:** Gold Stoppered 5.0 mL SST  
**Requisition:** CD0002A/CD0002B  
**Division:** Microbiology-Immunology  
**Required Info:** Travel history, travel dates, date of onset and clinical symptoms. Zika Clinical Information Data Sheet must be completed and submitted with the sample.  
**Note:** This test will be referred out by the laboratory.  
**LIS Mnemonic:** RO ZIKA

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Zinc, Whole Blood

**Tube/Specimen:** Royal Blue Trace Element K2 EDTA tube (BD368381)  
**Referred Out:** In-Common Laboratories  
**Instructions:**  
- Centrifuge ASAP!  
- Aliquot plasma into plastic transfer vial. **Freeze immediately!**  
- Do not accession for non-Nova Scotia Health Central Zone Hospitals  
- Send copy of requisition.  
**Utilization:** Plasma zinc is used for potential nutritional deficiency. Cannot be tested on whole blood.  
**Stability:** 20 days at room temperature and 14 months at 2 to 8° C or frozen.  
**LIS Mnemonic:** Zinc  
**LIS Mnemonic:** Zinc Level RO

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Zinc Protoporphyrin  
*(Do not confuse with Free Erythrocyte Protoporphyrin)*

**Tube/Specimen:** Royal Blue Trace Element K2 EDTA tube (BD368381).  
**Referred Out:** In-Common Laboratories  
**Instructions:**  
- Do Not Centrifuge!  
- Refrigerate.  
- Do not accession for non-Nova Scotia Health Central Zone Hospitals  
- Send copy of requisition.  
**Stability:** 2 weeks refrigerated.  
**LIS Mnemonic:** ZPP
## APPENDIX A

### 1. 24 hour Urine processing for Calcium, Oxalate, Magnesium, Phosphorous

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Mix specimen by inversion a minimum of ten times.</td>
</tr>
<tr>
<td>1.2</td>
<td>Aliquot all tests other than calcium, oxalate, magnesium, phosphorous and uric acid.</td>
</tr>
<tr>
<td>1.3</td>
<td>If uric acid is also ordered, divide the specimen into two equal parts. Use one part for the remainder of this procedure and place the other half aside for use with procedure 2.</td>
</tr>
<tr>
<td>1.4</td>
<td>Add 25mL of 6N HCl to the collection container. Add half if urine is halved.</td>
</tr>
<tr>
<td>1.5</td>
<td>Mix specimen by inversion a minimum of ten times and allow to sit for five minutes.</td>
</tr>
<tr>
<td>1.6</td>
<td>Measure urine pH.</td>
</tr>
<tr>
<td>1.7</td>
<td>If urine pH is less than or equal to 3, aliquot sample.</td>
</tr>
<tr>
<td></td>
<td>If urine pH is greater than 3, add 3 drops 6N HCl (and mix sample by inversion a minimum of ten times. Measure pH. Repeat this step until a pH of less than 3 has been reached.</td>
</tr>
<tr>
<td>1.8</td>
<td>If uric acid is also ordered, proceed to Procedure 2: Processing for Uric Acid, using the other half of the sample set aside in step 1.3.</td>
</tr>
</tbody>
</table>

### 2. 24 hour Urine processing for Uric Acid

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>Mix sample by inversion a minimum of ten times.</td>
</tr>
<tr>
<td>2.2</td>
<td>Aliquot all tests other than calcium, magnesium, phosphorous, oxalate and uric acid.</td>
</tr>
<tr>
<td>2.3</td>
<td>If calcium, magnesium, phosphorous and/or oxalate are also ordered, divide the sample into two equal parts. Use one part for the remainder of this procedure and place the other half aside for use with Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous.</td>
</tr>
<tr>
<td>2.4</td>
<td>Add 25mL of 1N NaOH to the collection container. Add half if urine is halved.</td>
</tr>
<tr>
<td>2.5</td>
<td>Mix sample by inversion a minimum of ten times and allow to sit for five minutes.</td>
</tr>
<tr>
<td>2.6</td>
<td>Measure urine pH.</td>
</tr>
<tr>
<td>2.7</td>
<td>If urine pH is greater than or equal to 8, aliquot sample.</td>
</tr>
<tr>
<td></td>
<td>If urine pH is less than 8, add 3 drops 1N NaOH and mix sample by inversion a minimum of ten times. Measure pH. Repeat this step until a pH of greater than 8 has been reached.</td>
</tr>
<tr>
<td>2.8</td>
<td>If calcium, magnesium, phosphorous and/or oxalate are also ordered, proceed to Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous, using the other half of the sample set aside in step 2.3.</td>
</tr>
</tbody>
</table>
### 3. 24 hour Urine processing for catecholamine, 5-Hydroxyindole acetic acid (5HIAA) and/or Metanephrine

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>Mix sample by inversion a minimum of ten times.</td>
</tr>
<tr>
<td>3.2</td>
<td>Aliquot sample.</td>
</tr>
<tr>
<td>3.3</td>
<td>Measure urine pH.</td>
</tr>
<tr>
<td>3.4</td>
<td>If:</td>
</tr>
<tr>
<td>pH &lt;2</td>
<td>Adjust pH by slowly adding 6N NaOH, one drop at a time, until the pH is between 2 and 4.</td>
</tr>
<tr>
<td>pH &gt;4 and ≤6 and received in original 24-hour acidified container within 8 hours from the end of collection</td>
<td>Adjust pH by adding one drop of 6N HCL until the pH is between 2 and 4. Note: For catecholamine and metanephrine only: If the urine being tested is received in the original plain 24-hour container within 8 hours from the end of the collection time: it is acceptable to adjust the pH.</td>
</tr>
<tr>
<td>pH &gt;4 and ≤6 but received greater than 8 hours from the end of collection</td>
<td>The test will be cancelled automatically by the system upon verification of the pH results.</td>
</tr>
<tr>
<td>pH &gt;6</td>
<td>The test will be cancelled automatically by the system upon verification of the pH results.</td>
</tr>
</tbody>
</table>