

## Department of Pathology & Laboratory Medicine Central Zone

# Laboratory Test Catalogue



## TABLE OF CONTENTS

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

 $\textbf{Section:} \ Management \ System \\ \ PLM \\ \ Website \\ \ General \\ \ Test \ Catalogue \\ \ \\$ **Doc#:** 19453



#### **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: <a href="http://www.cdha.nshealth.ca/pathology-laboratory-medicine">http://www.cdha.nshealth.ca/pathology-laboratory-medicine</a>

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 <u>Bayers Road Blood Collection Service</u> 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.

https://www.cdha.nshealth.ca/system/files/sites/documents/laboratory-test-reference-ranges.pdf

#### **Specimen Receiving Locations**

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

#### **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: <a href="http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/location-hours-outpatient-blood-collection-services/location-

#### **In-Patient and Clinic Blood Collection**

For information related to Nova Scotia Health-Central Zone in-patient and clinic blood collection services please visit:

http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/qeii-inpatient-blood-collection-service

 $\textbf{Section:} \ Management \ System \ PLM \ Website \ General \ Test \ Catalogue \ \textbf{Doc#:} \ 19453$ 

Version: 164.0 Current Effective Date: 2/9/2024

Page 3 of 239



## **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:

http://www.cdha.nshealth.ca/system/files/sites/116/documents/required-formats-and-information-laboratoryrequisitions.pdf

#### **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:

http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/how-obtain-laboratoryrequisitions.

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 4 of 239



#### **Specimen Labeling**

Required formats and information for labeling laboratory specimens:

http://www.cdha.nshealth.ca/system/files/sites/116/documents/required-formats-and-information-labeling-laboratory-specimens.pdf

## 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).

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

Version: 164.0 Current Effective Date: 2/9/2024 Page 5 of 239



#### 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

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

Effective Date: 2/9/2024 Page 6 of 239

Version: 164.0 Current



#### 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

Doc#: 19453

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

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

Effective Date: 2/9/2024 Page 7 of 239

Version: 164.0 Current



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.

Refer to Appendix A for pH adjustment instructions.

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

LIS Mnemonic: 5HIAA

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#### 21 Hydroxylase

## see Adrenal Antibody

Referred Out: In-Common Laboratories

#### 17 Hydroxyprogesterone (17 Alpha Hydroxyprogesterone)

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.

Specimen may be thawed and refrozen once.

Send copy of requisition.

LIS Mnemonic: 17OH Prog

**16S** 

Tube/Specimen: Sterile site fluids, surgically removed tissues, amies without charcoal swabs, CSF.

Requisition: CD0432/ CD0433

Division: Virology-Immunology

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

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18S see Mycology (18S)

Referred Out: The Hospital for Sick Children

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AAA see Adrenal Antibody

Referred Out: In-Common Laboratories

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AAT see Alpha-1-Anti-Trypsin

Division: Clinical Chemistry - Core

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

Doc#: 19453

Effective Date: 2/9/2024 Page 8 of 239

Version: 164.0 Current



ABL kinase domain mutation

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

**ABO Antibody Titre** 

Tube/Specimen: Lavender Stoppered 6.0 mL EDTA x 2 tubes (BD# 367863)

CD0001\_05\_2019 Requisition:

Division: Transfusion Medicine

Instructions: Indicate on requisition if patient is undergoing pheresis and whether pre or post.

NSHA CL-BP-040 Venipuncture for Blood Specimen Collection Comments:

Alternate Names: Anti A/Anti B Titre

Isohemagglutinin Titre

ABO Group and Rh Type

Tube/Specimen: Lavender stoppered 6.0 mL EDTA (BD# 367863)

CD0001\_05\_2019 Requisition:

Division: Transfusion Medicine

Instructions: For medical purposes only

NSHA CL-BP-040 Venipuncture for Blood Specimen Collection Comments:

Note: Specimens for pre and post-natal investigation are sent to IWK Health Centre.

Alternate Names: Blood Group and Rh Type

Group and Type

**Absolute Neutrophil Count** 

Division: Hematopathology - Core

Alternate Names: ANC

AC Blood Sugar

ACA

ACE

Division:

see Glucose AC, Plasma

Division: Clinical Chemistry - Core

see Anti-Cardiac Muscle Antibody

see Angiotensin Converting Enzyme, Plasma

Immunopathology

Division: Clinical Chemistry - Core Section: Management System\PLM\General\PLM Website\General\Test Catalogue\

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 9 of 239



Acetaminophen

Plain Red Tube 6 or 10 mL Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry- Core

Alternate Names: Tylenol LIS Mnemonic: **ACET** 

**Acetylcholine Receptor Antibodies** 

(Do not confuse with Ganglionic Acetylcholine Receptor Antibody)

Gold Stoppered 5.0 mL SST Tube/Specimen:

Referred Out: In-Common Laboratories

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

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Alternate Names: Cholinesterase

Pseudo Cholinesterase

LIS Mnemonic: CHE

Acetylsalicylic Acid see Salicylates

Division: Clinical Chemistry - Core

see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

Acid Mucopolysaccharide Screen

**ACMA** see Anti-Cardiac Muscle Antibody

Immunopathology

ACTH

Division:

Plastic Lavender Stoppered (EDTA) 4mL on ice

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 10 of 239

Version: 164.0 Current



Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Collect in plastic pre-chilled tubes and keep on ice.

Shipping: Separate at 4°C. Transfer 1.0 mL plasma to pre-chilled plastic tube using a plastic pipette.

Freeze immediately and send frozen. Thawed specimens are unacceptable.

Alternate Names: Adrenocorticotropic Hormone

LIS Mnemonic: ACTH

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## **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

contact Hematology Coagulation lab for more information

#### 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

**Doc#:** 19453

\_\_\_\_\_

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current

**Effective Date:** 2/9/2024 Page 11 of 239



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 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** 

see Catecholamines, Total Plasma Adrenaline

Referred Out: In-Common Laboratories

Adrenocorticotropic Hormone see ACTH

Division: Clinical Chemistry - Core

see Endomysial Antibody **AEMA** 

Division: Immunopathology

AF4-MLL gene fusion

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

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 12 of 239

Version: 164.0 Current



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

**AFP** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

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. Shipping:

Alternate Names: Alpha Fetoprotein

LIS Mnemonic: AFP

see HIV-1/HIV-2 Aids Test

Division: Virology-Immunology

see Porphyrin Precursors, random urine ALA, random urine

Referred Out: In-Common Laboratories

see Porphobilinogen Deaminase ALA Dehydratase

Referred Out: In-Common Laboratories

Alanine Aminotransferase, Plasma see ALT, Plasma

Clinical Chemistry - Core

Albumin, Fluid

Division:

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF ALB

Albumin, Plasma

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

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 13 of 239



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

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic:

#### 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

Clinical Chemistry - Core Division:

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:

Albumin/Creatinine Ratio Microalbumin, Urine

LIS Mnemonics: U ACR

U24 ALB

#### Alcohol, Serum

Plain Red Tube 6 or 10 mL Tube/Specimen:

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

#### 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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024 Page 14 of 239

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Uncontrolled When Printed



LIS Mnemonic: ARRATIO

Aldosterone, 24-Hour Urine

24-hour urine collected in plain 24 hour urine bottle Tube/Specimen:

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.

ALDOS U LIS Mnemonic:

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.

CD0046 or CD2573 Requisition:

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)

LIS Mnemonic: 2LAVDNA

ALK PHOS see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

see Bone Alkaline Phosphatase

Referred Out: Mayo Medical Laboratories

Alkaline Phosphatase, Bone

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 15 of 239



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

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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 see Alkaline Phosphatase, Plasma

see AFP

Division: Clinical Chemistry - Core

Alpha Fetoprotein

Division: Clinical Chemistry - Core

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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

\_\_\_\_\_

Alpha Thalassemia, DNA Testing

Tube/Specimen: Three lavender topped EDTA tubes

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

**Doc#:** 19453

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 16 of 239



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

see Hemoglobin Electrophoresis

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

Alpha-1-Antitrypsin Mutation Analysis (Genotyping)

(Do not confuse with AAT Phenotyping)

 $\underline{\textbf{Collect MONDAY ONLY!!}} \ \ \textbf{Notify Referred-out Bench at 902-473-7237 that specimen is being collected.}$ 

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
Collected to meet 10 am run Monday only
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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 17 of 239

Version: 164.0 Current



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

#### Alpha-1-Antitrypsin Phenotyping, Pl 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

#### 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: Antiplasmn

#### ALT, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Alternate Names: Alanine Aminotransferase

**SGPT** 

LIS Mnemonic:

#### **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

Version: 164.0 Current Effective Date: 2/9/2024 Page 18 of 239

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electronic version prior to use. Uncontrolled When Printed



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

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AMH see Anti-Mullerian Hormone

Referred Out: Mayo Medical Laboratories

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**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.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 19 of 239

Version: 164.0 Current



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:

U AA 24 (24-Hour)

#### 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.

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

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

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

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

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

Doc#: 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 20 of 239



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 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

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

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

4.0 mL EDTA Lavender topped tube Tube/Specimen:

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 4°C and aliquot plasma within 30 minutes of collection.

Plasma aliquot must be kept on ice before analysis.

Plasma may be stored at 4°C for up to 2 hours if necessary. Freeze if unable to immediately analyze.

Shipping: Plasma aliquot is stable for 15 minutes at 15 to 25°C, 2 hours at 4 to 8°C 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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 21 of 239

Version: 164.0 Current



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

Alternate Names: Amoebic Serum

Hemagglutination

LIS Mnemonic: RO AMOEBA

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#### **Amoebic Serum**

see Amoebiasis - IHA

Division: Virology-Immunology

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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

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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

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ANA see Anti-Nuclear Antibody

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 22 of 239



Division:	Immunopathology
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Anafranil see Clomipramine

Referred Out: In-Common Laboratories

see Hem Microorganism Anaplasma

Division: Hematopathology-Microscopy

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 performed at the Central Zone lab on all Lyme screen requests (serum). Only one tube is required to be submitted for Lyme

and Anaplasma PCR testing.

EDTA tubes submitted will only be processed if no Lyme screen testing is requested.

LIS Mnemonic: RO ANAPLPCR

Anaplasma Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

CD0002A/CD0002B Requisition: Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

This test will only be referred out by the laboratory if approved by a Microbiologist. Note:

LIS Mnemonic: RO ANAPLSER

**ANC** see Absolute Neutrophil Count

Division: Hematopathology - Core

ANCA see Vasculitis Panel

Division: Immunopathology

Androstenedione

Tube/Specimen: Gold Stoppered 5.0 mL SST

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 23 of 239



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: Delta 4 Androstenedione

LIS Mnemonic: ANDRO

ANF see Anti-Nuclear Antibody

Division: Immunopathology

**Angiotensin Converting Enzyme, Plasma** 

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Plasma stable for 7 days at 2 to 8°C. Frozen aliquots are acceptable. Shipping:

Alternate Names: ACE

LIS Mnemonic: ACE

Anion Gap, 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 Anion Gap includes Sodium (Na), Potassium (K), Chloride (Cl) and Total CO2.

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: Anion Gap

LIS Mnemonic: **AGAP** 

Anti A / Anti B Titre see ABO Antibody Titre

Division: Transfusion Medicine

**Anti TTG** see Anti-Tissue Transglutaminase

Immunopathology

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current

Effective Date: 2/9/2024

Page 24 of 239

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**Doc#:** 19453

Division:



**Anti-Adrenal Antibody** 

see Adrenal Antibody

Referred Out: In-Common Laboratories

Anti-AMPA Receptor, Serum or CSF

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

Referred Out: In-Common Laboratories

Centrifuge at room temperature and aliquot at least 1.0 mL serum into plastic vial. Freeze. Instructions:

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: AMPA

AMPA CSF

**Anti-Basement Membrane** 

Transfusion Medicine

see Anti-Pemphigoid Antibody

Division: Immunopathology

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

Antibody Screen

Division:

Alternate Names:

Indirect Antiglobulin Test **IDAT** 

Anti-Borrelia Antibodies see Lyme Antibodies

Division: Virology-Immunology

**Anti-Cardiac Muscle Antibody** 

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002 Requisition:

Division: Immunopathology

Alternate Names: **ACMA** 

**ACA** 

Anti-Cardiolipin Ab

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Immunopathology

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 25 of 239

Version: 164.0 Current



Comments: This is not the same as an antiphospholipid antibody. Anti-Cardiolipin belongs to Anti Phospholipid Family. Alternate Names: Cardio Ab 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 see F68KD Anti-Cochlear Ab FORWARD Referred Out: Mayo Medical Laboratories **Anti-Cyclic Citrullinated Peptide** Tube/Specimen: Gold Stoppered 5.0 mL SST Requisition: CD0002 Immunopathology Division: Alternate Names: Anti-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)

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 26 of 239



Division: Immunopathology

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Anti-Double Stranded DNA

see Anti-ds DNA

Division: Immunopathology

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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 °C 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 °C for 7 days and frozen >6 months.

LIS Mnemonic: GABAB

GABABCSF

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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 8°C or frozen.

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

**Doc#:** 19453

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 27 of 239



LIS Mnemonic:	Anti-GAD				
Anti-GBM Ab		see Vasculitis Panel			
Division:	1 20				
Anti-Gliadin IgG or IgA		see Anti-Tissue Transglutaminase			
Division:	1 23				
Anti-Glomerular Basement		see Vasculitis Panel			
Division:	1 0,				
Anti-HMGCR Antibodies		see Autoimmune Myopathy/Myositis Profile			
Referred Out:	In-Common Laboratories				
Anti-Hu		see Paraneoplastic Antibodies			
Referred Out:	In-Common Laboratories				
Anti-Hu, CSF		see Paraneoplastic Antibodies			
Referred Out:	In-Common Laboratories				
Anti-Jo-1		see Anti-Nuclear AB, (ANA)			
Division:	Immunopathology				
Anti-LKM		see Liver Kidney Microsomal Antibodies			
Referred Out:	In-Common Laboratories				
Anti-MAG		see Myelin Associated Glycoprotein Antibody			
Referred Out:	In-Common Laboratories				
Anti-MOG		see Neuromyelitis Optica (NMO_IgG)			
Referred Out:	In-Common Laboratories				
Antimicrobia	l Resistance and Nosocomia	l Infections (ARNI)			

 $\label{lem:mass} \begin{tabular}{ll} (MRSA, VRE, ESBLs, Acinetobacter, C. difficile, Strep. Pneumoniae) \\ Section: $Management System \PLM \General \PLM Website \General \Test Catalogue \Barrier \Bar$ 

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 28 of 239



Tube/Specimen: Isolate, Susceptibility testing

Referred Out: Antimicrobial Resistance and Nosocomial Infections (ARNI)

Instructions: Shipped as Category B.

Anti-Microsomal Antibodies

see Anti-thyroid Peroxidase Antibodies

Division: Clinical Chemistry – Core

**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

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

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

Doc#: 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 29 of 239



Division: Immunopathology  Anti-Nuclear Antibody (ANA)  Tube/Specimen: Gold Stoppered 5.0 mL SST Requisition: 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-StTo, Anti-StTo, Anti-StTo, Anti-SS-B-LA; Anti-Centromere B; Anti-Sm. A	Anti-NDNA		see Anti-ds DNA
Anti-Nuclear International 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-SS-A/RO; Anti-SS-B/LA; Anti-Centromere B; Anti-Sm; Anti-SmRNP; Anti-SR-RP; Anti-Sc-70; Anti-JO-1  LIS Mnemonic: ANA  Alternate Names: ANF Anti-Nuclear Factor Nuclear Factor  Nuclear Factor  Division: Immunopathology  Anti-Pancreatic Islet Cell Antibody  Tube/Specimen: Gold Stoppered 5.0 mL SST  Requisition: CD0002  Division: Immunopathology  Alternate Names: APICA Elect Cell Antibody  Alternate Names: APICA Elect Cell AB  Anti-Parietal Cell see Autoantibodies Panel  Anti-Parietal Cell see Autoantibodies 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-Sch DNA: Anti-Chromatin; Anti-Ribosomal P; Anti-SS-A/RO; Anti-SS-B/LA; Anti-Centromere B; Anti-Sm; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-Sn/RNP; Anti-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			
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-Cbromatin; Anti-Ribosomal P; Anti-SS-A/RO; Anti-SS-B/LA; Anti-Centromere B; Anti-Sm; Anti-Sn/RNP; Anti-SR-RNP; Anti-Scl-70; Anti-JO-1  LIS Mnemonic: ANA  Alternate Names: ANF Anti-Nuclear Factor 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	Division:	Immunopathology	
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-SB-LA; Anti-Centromere B; Anti-Sm; Anti-Pancreatic Islet Cell Antibody  Tube/Specimen: Gold Stoppered 5.0 mL SST  Requisition: CD0002 Division: Immunopathology  Alternate Names: APICA Slet Cell AB  Anti-Parietal Cell see Autoantibodies Panel  Referred Out: In-Common Laboratories  Anti-PC see Autoantibodies Panel			
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;	Tube/Specimen:	Gold Stoppered 5.0 mL SST	
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-Sn/RNP; Anti-	Requisition:	CD0002	
Anti-ScI-70; Anti-Chromatin; Anti-Ribosomal P; Anti-SS-A/RO; Anti-SS-B/LA; Anti-Centromere B; Anti-Sm; Anti-Sn/RNP; Anti-RNP; Anti-ScI-70; Anti-JO-1  LIS Mnemonic: ANA Alternate Names: ANF Anti-Nuclear Factor Nuclear Factor  Anti-Nuclear Factor  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	Division:	Immunopathology	
Anti-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  Anti-PC See Autoantibodies Panel	Note:	Anti-ds DNA: Anti-Chromatin;	
Anti-Nuclear Factor 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	LIS Mnemonic:	ANA	
Anti-Nuclear Factor  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  Anti-PC see Autoantibodies Panel	Alternate Names:	Anti-Nuclear Factor	
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			
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  Anti-PC see Autoantibodies Panel	Division:	Immunopathology	
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			
Division: Immunopathology  Alternate Names: APICA Islet Cell AB  Anti-Parietal Cell see Autoantibodies Panel  Referred Out: In-Common Laboratories	Tube/Specimen:	Gold Stoppered 5.0 mL SST	
Alternate Names: APICA Islet Cell AB  Anti-Parietal Cell see Autoantibodies Panel  Referred Out: In-Common Laboratories  Anti-PC see Autoantibodies Panel	Requisition:	CD0002	
Anti-Parietal Cell see Autoantibodies Panel  Referred Out: In-Common Laboratories  Anti-PC see Autoantibodies Panel	Division:	Immunopathology	
Anti-Parietal Cell see Autoantibodies Panel  Referred Out: In-Common Laboratories  Anti-PC see Autoantibodies Panel	Alternate Names:		
Anti-PC see Autoantibodies Panel			
	Referred Out:	In-Common Laboratories	
Referred Out: In-Common Laboratories	Anti-PC		see Autoantibodies Panel
	Referred Out:	In-Common Laboratories	

Version: 164.0 Current Effective Date: 2/9/2024 Page 30 of 239



Tube/Specimen: Gold Stoppered 5.0 mL SST

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

CD0002 Requisition:

Division: Immunopathology

Alternate Names: Intercellular Skin Ab

Anti-Phospholipase A2 Receptor (Anti-PLA2R)

Gold topped SST tube Tube/Specimen:

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 31 of 239



Division:

## **PLM Laboratory Test Catalogue**

**Anti-Proteinase 3** see Vasculitis Panel

Division: Immunopathology

Anti-Retinal Autoantibody

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

Immunopathology

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

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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)

Anti-Skeletal Muscle Antibody

Gold Stoppered 5.0 mL SST Tube/Specimen:

Immunopathology

CD0002 Requisition:

Division:

Division: Immunopathology

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 32 of 239



Alternate Names: ASKMA

Anti-Sm see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-Smooth Muscle see Autoantibodies Panel

Referred Out: In-Common Laboratories

Anti-SM see Autoantibodies Panel

Referred Out: In-Common Laboratories

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Anti-Sm/RNP see Anti-Nuclear AB, (ANA)

Division: Immunopathology

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Anti-SS-A/Ro see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Immunopathology

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Anti-SS-B/La see Anti-Nuclear Ab

initi 55 B/Ett See initi i (deletti ii)

Anti-Streptolysin "O" Titer

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division:

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

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Anti-Striated Muscle Antibody see Autoantibodies Panel

Referred Out: In-Common Laboratories

**Anti-Thrombin (III)** 

(AT)

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 33 of 239

Version: 164.0 Current



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).

Alternate Names: Anti-Thrombin

Anti-Thrombin Activity Anti-Thrombin III Anti- Thrombin III Assay

#### **Anti-Thyroglobulin Antibodies**

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002 Requisition:

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.

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

Alternate Names: TAB-TA

Thyroglobulin Antibodies

Thyroid Antibodies-Thyroglobulin

TG (3 panel test) (High Sensitivity) [for Nova Scotia Health Central Zone] LIS Mnemonic:

TG and TGAB referred in (High Sensitivity) [all other Nova Scotia Health Zones]

#### **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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 34 of 239

Version: 164.0 Current



Anti-Thyrotropin Receptor Antibody see Thyroid Receptor Antibody

Referred Out: In-Common Laboratories

**Anti-Tissue Transglutaminase** 

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002A/CD0002B Requisition: Division: Immunopathology

Shipping: Specimens can only be stored at 2 to 8°C for 7 days, freeze and send frozen serum, if longer.

Note: TTG IgA specimens which flag low for IgA level will be referred out for Gliadin IgG testing.

TTG IgA specimens ≥149 U/mL will be referred out for Endomysial antibody testing if patient is ≥16 years old. If <16 years old, the

specimen will be held and referred out for Endomysial antibody testing upon request from a pediatric gastroenterologist only.

Alternate Names: Anti-TTG

TTG

Tissue Transglutaminase Celiac Screen/Disease

LIS Mnemonic: TTG

see Anti-Nuclear Ab

Anti-Topoisomerase

Immunopathology

Anti-TPO see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

Anti-Xa

Division:

Tube/Specimen: Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate

Requisition: CD0002

Division: Hematopathology - Coagulation

Requisition must indicate the type of LMWH the patient is receiving. Instructions:

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.

Alternate Names: Heparin XA

Anti-Yo see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 35 of 239

Version: 164.0 Current



Anti-Yo, CSF see Paraneoplastic Antibodies, CSF

Referred Out: In-Common Laboratories

**APA** see Autoantibodies Panel

Referred Out: In-Common Laboratories

see Anti-Pancreatic Islet Cell Antibody

Immunopathology

Apolipoprotein A1

APICA

Division:

Tube/Specimen: Gold Stoppered 5.0 mL SST tube.

Referred Out: In-Common Laboratories

Fasting (12 to 14 hours) is recommended, but non-fasting is acceptable. Instructions:

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

Tube/Specimen: Nova Scotia Health Central Zone: Light green Lithium Heparin tube. Referrals: 1.0 mL aliquot of frozen serum

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Centrifuge within 4 hours of collection.

Stability: Plasma stable 24 hours at room temperature and 3 days at 2 to 8°C.

Frozen serum samples accepted and are stable for 60 days.

Referrals: Frozen plasma will not be accepted.

APO B Alternate Names:

LIS Mnemonic: APO B

ARBO Virus

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 36 of 239



Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition, including specific virus request.

Jamestown Canyon and Snowshoe Hare requests require paired sera collected 14 days apart OR serum AND CSF.

Alternate Names: California Encephalitis

Dengue Virus

Eastern Equine Encephalitis Western Equine Encephalitis

Chikungunya Virus Jamestown Canyon Snowshoe Hare Japanese Encephalitis Powassan

Yellow Fever

RO ARBO LIS Mnemonic:

## Arsenic, 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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 37 of 239



Ascorbic Acid Level see Vitamin C

Referred Out: In-Common Laboratories

ASKMA see Anti-Skeletal Muscle Antibody

Division: Immunopathology

ASOT

see Anti-Streptolysin "O" Titer

Division: Clinical Chemistry - Core

**Aspartate Amino Transferase** see AST, Plasma

Division: Clinical Chemistry - Core

Aspergillosis

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0432/ CD0433

Division: Virology-Immunology

Note: Farmer's Lung, Pidgeon Serum Test, and Bird Antigen Testing not available.

LIS Mnemonic: RO ASPER

Aspirin see Salicylates

Clinical Chemistry - Core

AST, Plasma

Division:

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Alternate Names: Aspartate Amino Transferase

**SGOT** 

LIS Mnemonic: AST

**Autoantibodies Panel** 

Tube/Specimen: Gold topped SST tube

Referred Out: In-Common Laboratories

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 38 of 239

Version: 164.0 Current



Aliquot serum and freeze. Instructions:

LIS Mnemonic: AUTOAB

**Autoimmune Encephalitis** 

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

/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.

AILDP LIS Mnemonic:

**Autoimmune Muscle Disease Profile** 

see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 39 of 239

Version: 164.0 Current



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-Mup44/NT5C1

Autoimmune Inflammatory Myopathy/Myositis Profile

Autoimmune Muscle Disease Profile Muscle Autoimmune Myositis Panel

LIS Mnemonic: MYOSITIS

**Autoimmune Retinopathy Panel** 

see Anti-Retinal Autoantibody

(ARP)

Referred Out: Mayo Medical Laboratories

Autoimmune Thrombocytopenia Purpura

Seven 7.0 mL yellow topped ACD tubes  $\underline{\text{or}}$  Nine 4.5 mL light blue topped sodium citrate tubes. Tube/Specimen:

Referred Out: McMaster University HSC

Instructions: Send to Hematology Coagulation Lab for processing.

LIS Mnemonic: Miscellaneous Hematology

see Amitriptyline Aventyl

Referred Out: In-Common Laboratories

see Hem Microorganism Babesia

Division: Hematopathology-Microscopy

Babesia PCR

Division:

Tube/Specimen: 4.0 mL Lavender topped EDTA tube

Requisition: CD0002A/CD0002B

Instructions: Clinical data should be indicated on the requisition.

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

Virology-Immunology

LIS Mnemonic: RO BABPCR

**Babesia Serology** 

Tube/Specimen: Gold Stoppered  $5.0\ mL\ SST$  tube

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 40 of 239

Version: 164.0 Current

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electronic version prior to use. Uncontrolled When Printed



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 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 Mnemonic: BVPAN

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### **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.  $\ensuremath{\textbf{Freeze}}.$ 

Send copy of requisition.

LIS Mnemonic: 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 Mnemonic: RO BART

## **B** Cell Counts

**Doc#:** 19453

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

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

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 41 of 239



later than 14:00 hours on Fridays (or the day before a holiday). The requisition must accompany the specimen to the Flow laboratory.

Maintain specimen at room temperature. Shipping:

Alternate Name: CD19 TESTING

LIS Mnemonic: CELL SM

## **B-cell lymphoid clonality**

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

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

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

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)

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024 Page 42 of 239



Cyclin-D1 PRAD1

LIS Mnemonic: 2LAVDNA

BCL-2 see BCL2-IGH gene fusion

Division: Molecular Diagnostics

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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  $4^{\circ}$ 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

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

Doc#: 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 43 of 239

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(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** 

One Gold topped SST tube Tube/Specimen:

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 44 of 239



Beta-2-Microglobulin, Urine

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

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

Send copy of requisition.

LIS Mnemonic: B2MG U

**Beta-Carotene** see Carotene

(\beta-Carotene)

Referred Out: In-Common Laboratories

Beta-CrossLaps see C-Telopeptide

Referred Out: In-Common Laboratories

Beta Hydroxybutyrate

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

Send copy of requisition.

BHYB LIS Mnemonic:

**Beta-Transferrin** 

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

Tube/Specimen: Fluid specimen; indicate source

Referred Out: In-Common Laboratories

Instructions:

Division:

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

Send copy of requisition.

Hematopathology - Coagulation

**BETATRANS** LIS Mnemonic:

Bethesda (Factor VIII C Inhibitor) see Factor VIII C Inhibitor

Version: 164.0 Current Section: Management System\PLM\General\PLM Website\General\Test Catalogue\

**Doc#:** 19453 Effective Date: 2/9/2024

Page 45 of 239



## 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

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Specimens must be delivered to the laboratory within 2 hours of collection.

Shipping: Separate plasma within 2 hours of collection

Alternate Names: HCO3

TCO2 Total CO2

LIS Mnemonic: CO2

TOTAL CO2

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Bile Acids/Bile Salts

Tube/Specimen: Gold topped SST tube

Patient must be fasting for 12 hours. Unknown or Not Fasting status will not be processed.

Referred Out: IWK Chemistry

Instructions: Centrifuge at room temperature within 2 hours of collection.

Aliquot at least 0.5 mL of serum into plastic vial. Freeze at once.

Stability: Room temperature 24 hours, refrigerated 7 days, frozen 30 days.

LIS Mnemonic: BILET

Bilirubin Direct, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Total Bilirubin will also be assayed.

Alternate Names: Direct Bilirubin

VDB

LIS Mnemonic: BILI D

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Bilirubin Indirect, Plasma

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 46 of 239



Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Total and Direct Bilirubin will be assayed; the Indirect Bilirubin will be calculated from the Total and Direct.

Alternate Names: Indirect Bilirubin

LIS Mnemonic: BILI I

## **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: separation.

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

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

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Biquin Level see Quinidine Level

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 47 of 239

Version: 164.0 Current



Referred Out: In-Common Laboratories

Blastomycosis

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 BLASTO

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Blood C&S see Blood Cultures

Division: Microbiology

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**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

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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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 48 of 239

Version: 164.0 Current



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.

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

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**

Pre-heparinized Blood Gas syringe at Room Temperature. Tube/Specimen:

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:  $CD3211\_05 - 2022$ 

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 49 of 239



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 ExtPnl

## **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.

 $CD3211\_05 - 2022$ Requisition:

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 StdPnl

#### **Blood Group and Rh Type** see ABO Group and Rh Type

Transfusion Medicine Division:

### **Blood Porphyrins** see Porphyrin Screen, Plasma

Referred Out: In-Common Laboratories

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

Division: Clinical Chemistry - Core

#### **Body Fluids** see specific test for instructions.

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 50 of 239



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

Send copy of requisition.

LIS Mnemonic: Bone ALP

**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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 51 of 239

Version: 164.0 Current



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.

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**Bordetella Pertussis Serology** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

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

Clinical Chemistry - Core

**Brucella Abortus Serology** 

Division:

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Convalescent specimen should be sent 10-14 days after acute specimen with a new requisition.

LIS Mnemonic: RO BRUC

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 52 of 239

Version: 164.0 Current



Division:

# **PLM Laboratory Test Catalogue**

**Bullous Pemphigoid** 

see Anti-Pemphigoid Antibody

BUN see Urea, Plasma

Division: Clinical Chemistry - Core

Immunopathology

C0see Cyclosporine

Division: Clinical Chemistry - Toxicology

C1 Esterase Inhibitor see C1 Inactivator

Division: Clinical Chemistry - Immunology

C1 Esterase Inhibitor "Functional"

Light blue topped Sodium Citrate tube Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Separate plasma. Freeze at once.

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

Send copy of requisition.

LIS Mnemonic: C1ESTF

C1 Inactivator

Plain red topped tube (6 mL) (no serum separator) Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Immunology

Shipping: 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.

Alternate Names: C1 Esterase Inhibitor

**C1Q** Complement Component

Tube/Specimen: Lavender topped K2EDTA tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature within 1 hour of collection.

Aliquot platelet-poor plasma.

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 53 of 239

Version: 164.0 Current



Send copy of requisition.

Stability: 4 days at room temperature, 10 days at 2 to 8°C, 29 days frozen.

LIS Mnemonic: C1QL

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C2 see Cyclosporine

Division: Clinical Chemistry - Toxicology

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C282Y see Hemochromatosis

Division: Molecular Diagnostics

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C3 C4 see Complement Serum (C3 C4)

Division: Clinical Chemistry - Core

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CA see Calcium, Plasma

Division: Clinical Chemistry – Core

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CA125

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.

Alternate Names: Ovarian Cancer Antigen

LIS Mnemonic: CA 125

CA15-3

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: Breast Cancer Marker

BR

LIS Mnemonic: CA 15-3

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 54 of 239



## CA 19-9 Level

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: CA 19-9 Level

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## **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

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

**Doc#:** 19453 Effective Date: 2/9/2024

Page 55 of 239

Version: 164.0 Current



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.

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

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Calcium, Ionized

see Ionized Calcium, Plasma

Division: Clinical Chemistry - Core

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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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 56 of 239



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

California Encephalitis

see ARBO Virus

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.

IWK specimens: 3 days refrigerated; 30 days frozen. Stability:

ICL specimens: 5 days refrigerated; 1 month frozen.

CALP F LIS Mnemonic:

see Next Generation Sequencing - Myeloid panel **CALR** (Calreticulin) Mutation

Division: Molecular Diagnostics

Referred Out: Mayo Medical Laboratories

Cancer Associated Retinopathy Panel (CARP)

see Anti-Retinal Autoantibody

see Cyclic AMP Urine and Serum

cAMP

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.

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 57 of 239

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electronic version prior to use. Uncontrolled When Printed



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

Plain Red Tube 6 or 10 mL Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: 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).

Note: 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

see Bicarbonate, Plasma

Division: Clinical Chemistry - Core

Carbon Monoxide

Dark green stoppered, lithium heparinized venous whole blood at Room Temperature. Tube/Specimen:

Maximum heparin ratio must be <10 IU/mL blood

Recommended volume: Full tube

 $CD3211\_05 - 2022$ Requisition:

Division: Clinical Chemistry - Core

Label tube with patient information in waterproof ink. Place labelled requisition and tube in transport bag (NOT ON ICE) and deliver to Comments:

Processing Area immediately.

Alternate Names: Carboxyhemoglobin

COHb

LIS Mnemonic: COHB

Carboxyhemoglobin

see Carbon Monoxide

Division: Clinical Chemistry - Core

see CEA Carcinoembryonic Antigen

Division: Clinical Chemistry - Core

Cardiac Enzymes

see CK, Plasma or Lactic Dehydrogenase, Serum

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 58 of 239



Division: Clinical Chemistry – Core

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Cardio Ab see Anti-Cardiolipin Ab

Division: Immunopathology

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Cardiolipin Antibodies see Anti-Cardiolipin Ab

Division: Immunopathology

**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

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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

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Catecholamine, 24-Hour Urine

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 59 of 239

Version: 164.0 Current



Tube/Specimen: 24-hour urine collection, preserved with 25 mL 6N HCL added to the bottle at the start of collection

Referred Out: In-Common Laboratories

Instructions: Patient Preparation: Restrict caffeine, nicotine, and alcohol 24 hours prior to collection. Discontinue Methyldopa (Aldomet) at least 5 days

prior to 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.

Refer to Appendix A for pH adjustment instructions.

Stability: Refrigerated (preferred) 1 month, frozen >1 month.

Alternate Names: Urinary Catecholamines

LIS Mnemonic: U24 CATS

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CBC see Profile, AutoDiff

Division: Hematopathology - Core

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CBF beta-MYH11 gene fusion see Inversion 16

Division: Molecular Diagnostics

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CCP see Anti-Cyclic Citrullinated Peptide

Division: Immunopathology

Division:

Division:

Doc#: 19453

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CD4 Cells, CD4 Cell Marker see T Cell Subsets

Division: Hematopathology- Flow Cytometry

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CD19 TESTING see B Cell Counts

Hematopathology- Flow Cytometry

Hematopathology- HLA

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CD34 TESTING see Stem Cell Enumeration

CD55/59 TESTING see Paroxysmal Nocturnal Hemoglobinuria

Division: Hematopathology – Flow Cytometry

CEA

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current

**Effective Date:** 2/9/2024 Page 60 of 239



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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Stability: 72 hours refrigerated

PCF CEA and AMY LIS Mnemonic:

PCF AMY and CEA

## Celiac Screen/Disease

see Anti-Tissue Transglutaminase

Division: Immunopathology

CellCept see Mycophenolate

Clinical Chemistry - Toxicology Division:

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

QE 7850\_12\_05 Requisition:

Division: Hematopathology - Core

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 61 of 239

Version: 164.0 Current



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;

Cytology: 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

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CH50 see Complement CH50

Referred Out: In-Common Laboratories

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CHIC-2 see Hypereosinophilic Syndrome

Referred Out: Mayo Cytogenetics Laboratory

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Chicken Pox Titre see Varicella Zoster Immune Status

Division: Virology-Immunology

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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

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

Version: 164.0 Current Effective Date: 2/9/2024 Page 62 of 239

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Doc#: 19453



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

VNTR

Variable Number Tandem Repeats

LIS Mnemonic: 2LAVDNA

## Chlamydia PCR, Swab

Tube/Specimen: Hologic Aptima Multitest Swab collected from eye, urethra, cervix, vagina, throat or rectum

CD0432/CD0433 Requisition:

Division: Microbiology-Immunology

Stable at 2 to 30°C for 60 days Shipping:

CTGC LIS Mnemonic:

## Chlamydia PCR, Urine

CD0432/ CD0433 Requisition:

Division: Virology-Immunology

Instructions: 10 to 50 mL first catch urine (first part of the stream) collected in polypropylene container with no preservative

Comments: Patient must not have urinated during the previous 2 hours. This test is recommended for male patients. The preferred sample for females is a

vaginal swab due to the decreased sensitivity of female urine.

If sending specimen from outside QEII HSC, transport at room temperature within 24 hours of collection. Refrigerate specimen until time of Shipping:

transport.

LIS Mnemonic: CTGC

## Chloride, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Specimens must be delivered to the laboratory within 2 hours of collection. Comments:

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: C1-

LIS Mnemonic: CL

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 63 of 239

Version: 164.0 Current



Chloride, Stool see Fecal Chloride

Referred Out: In-Common Laboratories

Chloride, 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

CD0002 Requisition:

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 aliquot and the requisition.

Comments: No reference ranges are provided for random urine.

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

LIS Mnemonic: U24 CL

U CL

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

CD0002 Requisition:

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 64 of 239



Division:	Clinical Chemistry - Core
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Cholesterol, HDL see HDL-Cholesterol, Plasma

Division: Clinical Chemistry - Core

Cholesterol, LDL see LDL-Cholesterol, Plasma

Division: Clinical Chemistry - Core

see Acetylcholinesterase, Plasma Cholinesterase

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

Immunopathology

Chrithidia Lucillae see Anti-Nuclear AB (ANA)

**Chromium 24 Hour Urine** 

Division:

Collect in plain 24 hour urine container. Collection date and 24 hour volume must be provided. Tube/Specimen:

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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 65 of 239

Version: 164.0 Current



LIS Mnemonic: Miscellaneous Referred-Out

## Chromium, Plasma

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

Referred Out: In-Common Laboratories

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

Instructions: Store and send cold.

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

Send copy of requisition.

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

Instructions: Ship refrigerated. Do not freeze. Do Not Centrifuge!

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

Send copy of requisition.

Used for patients with orthopedic implants made of cobalt-chromium alloys, annual follow-up of levels is recommended for the first five Utilization:

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

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 66 of 239



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.

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.

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**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

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**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

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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.

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 67 of 239

Version: 164.0 Current



LIS Mnemonic: CHYLO P

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**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 4°C.

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

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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

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Citric Acid see Citrate, Urine

Division: Clinical Chemistry – Core

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CK, Plasma

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 68 of 239



Requisition: CD0002

Division: Clinical Chemistry – Core

Alternate Names: Creatine Kinase

CPK CKMB

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

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CL see Chloride, Plasma

Division: Clinical Chemistry - Core

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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

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**CLL** hypermutation

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

CLL MLPA

**Doc#:** 19453

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  $4^{\circ}C$ 

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

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

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 69 of 239



important to know the white blood cell count prior to extracting the DNA.

Any specimen referred from outside of Nova Scotia must also be accompanied by a flow cytometry report that is less than 2 weeks old.

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

Plain Red Tube 6 or 10 mL Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: This determination can be done on micro samples. Send at least 0.2 mL of serum for each test.

Blood should be collected just prior to the next dose (trough collection).

Routine monitoring includes quantitation of the active metabolite N-Desmethylclobazam. Note:

Alternate Names: Frisium

CLOB LIS Mnemonic:

Clomipramine Level

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

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 70 of 239



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

Shipping: Stool may be transported at 2 to 8°C if it will be received within 72 hours. If it will be received >72 hours freeze specimen.

LIS Mnemonic:

E CDIFF

Clozapine (Clozaril)

Tube/Specimen: Royal Blue Stoppered (BD 368380, Trace Element Serum/Plasma) 2x6 mL

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Comments: Blood should be collected just prior to next dose (trough). Blood should not be collected until 7 days after the last dose change.

Shipping: If sending specimen from outside QEII HSC, send frozen serum.

Alternate Names: Clozaril

> Desmethylclozapine Norclozapine

LIS Mnemonic: CLOZ

**CMV Antibody Screen** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002A/CD0002B Requisition:

Division: Virology-Immunology

Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required. For IgM: convalescent specimen should be taken Instructions:

10-14 days after acute specimen with a new requisition. Indicate if specimen is acute or convalescent.

Alternate Names: Cytomegalovirus Antibody Screen

LIS Mnemonic: CMV (IgG)

CMVM (IgM)

Virology-Immunology

**CMV Antigen** see CMV PCR

**CMV** Avidity

Division:

Gold Stoppered 5.0 mL SST tube Tube/Specimen:

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024 Page 71 of 239



Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition. Provide CMVG (AU/mL) and CMVM (index) results as well as any patient information

(ie.pregnancy) on the requisition.

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

RO ROSER LIS Mnemonic:

**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

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 Instructions:

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.

CD0432/CD0433 Requisition:

Division: Virology-Immunology

Store at 2 to 8°C for up to 3 days. If longer freeze and ship frozen. Shipping:

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

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

Version: 164.0 Current Effective Date: 2/9/2024

Page 72 of 239



#### **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.

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.

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Cobalt, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge as soon as possible.

Aliquot plasma into plastic transfer vial. Freeze.

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

Send copy of requisition.

Utilization: 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: COBP

Cobalt, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions: **Do Not Centrifuge!**<u>Do not freeze</u>. Ship refrigerated.

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

Send copy of requisition.

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 to monitor potential adverse health effects.

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

LIS Mnemonic: COB WB

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Coccidioidomycosis Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 73 of 239

Version: 164.0 Current



Note: For Coccidioidomycoses cultures, see the "Microbiology User's Manual". This test will be referred out by the laboratory.

RO COCCIDIO LIS Mnemonic:

**COHb** see Carbon Monoxide

Division: Clinical Chemistry - Core

**Cold Agglutinin Test** 

see Cold Agglutinin Titre

Division: Transfusion Medicine

**Cold Agglutinin Titre** 

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

Requisition: CD0001\_05\_2019

Division: Transfusion Medicine

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

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: Indicate on requisition, which Complement is requested.

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

Alternate Names: C3 C4

LIS Mnemonic:

Complement C3 C3 Complement

Complement C4 C4 Complement Complement C3C4

Complement C3C4

Complement CH50

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 74 of 239



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.

LIS Mnemonic: CH50

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Compound "S" see 11-Deoxycortisol

Referred Out: In-Common Laboratories

Coombs Test see Direct Antiglobulin Test or Indirect

Division: Transfusion Medicine

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Co-Oximetry see Blood Gases

Division: Clinical Chemistry - Core

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Copeptin

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge.

Aliquot 1.0 mL plasma into a plastic transfer vial. **Freeze at once.** Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

LIS Mnemonic: Copeptin

Copper, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge ASAP.

Aliquot approximately 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.

Utilization: Plasma copper is used for potential nutritional deficiency or in diagnosis of Wilson's disease.

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

LIS Mnemonic: CU P

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 75 of 239



#### Copper, 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.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 13 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.

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

CUU

#### 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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 76 of 239

Version: 164.0 Current



Cortisol, Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimens should ideally be collected prior to 10 am - however, proceed with collection as per physician's direction on the requisition form.

Clinicians must indicate on the requisition form if this test is part of a Dexamethasone Suppression Test (DST) by writing

'Cortisol – DST' in the bottom space on the requisition. (June 6/17) These are to be accessioned as Cortisol (DST).

Shipping: Separate serum within 5 hours of collection. Serum stable for 14 days at 2 to 8°C. Freeze and send frozen serum, if longer.

see Q-Fever

LIS Mnemonic: CORT

CORT (DST) [post Dexamethasone Suppression Test only]

Coxiella Burnetii

Division: Microbiology-Immunology

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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

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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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 77 of 239



Creatine Kinase see CK, Plasma

Division: Clinical Chemistry - Core

Creatinine Clearance, 24-Hour Urine or Timed Urine

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

Clinical Chemistry - Core Division:

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

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

CD0002 Requisition:

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 78 of 239



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.

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 Lucillae see Anti-ds DNA

Immunopathology Division:

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 79 of 239



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

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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

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ctEGFR see Circulating Tumor DNA

Division: Molecular Diagnostics

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Culture & Sensitivity see Blood Cultures

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

**Doc#:** 19453 **Effective Date:** 2/9/2024

Page 80 of 239

Version: 164.0 Current



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

Do Not Centrifuge! Instructions:

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** 

Urine and serum are required for testing. Serum must be drawn at time of urine collection. Tube/Specimen:

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 of urine.

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

Send copy of requisition.

LIS Mnemonic: cAMP

**Cyclic-Citrullinated Peptide** 

see Anti-Cyclic Citrullinated Peptide

Division: Immunopathology

Cyclin-D1 see BCL1-IGH gene fusion

Division: Molecular Diagnostics

Cyclosporine

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 81 of 239



The time sample collected should be indicated on the requisition and tubes. Time of last medication should be indicated on the requisition. Instructions:

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 C0 (Trough) C2 (Peak)

LIS Mnemonic: CYA

C0 hr (Trough) C2 hr (Peak)

#### Cyclosporine A see Cyclosporine

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.

Recollect if sample thaws. Note:

LIS Mnemonic: CYSTC

#### Cysticercosis

Gold Stoppered 5.0 mL SST Tube/Specimen:

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

Collection should be a mid-stream technique to minimize bacterial contamination. Timed specimens (12-hour or 24-hour) are accepted. Tube/Specimen:

Referred Out: IWK Metabolic Lab

Specimen required: 10 mL urine aliquot from well mixed collection. Instructions:

Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024 Page 82 of 239

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



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

U CYSTI 24

**Cytogenetic Testing for IWK** see IWK Cytogenetics Testing Referred Out: IWK Cytogenetics Lab Cytomegalovirus Antibody see CMV Antibody Screen Division: Virology-Immunology see CMV Antibody Screen Cytomegalovirus IgM 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 CD0002 Requisition: 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).

Deaminated gliadin peptide IgG or IgA see Anti-Tissue Transglutaminase

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

Version: 164.0 Current Effective Date: 2/9/2024 Page 83 of 239



Division:	Immunopathology	
Dehydroepia	ndrosterone	see DHEA-S
Division:	Clinical Chemistry - Core	
Delta 4 Andr	ostenedione	see Androstenedione
Division:	·	
Dengue Viru		see ARBO Virus
Division:		
Depakene		see Valproate
	Clinical Chemistry - Core	
Desethylamic	odarone	see Amiodarone Level
Referred Out:	In-Common Laboratories	
Desipramine		see Imipramine Level
	In-Common Laboratories	
Desmethylclo	omipramine	see Clomipramine Level
Referred Out:	In-Common Laboratories	
Desmethyldo	xepin	see Doxepin Level
Referred Out:	In-Common Laboratories	
Dexamethaso	one Suppression Test (DST)	see Cortisol, Serum
Division:	Clinical Chemistry - Core	
DHEA-Unco		
Tube/Specimen:	Plain red topped tube or gold topped	SST tube

Mayo Medical Laboratories

Referred Out:

Version: 164.0 Current Effective Date: 2/9/2024

Page 84 of 239



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.

Make sure "unconjugated" is requested on requisition. Stable frozen for only 14 days. Note:

LIS Mnemonic: DHEA UNCON

**DHEA-S** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

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

Dehydroepiandrosterone Sulphate Alternate Names:

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** 

see specific test for instructions.

Dialysate Fluid

Clinical Chemistry - Core

Diastase

Division:

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 85 of 239



Division: Hematopathology - Core

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Differential, Manual

see Blood Film, Differential, Manual

Division: Hematopathology - Microscopy

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Digoxin

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 86 of 239

Version: 164.0 Current



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

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**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

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**Direct Bilirubin** 

see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

DLI

see Donor Lymphocyte Infusion

Division: Hematopathology - Flow Cytometry

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**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.

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 87 of 239



LIS Mnemonic: T CELL SUB

Dopamine, Urine see Catecholamines, Urine

**Doxepin Level** 

Division:

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

Clinical Chemistry - Toxicology

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: 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.

CD0002 Requisition:

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

Only available at HI Out-patient Blood Collection. Ordering physician must pre-book by calling 902-473-2452. Tube/Specimen:

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

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

**Doc#:** 19453 Effective Date: 2/9/2024 Page 88 of 239

Version: 164.0 Current



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

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Eastern Equine Encephalitis see ARBO Virus

Division: Virology-Immunology

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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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 89 of 239

Version: 164.0 Current



Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ECHINO

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eGFR, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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**Ehrlichia PCR** 

Division:

Division:

Tube/Specimen: 4.0 mL Lavender topped EDTA tube

Requisition: CD0002A/CD0002B

Instructions: Clinical data should be indicated on the requisition.

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

Virology-Immunology

LIS Mnemonic: RO EHRPCR

Ehrlichia Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B

Instructions: Clinical data should be indicated on the requisition.

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

Virology-Immunology

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 90 of 239

Version: 164.0 Current



LIS Mnemonic: RO EHRSER

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Elastase, Stool see Fecal Elastase

Referred Out: In-Common Laboratories

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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)

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

U 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 gonorrohoeae,

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 91 of 239



Shipped as Biological Substances Category B Instructions:

**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

Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Other Tube/Specimen:

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category A

**Enteric Diseases Program:** Listeria monocytogenes

Tube/Specimen: Isolate, Serotyping

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B.

**Enteric Diseases Program:** 

Salmonella species

Tube/Specimen: Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Tissue Culture Cytotoxicity Assay, Other

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B (S. typhi, if isolated, may be sent as a Precautionary Category A)

**Enteric Diseases Program:** 

Shigella species

Tube/Specimen: Isolate, Biotyping, Serotyping, Phage Typing, Pulse Field Gel Electrophoresis (PFGE), Toxin PCR, Tissue Culture Cytotoxicity Assay, Other

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B except S. dysenteriae which requires Category A.

Enterohemorrhagic Ecoli requests

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 92 of 239



Referred Out: IWK-Microbiology Lab

Instructions: Shipped as Biological Substance Category B.

**Enterovirus** 

Tube/Specimen: CSF (0.5 mL sterile sample)/Stool/Throat swab/Respiratory specimens

CD0432/CD0433 Requisition:

Division: Virology-Immunology

Comments: 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

location by the microbiology laboratory.

Stool/throat/respiratory specimen: Consult microbiologist. Usually only available for immunocompromised children.

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.

Stool/Throat/Respiratory: Freeze and ship specimens frozen.

LIS Mnemonic: E BFME (CSF)

ROSER (Stool/throat/respiratory)

**Eosinophil Count** 

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Core

Total Eosinophil Count Alternate Names:

Eosinophil, Nasal Smear

Tube/Specimen: Nasal smear

CD0002 Requisition:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 93 of 239

Version: 164.0 Current



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

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Epinephrine see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

Epinephrine, Urine see Catecholamines, Urine

Division: Clinical Chemistry - Toxicology

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**Epival** see Valproate

Division: Clinical Chemistry - Core

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EPO see Erythropoietin

Division: Clinical Chemistry - Core

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

Referred Out: In-Common Laboratories

**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

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**Erythropoietin** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 94 of 239



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.

Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer. Shipping:

Alternate Names: EPO

LIS Mnemonic: EPO

**ESR** 

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

CD0002 Requisition:

Division: Hematopathology - Core

Test must be performed within 10 hours of collection. Unacceptable if specimen more than 10 hours old. Instructions:

Alternate Names: Sedimentation Rate

**Estradiol** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Alternate Names:

17 Beta Estradiol

LIS Mnemonic: F2

Ethanol see Alcohol, Serum

Division: Clinical Chemistry - Core

**Ethosuximide Level** 

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into plastic vial.

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 95 of 239



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LIS Mnemonic: Ethosux

**Ethyl Alcohol** see Alcohol, Serum

Division: Clinical Chemistry - Core

**Ethylene Glycol** 

Tube/Specimen: Plain Red Tube 6 or 10 mL

CD0002 Requisition:

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 96 of 239



LIS Mnemonic: Miscellaneous Referred-Out

#### Factor Assays II, V, VII, X, VIIIC, IX, XI, XII

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

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.

#### Factor Assay Chromogenic VIII

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

Requisition:

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.

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

vials (12x75).

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

LIS Mnemonic: Chrom FIX

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 97 of 239

Version: 164.0 Current



#### **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

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

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

Send 4 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene Referrals:

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

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

Send 4 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene Referrals:

vials (12x75). Send on dry ice.

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

Chrom VIII Inhib Alternate Names:

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)

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 98 of 239



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

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**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.

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Farmer's Lung

see Aspergillosis/Farmer's Lung

Division: Virology-Immunology

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Fascioliasis - IFA

Tube/Specimen: Gold Stoppered 5.0 mL SST

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 99 of 239

Version: 164.0 Current



CD0002A/CD0002B Requisition:

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

see Fecal Fat 72 Hour Fat. Fecal

Referred Out: In-Common Laboratories

Fe see Iron, Plasma

Clinical Chemistry - Core Division:

FE, Liver see Iron Level Liver RO

Referred Out: In-Common Laboratories

**Fecal Calprotectin** see Calprotectin, Fecal

Referred Out: In-Common Laboratories

**Fecal Chloride** 

 $5.0~\mathrm{mL}$  Random stool sample in naturally liquid form. Formed stool is not acceptable. Tube/Specimen:

Referred Out: In-Common Laboratories

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

Referred Out: In-Common Laboratories

Instructions: Send frozen.

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

Send copy of requisition.

LIS Mnemonic: ELAS F

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 100 of 239



Instructions:

#### **PLM Laboratory Test Catalogue**

#### **Fecal Electrolytes**

(Includes Sodium and Potassium-may order individually)

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

Referred Out: In-Common Laboratories

> 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

Timed stool sample MUST be collected in approved containers. Containers such as <u>metal cans are not acceptable</u>. 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 Tube/Specimen:

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.

ST FAT LIS Mnemonic:

Fecal Osmolality

see Osmolality Fecal

Referred Out: In-Common Laboratories

Ferritin

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

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** 

**Fetal Hemoglobin** (Hgb F)

Tube/Specimen:

Lavender Stoppered 4.0 mL EDTA

CD0002 Requisition:

Division: Hematopathology - Immunology

Alternate Names: Hemoglobin F

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 101 of 239



**Fibrinogen** 

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

CD0002 Requisition:

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.

Filariasis – IFA

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO FILARIA

FIP1P1/PDGFRa

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

Lavender Stoppered 4.0 mL EDTA Tube/Specimen:

CD0002 Requisition:

Clinical Chemistry - Toxicology Division:

Trough whole blood should be collected before medication. Instructions:

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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 102 of 239

Version: 164.0 Current



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

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#### Fletcher Factor (Prekallikrein)

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

#### see Leukemia and Lymphoma Screening

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  $4^{\circ}C$ .

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  $4^{\circ}C$  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

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#### Fluoxetine Level

Tube/Specimen: Plain red topped tube.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 103 of 239

Version: 164.0 Current



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.

**FLUOX** LIS Mnemonic:

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.

**RBC** Folate Alternate Names:

Red Blood Cell Folate

RBC FOL LIS Mnemonic:

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 104 of 239



Division:	Clinical Chemistry - Core	
Formic Acid		see Methanol
Division:	Clinical Chemistry - Toxicology	
FRDIL		see Phenytoin, Free
Referred Out:	In-Common Laboratories	
Free Erythroc	yte Protoporphyrins	see Protoporphyrin, Erythrocyte
Referred Out:	In-Common Laboratories	
Free Phenytoi	n	see Phenytoin, Free
Referred Out:	In-Common Laboratories	
	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 co	ollection. 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 Triiodoth		see Free T3
Division:	Clinical Chemistry – Core	

Version: 164.0 Current Effective Date: 2/9/2024 Page 105 of 239



Division: Clinical Chemistry - Toxicology
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**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.

LIS Mnemonic: Fructosam

**FSH** 

Gold Stoppered 5.0 mL SST Tube/Specimen:

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.

Follicle Stimulating Hormone Alternate Names:

LIS Mnemonic: **FSH** 

Division:

Referred Out:

FSH MD see Facioscapulohumeral Dystrophy

Referred Out: Molecular Genetics Diagnostic Laboratory

Molecular Diagnostics

see Factor V Leiden Mutation

FV G1691 A Mutation

**FV Gene Mutation** see Factor V Leiden Mutation

Division: Molecular Diagnostics

FXIII see Factor XIII Assay

Referred Out: Hamilton General Hospital

In-Common Laboratories

**G6PD** see Glucose-6-Phosphate Dehydrogenase

Section: Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 106 of 239



**Gabapentin Level** 

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL serum in plastic referred-out tube. **Freeze** at once. Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

LIS Mnemonic: GABA or Gabapentin RO

GAD65 Antibody Glutamic Acid Decarboxylase see Anti-GAD

Referred Out: In-Common Laboratories

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**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.

Clinical Chemistry - Core

LIS Mnemonic: GALACT

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Gamma Globulins see Immunoglobulins (GAM)

Division: Clinical Chemistry - Core

Gamma Glutamyl see Gamma GT, Plasma

Gamma GT, Plasma

Division:

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

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 107 of 239

Version: 164.0 Current



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

Referred Out: In-Common Laboratories

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Ganglioside GQ1B IgG Antibody see GQ1B IgG Antibody

Referred Out: In-Common Laboratories

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Gastrin

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

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

Division: Molecular Diagnostics

Genetic Testing for C282Y see Hemochromatosis

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

Molecular Diagnostics

Tube/Specimen: CSF or Tissue

Referred Out: Central Public Health Lab

Instructions: Shipped as Biological Substances Category B or may also be sent as Category A.

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Gentamicin Level

Division:

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 108 of 239

Version: 164.0 Current



Division: Clinical Chemistry - Core

Comments: Gentamicin may be administered using 2 dosing strategies:

If Gentamicin is administered once daily (much larger than traditional doses) for patients who have good renal function and have no other exclusions, eg. Endocarditis, dialysis, surgical prophylaxis, burns (>20%), only pre specimens are required. Take Pre (trough) blood specimen

6 hours before next dose is administered.

If Gentamicin 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: GENT PRE

GENT POST GENT TNS

**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

Collect two 4 mL or one 6 mL chilled lavender topped EDTA tube(s). Place on ice. Tube/Specimen:

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.

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

Doc#: 19453

Effective Date: 2/9/2024 Page 109 of 239

Version: 164.0 Current



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:

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

**Doc#:** 19453 **Effective Date:** 2/9/2024 Page 110 of 239

Version: 164.0 Current



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 BF GLU

#### Glucose PC, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Instructions: 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.

Sugar PC Alternate Names:

GLU PC LIS Mnemonic:

GLU PC 2HR

#### Glucose Profile, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Instructions: Drawn four times over a 24 hour period 1 hr AC & 2 hr PC breakfast 1 hr AC & 2 hr PC

LIS Mnemonic: GLU AC

GLU PC 2HR

#### Glucose Random, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: GLU R

### Glucose Tolerance Test (GDM), Plasma

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

**Doc#:** 19453

Effective Date: 2/9/2024

Page 111 of 239

Version: 164.0 Current



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

CD0002 Requisition:

Division: Clinical Chemistry - Core

For glucose tolerance testing for gestational diabetes mellitus (GDM) three specimens will be drawn: fasting, 60 minutes and 120 minutes Instructions:

after the patient has finished the 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 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

Division:

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

Glycolic Acid see Ethylene Glycol

Division: Clinical Chemistry - Toxicology

see Hemoglobin A1C

**Glycosylated Hemoglobin** 

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

Clinical Chemistry - Immunology

**Doc#:** 19453

Effective Date: 2/9/2024 Page 112 of 239

Version: 164.0 Current



#### **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

Transfer 1.0 mL serum in each of two plastic vials. Freeze immediately. Instructions:

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

Send copy of requisition.

LIS Mnemonic: GM1AB

#### **Gonadotropin Releasing Hormone** (Gn-RH)

(Do Not Confuse with GH-RH)

Two gold topped SST tubes. Tube/Specimen:

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.

LIS Mnemonic: **FGNRH** 

### GP (Surface Glycoprotein Analysis-GP IbIX and IIbIIIa)

One 4.5 mL light blue topped Sodium Citrate or one 7.0 mL yellow topped ACD tube. Tube/Specimen:

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.

Store and ship at room temperature.

LIS Mnemonic: MISC HEM

#### **GQ1B IgG Antibody**

(Do Not Confuse with GM1 Ganglioside Antibody)

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Aliquot serum and Freeze.

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

Send copy of requisition.

Stability: 21 days frozen.

LIS Mnemonic: GQ1BAB or GQ1B IgG Antibody

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 113 of 239



**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 Division: Clinical Chemistry - Core Growth Hormone Releasing Hormone (GH-RH) (Do Not Confuse with Gn-RH) Tube/Specimen: Two gold topped SST tubes. Mayo Medical Laboratories Referred Out: 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: GTT see Glucose Tolerance Test, Plasma Division: Clinical Chemistry - Core GTT2 see Glucose Tolerance Test, Plasma Division: Clinical Chemistry - Core see Helicobacter Pylori Stool Antigen H Pylori Division: Microbiology After Nov 1, 2016 Helicobacter pylori serology will no longer be performed. Stool antigen testing is the preferred testing method. If active Note: infection is suspected please submit a fresh stool in a sterile container. H63D see Hemochromatosis Division: Molecular Diagnostics Haemophilus influenza

Routine typing from sterile sites or questionable outbreaks

Tube/Specimen: Isolate, Typing

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 114 of 239

Version: 164.0 Current



Referred Out: IWK Microbiology Lab

Shipped as Biological Substances Category B Instructions:

Porter service for delivery

#### **Hantavirus Serology**

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

CD0002A/CD0002B Requisition:

Division: Microbiology-Immunology

Clinical data should be indicated on the requisition. Instructions:

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

LIS Mnemonic: RO HANTA

#### Haptoglobin

Gold Stoppered 5.0 mL SSTTube/Specimen:

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

CD0002 Requisition:

Clinical Chemistry - Core Division:

Separate plasma within 5 hours of collection. Plasma stable at 2 to 8°C for 7 days. Shipping:

Freeze and send frozen plasma, if longer.

Alternate Names: Chorionic Gonadotropin Beta-Subunit

HCG-Beta Subunit

Human Chorionic Gonadotropin

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 115 of 239

Version: 164.0 Current



LIS Mnemonic:

**HCG** 

**BHCG QUANT** 

**HCG Beta Subunit** see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

HCO3, Plasma see Bicarbonate, Plasma

Division: Clinical Chemistry - Core

**HCT** see Profile

Hematopathology - Core Division:

**HDL-Cholesterol**, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

High Density Lipoprotein Cholesterol Alternate Names:

LIS Mnemonic: HDL

**Heat Shock Protein** see F68KD

Referred Out: Mayo Medical Laboratories

see Trace Element Panels **Heavy Metal Testing** London HSC-Victoria Hospital

**Heinz Bodies** 

Referred Out:

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Core

Helicobacter Pylori Stool Antigen

Tube/Specimen: Stool in sterile container.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 116 of 239

Version: 164.0 Current



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:

#### Hem Microorganism

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

CD0002 Requisition:

He matopathology-MicroscopyDivision:

Analysis includes Thick & Thin Smear Review Comments:

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

Hematocrit see Profile

Division: Hematopathology - Core

#### Hemochromatosis

Lavender Stoppered 4.0 mL EDTA (preferred) Tube/Specimen:

> 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:

HFE.

Human Leukocyte Antigen-H DNA Probe for Hemochromatosis

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 117 of 239

Version: 164.0 Current



Genetic Testing for C282Y

C282Y H63D

LIS Mnemonic: НН

Hemoglobin see Profile

Division: Hematopathology - Routine

Hemoglobin A1C

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

CD0002 Requisition:

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 AIC

Hemoglobin and Hematocrit, Body Fluid

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

Requisition: CD0002

Division: Hematopathology - Core

**Hemoglobin Electrophoresis** 

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Immunology

Specimens must be analyzed within 7 days and stored between 2 to 8 degrees. Instructions:

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

Hemogram (i.e. Hb HCT WBC) see Profile

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 118 of 239

Version: 164.0 Current



Hematopathology - Core Division:

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

2LAVDNA LIS Mnemonic:

**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

Blood must be kept at 4°C or frozen, accompanied by requisition. Instructions:

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024 Page 119 of 239



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:

Division: Hematopathology - Coagulation

If sending frozen aliquots please double spin and clearly indicate which aliquots are plasma and which aliquots are serum. Please Instructions:

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.

Both serum and plasma specimens must be platelet poor.

Specimens anticoagulated with heparin are not suitable for testing with this assay and must not be used. Comments:

Specimens may be referred out to McMaster University HSC.

Alternate Names:

**Heparin XA** see Anti-XA

Division: Hematopathology - Coagulation

**Hepatitis A Antibody IgG** see Hepatitis A Testing

Division: Virology-Immunology

**Hepatitis A Antibody IgM** see Hepatitis A Testing

Division: Virology-Immunology

**Hepatitis A Immune Status** see Hepatitis A Testing

**Hepatitis A Testing** 

Division:

Tube/Specimen: Gold Stoppered 5.0 mL SST

Virology-Immunology

CD0002A/CD0002B Requisition:

Division: Virology-Immunology

Comments: Clinical data should be indicated on requisition. Indicate whether immunity (IgG) or recent infection (IgM) is required.

LIS Mnemonic: HEPAG (IgG)

HEPAM (IgM)

Hepatitis B Core Antibody (Total IgG and IgM)

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 120 of 239



Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

LIS Mnemonic: HBCAB

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#### **Hepatitis B Core Antibody IgM**

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

LIS Mnemonic: RO ROSER

#### Hepatitis B e Antigen and Antibody

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

LIS Mnemonic: HBE

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#### **Hepatitis B Genotyping**

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Specify test requested on the Microbiology requisition.

Clinical data must be indicated on the requisition.

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

LIS Mnemonic: RO ROSER

#### **Hepatitis B Surface Antibody**

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B Division: Virology-Immunology

Comments: Immunity, post vaccination or immunization

Alternate Name: HB Surface Ab

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 121 of 239

Version: 164.0 Current



LIS Mnemonic: HBSAB

#### Hepatitis B Surface Antigen

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: Diagnosis, for needlestick injury or prenatal screening

Alternate Name: HB Surface Ag

LIS Mnemonic: HBSAG

#### **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 Names: 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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 122 of 239

Version: 164.0 Current



**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

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 Shipping:

minutes. Ship one 2mL aliquot at 2 to 8°C if it will be received within 48 hours otherwise ship plasma frozen.

LIS Mnemonic: RO HEPCRES

**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** 

Two Gold Stoppered 5.0 mL SST tubes Tube/Specimen:

CD0002A/ CD0002B Requisition:

Division: Virology-Immunology

Alternate Names: HCV PCR

> HCV RNA HCV Viral Load

Quantitative

LIS Mnemonic: **HCVVL** 

Hepatitis D

Comment:

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

CD0002A/CD0002B Requisition:

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 123 of 239



**Hepatitis E** 

Tube/Specimen: Gold Stoppered 5.0 mL SST tube

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Clinical data should be indicated on the requisition. Instructions:

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

CD0432/CD0433 Requisition:

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)

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

Contact Referred-Out bench at 902-473-7237. Instructions:

> 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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 124 of 239

Version: 164.0 Current



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

Division: Molecular Diagnostics

Hgb A1C see Hemoglobin AIC

Division: Clinical Chemistry - Immunology

HGH see Human Growth Hormone

Clinical Chemistry - Core Division:

**High Density Lipoprotein** see HDL-Cholesterol, Plasma

Clinical Chemistry - Core Division:

**High Sensitive CRP** see C-Reactive Protein – HS (High Sensitivity), Plasma Clinical Chemistry - Core

Histamine

Division:

Tube/Specimen: Lavender topped EDTA tube.

Referred Out: Mayo Medical Laboratories

Cool immediately on ice after collection. Instructions:

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

**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.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 125 of 239

Version: 164.0 Current



LIS Mnemonic: HISA
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**Histoplasma Capsulation** see Histoplasmosis Serology

Division: Virology-Immunology

Histoplasmen see Histoplasmosis Serology

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

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 Shipping:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 126 of 239

Version: 164.0 Current



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

Requisition: CD0002A / CD0002B

Division: Virology-Immunology

Alternate Names: AIDS Test

HTLV3

Human Immunodeficiency Virus

LIS Mnemonic: HIV

**HLA-A** see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

**HLA Antibody Testing** 

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

Hematopathology - Histocompatibility (HLA) Division:

Requisition:

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

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

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

Division:

PRA

**HLA-B** see HLA Typing Autoimmune Hematopathology - Histocompatibility (HLA)

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HLA-B27 see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 127 of 239



**HLA-B5701** see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

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)

CD0004 Requisition:

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.

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

72 hours of collection.

Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Record Notes:

<u>Phlebotomist</u> 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

<u>Phlebotomist</u> 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** 

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

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

Doc#: 19453 Effective Date: 2/9/2024 Page 128 of 239

Version: 164.0 Current



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)

Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (Full name and HCN or Medical Notes:

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 DQ see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

**HLA DR** see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

**HLA Typing-Autoimmune** 

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

Requisition: CD0004

Hematopathology - Histocompatibility (HLA) Division:

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.

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

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.

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

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

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.

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 129 of 239



Specimens and requisitions must be clearly labeled with 2 unique identifiers that can be matched (full name and HCN or Medical Record Notes:

> 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

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

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

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

Requisition: CD0004

Hematopathology - Histocompatibility (HLA) Division:

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

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.

Transport blood specimens at room temperature and protect from freezing. Specimens should arrive in the HLA laboratory within 7 days of Shipping:

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

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

Division: Hematopathology - Histocompatibility (HLA)

HLA-H see Hemochromatosis

Division: Molecular Diagnostics

**HMBS** see Acute Intermittent Porphyria gene mutation

Division: Molecular Diagnostics

HMGCR Antibodies see Anti-HMGCR Antibodies

Homocysteine

Referred Out:

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

In-Common Laboratories

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 130 of 239



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

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**Homogentisic Acid** 

see Organic Acid Analysis

Referred Out: IWK Metabolic Lab

**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

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 131 of 239



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

HGH

LIS Mnemonic:

**Human Immunodeficiency Virus** see HIV-1/HIV-2

Division: Virology-Immunology

**Human Leukocyte Antigen** see HLA Tissue Typing

Division: Hematopathology - Histocompatibility (HLA)

**Human Leukocyte Antigen-H** see Hemochromatosis

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.

Molecular Diagnostics

**Hydroxybutyrate** see Beta Hydroxybutyrate

Referred Out: In-Common Laboratories

Hydroxymethylbilane Synthase Gene see Acute Intermittent Porphyria gene mutation

Hypereosinophilic Syndrome

Division:

Lavender topped EDTA tube (whole blood) or bone marrow sample. Tube/Specimen:

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 132 of 239

Version: 164.0 Current



Referred Out:	Mayo Medical Laboratories	
Instructions:	Hematopathology Molecular lab will pr	rocess sample.
LIS Mnemonic:	Misc. Hematology Referred Out	
Hypermutation		see IGHV Somatic Hypermutation
Division:	Molecular Diagnostics	
IDAT		see Type and Screen (ABO/Rh and Antibody Screen)
Division:	Transfusion Medicine	
Idiopathic Thrombocytopenia Purpura (ITP)		see Autoimmune Thrombocytopenia Purpura
Referred Out:	McMaster University HSC	
IG gene rearrangement		see B-cell lymphoid clonality
Division:	Molecular Diagnostics	
IG Heavy Chain		see B-cell lymphoid clonality
Division:	Molecular Diagnostics	
IgA		see Immunoglobulins, (GAM)
Division:	Clinical Chemistry – Core	
IgD		see Immunoglobulin D
Referred Out:	In-Common Laboratories	
IgE		see Immunoglobulin E
Division:	Clinical Chemistry - Core	
IGF-1		see Insulin Like Growth Factor
Division:	Clinical Chemistry - Core	
IgG		see Immunoglobulins, (GAM)
Division:	Clinical Chemistry - Core	

Version: 164.0 Current Effective Date: 2/9/2024 Page 133 of 239



IgG 4 Subclass

Gold topped SST tube. Tube/Specimen:

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.

IgG 4 LIS Mnemonic:

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/TCR** Gene Rearrangement

Division: Molecular Diagnostics

Alternate Names: TCR Gene Rearrangement

**IGHV** mutation status

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

**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

Any specimen referred from outside of Nova Scotia must also be accompanied by a flow cytometry report that is less than 2 weeks old.

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 134 of 239



SHM

IGHV mutation status

LIS Mnemonic: 2LAVDNA

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IgM see Immunoglobulins, (GAM)

Division: Clinical Chemistry - Core

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**IGRA** 

Tube/Specimen: Dark Green Lithium Heparin tube (BD367886)

Requisition: CD0432/CD0433

Division: Microbiology

Stability: 3 hours at room temperature, refrigerated: 48 hours.

Instructions: Collect the samples on Monday to Friday prior to the weekend to ensure that the tubes arrive when staff are available for prompt handling.

Send directly to 3<sup>rd</sup> floor Microbiology.

Initial processing will be done by the Microbiology lab-3<sup>rd</sup> floor Mackenzie. Assay testing will be performed by the Microbiology Lab-4<sup>th</sup> floor Mackenzie.

LIS Mnemonic: 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

Immune Mediated Necrotizing Myopathy see Anti-HMGCR And Statin Related Myopathy

And Statin Related Myopathy

Referred Out: In-Common Laboratories

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**Immunodeficiency Testing** 

Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin

Requisition: CD0002C

Division: Hematopathology-Flow Cytometry

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 135 of 239

Version: 164.0 Current



Specimens should arrive in the Flow Cytometry lab on the same day of collection, however, must arrive within 24 hours of collection and no Instructions:

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

#### **Immunofibrinogen (Antigen)**

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

Gold Stoppered 5.0 mL SST Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Centrifuge and aliquot within 5 hours of collection.

8 hours at room temperature, 3 days at 2 to 8°C and 6 months frozen at -20°C. Stability:

IGE LIS Mnemonic:

#### Immunoglobulins (GAM), Serum

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002 Requisition:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 136 of 239

Version: 164.0 Current



Note:

# **PLM Laboratory Test Catalogue**

LIS Mnemonic:	IMM		
Immunoglobu	llins, Heavy see Immunoglobulins (GAM)		
Division:	Clinical Chemistry - Core		
	llins, Free Light Chain		
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 Antig	globulin Test see Type and Screen (ABO/Rh and Antibody Screen)		
Division:	Transfusion Medicine		
Indirect Biliru	ıbin see Bilirubin Indirect, Plasma		
Division:	Clinical Chemistry - Core		
Infectious Mo	nonucleosis see Epstein-Barr Virus		
Division:	Microbiology-Immunology		
	V/Other Viral Respiratory Testing		
Tube/Specimen:	Nasopharyngeal swab in viral transport media, Bronch wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural flui		
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)  F FLU (lung tissue pleural fluid)		

**Inhibitor (Non Specific)** see Lupus Anticoagulant Screen

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 137 of 239

Version: 164.0 Current

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Avian influenza requests, a microbiologist must be notified. They will direct the specimen collection type and test request.



Division: Hematopathology - Coagulation

**Inhibitor** (Specific) see Factor VIII C Inhibitor

Division: Hematopathology - Coagulation

**Inorganic Phosphorous** see Phosphorous, Plasma

Clinical Chemistry - Core

INR (PT)

Division:

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

CD0002 Requisition:

Division: Hematopathology - Coagulation

Alternate Names: Prothrombin Time

Insulin

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

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

Centrifuge at room temperature. Instructions:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 138 of 239

Version: 164.0 Current



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

LIS Mnemonic: IGF-1

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#### Intact PTH see Parathyroid Hormone Intact

Division: Clinical Chemistry - Core

#### Intercellular Skin Ab

#### see Anti-Pemphigus Antibodies

Division: Immunopathology

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#### **Interferon-beta Neutralizing Antibodies**

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum. Freeze.

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

Send copy of requisition.

LIS Mnemonic: NABS

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#### **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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 139 of 239

Version: 164.0 Current



Interleukin 6 Vitreous Fluid

Tube/Specimen: 1.0 mL Vitreous Fluid collected into sterile container.

Referred Out: In-Common Laboratories

Instructions: Freeze within 30 minutes of collection.

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

Send copy of requisition.

Stability: Room temperature 30 minutes. Refrigerated unacceptable. Frozen 30 days.

LIS Mnemonic: IL6FL

Interleukin 10 Vitreous Fluid

Tube/Specimen: 1.0 mL Vitreous Fluid collected into sterile container.

Referred Out: In-Common Laboratories

Instructions: Freeze within 30 minutes of collection.

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

Send copy of requisition.

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

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**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

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

**Doc#:** 19453

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 140 of 239



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

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

Light Green Stoppered 5.0 mL PST lithium heparin tube, must be a full draw. Tube/Specimen:

Place on ice immediately after collection. Transport sample to the lab immediately.

Requisition: CD0021

Clinical Chemistry - Core Division:

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-spun specimens should be kept cold and <u>unopened</u> 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:

Iron Binding

Total Iron Binding Capacity

LIS Mnemonic: IRON/TIBC

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 141 of 239

Version: 164.0 Current



Iron Binding Capacity, Plasma see Iron, Plasma Division: Clinical Chemistry - Core 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. Referred Out: In-Common Laboratories Instructions: Send copy of requisition. LIS Mnemonic: 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 see ABO Antibody Titre **Isohemagglutinin 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

CD0002 Requisition:

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 142 of 239



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

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

see Next Generation Sequencing - Myeloid panel JAK2 exon 12

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 143 of 239



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: Polycythemia vera

Thrombocythemia JAK2 (v6 7f)

LIS Mnemonic: 2LAVDNA

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Jo-1 see Anti-nuclear antibody

Division: Immunopathology

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Joint Fluid see Synovial Analysis

Division: Hematopathology - Core

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K+ see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

Keppra see Levetiracetam

Keppia See Leveth acetan

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

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KIT Asp816Val see Next Generation Sequencing-Myeloid Panel

Kleihauer-Betke

Division:

Tube/Specimen: Lavender topped EDTA tube. Not performed on Males.

Molecular Diagnostics

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 144 of 239

Version: 164.0 Current



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

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KRAS see Next Generation Sequencing – Solid Tumor panel

Division: Molecular Diagnostics

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LA see Extractable-Nuclear Antibodies

Division: Immunopathology

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Lactate Dehydrogenase see LD, Serum

Division: Clinical Chemistry – Core

Lactate, Plasma

Tube/Specimen: Grey topped Sodium Fluoride tube, completely filled and kept on ice.

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: 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

Shipping: Separate plasma immediately and no longer than <u>60 minutes</u> from collection.

Plasma aliquot is stable for 8 hours at 15 to 25°C or 14 days at 4 to 8°C.

Alternate Names: Lactic Acid

LIS Mnemonic: VLACT

Lactate, Spinal Fluid (CSF)

Tube/Specimen: Sterile plastic screw-top tubes; send immediately to laboratory receiving area within 30 minutes of collection.

Requisition: QE 7850\_12\_05

Division: Clinical Chemistry - Core

Comments: Specimen volume required: 0.5 mL; 0.1 mL for pediatric population.

Shipping/Referral: Centrifuge promptly and freeze supernatant; sample is stable for 24 hours refrigerated and 2 months frozen.

Alternate Names: Lactic Acid

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 145 of 239

Version: 164.0 Current



LIS Mnemonic: CSF Lact Lvl

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Lactic Acid see Lactate, Plasma and Lactate, Spinal Fluid (CSF)

Division: Clinical Chemistry - Core

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Lactic Dehydrogenase see LD, Serum

Division: Clinical Chemistry - Core

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Lamictal see Lamotrigine

Division: Clinical Chemistry - Toxicology

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Lamotrigine

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

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

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Latex Fixation see Rheumatoid Factor

Division: Clinical Chemistry - Core

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LAV see HIV-1/HIV-2

Division: Virology-Immunology

LCMV (Lymphocytic Choriomeningitis Virus)

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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 146 of 239

Version: 164.0 Current



LD, Fluids

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Lactate Dehydrogenase

LDH

LIS Mnemonic: BF LD

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LD, Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: 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.

Alternate Names: Lactate Dehydrogenase

LDH

LIS Mnemonic: LD

LDH see LD, Serum

Division: Clinical Chemistry - Core

LDL-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, LDL

Low Density Lipoprotein Cholesterol

LIS Mnemonic: LDL D

LEAD, Whole Blood

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

Referred Out: In-Common Laboratories

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 147 of 239

Version: 164.0 Current



Do Not Centrifuge! Instructions:

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  $8^{\circ}$  C or frozen.

LIS Mnemonic: Lead only

Lead Level RO

Legionella

Tube/Specimen: Urine collected in dry sterile container

CD0432/CD0433 Requisition:

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 Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

LIS Mnemonic: RO ROSER

Leptospirosis Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B Division: Virology-Immunology

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 148 of 239

Version: 164.0 Current



Clinical data should be indicated on the requisition. Instructions:

LIS Mnemonic: RO ROSER

#### Leukemia and Lymphoma Screening – Bone Marrow

Dark green stoppered 7.0 mL Lithium Heparin Tube/Specimen:

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

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### 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, cytopathology, 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.

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

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 amount of RPMI added to the fluid must be indicated on the requisition form. The requisition must accompany the specimen to the Flow

laboratory.

Requisition: CD0002C

Division: Hematopathology-Flow Cytometry

Specimens collected at the QEII VG site are to be delivered by STAT porter immediately after collection directly to the Flow Cytometry Instructions:

laboratory (Room 216 Mackenzie Building). Please call the Flow Cytometry lab (902-473-5549) as well to notify that a specimen is on the

way. Specimens should be received within 30 minutes or less after collection and in the laboratory no later than 14:00 to ensure

processing/optimal results. For urgent specimens collected after hours and on the weekend please contact the "Lymph Node Pathologist On-

Call" through the operator / locating to facilitate the processing of the specimen.

Specimens collected outside the QEII VG Site must be delivered to the lab as soon as possible to ensure optimal testing. Specimens should arrive no later than 24 hours after collection and be received in the laboratory no later than 14:00. The requisition and slides should

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 149 of 239



accompany the specimen and the tissue type indicated on the requisition. A copy of the CBC results and differential should be sent if

available.

Note: Please notify Flow Cytometry Laboratory (902-473-5549) in advance when requesting this test. Provide patient name, health card

number and referral hospital contact information.

Specimens from outside hospitals may be shipped at room temperature. If the specimen is not shipped on the same day of collection it should Shipping:

be refrigerated at 2 to 8° Celsius. Please note that the specimen should already be placed in RPMI solution.

LIS Mnemonic: CELL SM

#### Leukemia and Lymphoma Screening - Peripheral Blood

Dark green stoppered 7.0 mL Lithium Heparin and Lavender stoppered 4.0 mL EDTA for CBC and Auto Differential Tube/Specimen:

CD0002C Requisition:

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.

An unstained peripheral blood slide, copy of the CBC results with differential, patient diagnosis and requisition must accompany all

specimens collected outside of 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

#### Levetiracetam

Tube/Specimen: Plain red topped tube collected prior to next dose.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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: LEVET

LH

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Alternate Names: Luteinizing Hormone

Pituitary Gonadotropins

LIS Mnemonic: LH

**Doc#:** 19453

Version: 164.0 Current Section: Management System\PLM\General\PLM Website\General\Test Catalogue\

> Effective Date: 2/9/2024 Page 150 of 239

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



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

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Lipid Profile see Cholesterol, Plasma

Division: Clinical Chemistry - Core

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Lipid Screen see Cholesterol, Plasma

Division: Clinical Chemistry - Core

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Lipid Testing see Cholesterol, Plasma

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.

Referred Out: In-Common Laboratories

Instructions: Centrifuge and aliquot 1.0 mL serum into plastic vial.

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

Send copy of requisition.

Molecular Diagnostics

Stability: Room temperature 24 hours, refrigerated at 2 to 8°C for 7 days and frozen for 6 months.

LIS Mnemonic: LPA

Liquid biopsy see Circulating Tumor DNA

Lithium

Division:

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: LI

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 151 of 239

Version: 164.0 Current



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

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**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

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Long Chain Fatty Acid see Very Long Chain Fatty Acid

Referred Out: In-Common Laboratories

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Low Density Lipoprotein see LDL-Cholesterol, Plasma

Division: Clinical Chemistry – Core

Molecular Diagnostics

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Ludiomil see Maprotiline Level

Referred Out: In-Common Laboratories

Lung Molecular Panel see Next Generation Sequencing – Solid Tumor panel

**Lupus Anticoagulant Screen** 

Division:

Tube/Specimen: Light Blue Stoppered 2.7 mL buffered sodium citrate x 2 tubes. Tubes must be a full draw.

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

Version: 164.0 Current

Doc#: 19453

Effective Date: 2/9/2024

Page 152 of 239



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)

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Luteinizing Hormone

e 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

Division: Molecular Diagnostics

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**Lysosomal Acid Lipase Activity** 

 $\label{thm:condition} \mbox{Tube/Specimen:} \qquad \mbox{One 4.0 mL Lavender topped EDTA tube. Whole Blood - \textbf{Do Not Centrifuge}.}$ 

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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 153 of 239



Lytes, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

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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

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MAG see Myelin Associated Glycoprotein Antibody

Referred Out: In-Common Laboratories

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Magnesium, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry – Core

LIS Mnemonic: MG

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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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from a 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. It is not acceptable to add preservative to an aliquot.

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

LIS Mnemonic: U24 Mg

U Mg

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**Malarial Parasites** 

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 154 of 239

Version: 164.0 Current



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.

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#### 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

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#### 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

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

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 tubes (BD368380) and lavender topped EDTA plasma tubes are acceptable; indicate sample type on

tube.

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

Doc#: 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 155 of 239



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

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#### **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)

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#### **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

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## Melanoma Associated Retinopathy Panel see Anti-Retinal Autoantibody

(MARP)

Referred Out: Mayo Medical Laboratories

#### Mellaril see Thioridazine Level

Referred Out: In-Common Laboratories

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#### Mercury

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

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 156 of 239

Version: 164.0 Current



Referred Out: In-Common Laboratories

Instructions Do Not Centrifuge; cannot be tested on plasma.

Do Not Freeze. Ship refrigerated.

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

Send copy of requisition.

LIS Mnemonic: Mercury

#### Mercury Level, Random Urine or 24-Hour Urine

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

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.

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.

Send copy of requisition.

Stability: 2 to 8°C 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:

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 157 of 239



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Met HB see Methemoglobin

Division: Clinical Chemistry - Core

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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

ISOPROPANOL 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.

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

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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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 158 of 239

Version: 164.0 Current



Division:

### **PLM Laboratory Test Catalogue**

LIS Mnemonic:	MTX

Methyl Alcohol see Methanol

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

Microfilaria see Hem Microorganism

Division: Hematopathology-Microscopy

Microglobulin, Beta 2, Urine see Beta 2 Microglobulin, Urine

Referred Out: In-Common Laboratories

**Microsatellite Instability Testing** see MSI

Division: Molecular Diagnostics

see Anti-Thyroid Peroxidase Antibodies **Microsomal Antibodies** 

Division: Clinical Chemistry - Core

Mitotane

Tube/Specimen: Plain Red tube.

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 159 of 239

Version: 164.0 Current



Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into plastic vial.

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

Send copy of requisition.

Stability: 7 days at 2 to 8°C; 6 months frozen.

LIS Mnemonic: MITOTANE

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Mix (50-50) see PT 50% Mix or PTT 50% Mix

Division: Hematopathology - Coagulation

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MLPA see CLL MLPA

Division: Molecular Diagnostics

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MMF see Mycophenolate

Division: Clinical Chemistry - Toxicology

Mofetil see Mycophenolate

Division: Clinical Chemistry - Toxicology

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Molecular Testing for IWK see IWK Molecular Testing

Referred Out: IWK Molecular Laboratory

Division:

**Doc#:** 19453

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Mono see Epstein-Barr Virus

Division: Microbiology-Immunology

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Monosialoganglioside GM1 (IgM) see GM1 Ganglioside Antibody

Referred Out: In-Common Laboratories

Monospot see Epstein-Barr Virus

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MPA see Mycophenolate

Division: Clinical Chemistry - Toxicology

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

Microbiology-Immunology

**Effective Date:** 2/9/2024 Page 160 of 239

Version: 164.0 Current



**MPL** see Next Generation Sequencing - Myeloid panel

Molecular Diagnostics Division:

MPL exon 10 mutation

see Next Generation Sequencing – Myeloid panel

Division: Molecular Diagnostics

**Mpox Virus PCR** 

Tube/Specimen: Swab collected in UTM, aspirate, tissue

Requisition: CD0432/CD0433

Division: Virology-Immunology

Specimens are stable at 2 to 8°C for 3 days. If longer freeze and ship frozen. Shipping:

LIS Mnemonic: E MKPX

MSI

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: Microsatellite instability testing

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

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: Methylenetetrahydrofolate reductase

LIS Mnemonic: MTHFR GENE

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 161 of 239



#### 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

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**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

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Mumps PCR

Tube/Specimen: Urine collected in dry sterile container and buccal 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 MPS

**Muscle Autoimmune Myositis Panel** 

see Autoimmune Myopathy/Myositis Profile

see Next Generation Sequencing-Myeloid Panel

Referred Out: In-Common Laboratories

Mutation analysis of BCR-abl transcripts (BCR-ABL Mutation,

Molecular Diagnostics

ABL Kinase domain mutation)

**MYC FISH** 

Division:

Tube/Specimen: Tissue in paraffin block

Requisition: CD2573

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 162 of 239

Version: 164.0 Current



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

Isolate or Mgit Suspension, Identification, M. leprae testing request (skin scraping slides and or tissues on slide or block) Tube/Specimen:

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

NHDP Referred Out:

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

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

Primarily shipped as Biological Substances category B. If classified as Category A, appropriate handling occurs. Instructions:

Specimens are shipped mainly for identification, confirmation of identification or may involve susceptibility.

Mycophenolate

Lavender Stoppered 4.0 mL EDTA Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

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

Doc#: 19453

Effective Date: 2/9/2024 Page 163 of 239

Version: 164.0 Current



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.

MPA Alternate Names:

MMF CellCept Mofetil

LIS Mnemonic: MYCO

#### Mycoplasma genitalium

Tube/Specimen: Aptima Multitest swab, urine collected in dry sterile container.

CD0432/CD0433 Requisition:

Division: Virology-Immunology

Swabs are stable at 2 to  $30^{\circ}$ C for 60 days, urine is stable at 2 to  $30^{\circ}$ C for 24 hours. Shipping:

LIS Mnemonic: MYGEN

#### Mycoplasma PCR

Tube/Specimen: Amies swab, Throat (specimen of choice) or Nasopharyngeal swab

CD0432/CD0433 Requisition:

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

## 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 °C for 7 days and frozen >6 months.

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 164 of 239



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:

Referred Out:

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.

MYELOMA SCREEN LIS Mnemonic:

Mysoline see Primidone Level

Referred Out: In-Common Laboratories

N-Acetylprocainamide see Procainamide/NAPA Level

N-Methylhistamine, 24-Hour Urine

24-hour urine collection in a plain container. Preservative 6M Hydrochloric Acid or Sodium Carbonate is acceptable. Refrigerate during Tube/Specimen:

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.

In-Common Laboratories

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 165 of 239

Version: 164.0 Current



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.

Virology-Immunology

Requisition: CD0002A/CD0002B

Instructions: This assay includes HIV, HCV and HBV qualitative tests and is only available for live organ donors or tissue bank donors. All others will be

rejected.

Tissue bank specimens from Nova Scotia or New Brunswick and live donor specimens from New Brunswick are sent to Micro MPA for

accessioning.

Only live donors from Nova Scotia will be accessioned in CSA.

Send whole blood to 4<sup>th</sup> floor Microbiology for processing. Send copy of requisition.

LIS Mnemonic: NAAT

Division:

# NABS see Interferon beta Neutralizing Antibodies

Referred Out: In-Common Laboratories

#### Nasopharyngeal aspirate for Bordetella pertussis (Culture or PCR)

Tube/Specimen: Nasopharyngeal aspirate
Referred Out: IWK Microbiology Lab

Instructions: Shipped as Biological Substances B.

#### 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

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Neoral see Cyclosporine

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

**Doc#:** 19453

**Version:** 164.0 Current **Effective Date:** 2/9/2024 Page 166 of 239



Division: Clinical Chemistry - Toxicology

Neuromyelitis Optica (NMO\_IgG), CSF

Minimum 1.0 mL CSF. Tube/Specimen:

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.

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

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 °C for 7 days and frozen >6 months.

LIS Mnemonic: NMO

see Gabapentin Level Neurontin

Referred Out: In-Common Laboratories

see Dihydrohodamine (DHR)

**Neutrophil Oxidative Burst** 

Referred Out:

Next Generation Sequencing - Myeloid Panel

Mayo Medical Laboratories

4.0 mL EDTA Lavender stoppered tube Tube/Specimen:

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.

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 167 of 239



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

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Niacin see Vitamin B3

Referred Out: In-Common Laboratories

Nicotinic Acetylcholine Receptor Antibody see Acetylcholine Receptor Antibodies

Referred Out: In-Common Laboratories

#### 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.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 168 of 239

Version: 164.0 Current



LIS Mnemonic:

NMDA

NMDA CSF

Noradrenaline see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

Nordoxepin see Doxepin Level

Referred Out: In-Common Laboratories

Norepinephrine see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

see Catecholamines, Urine Norepinephrine, Urine

Division: Clinical Chemistry - Toxicology

see Fluoxetine Level Norfluoxetine

Referred Out:

**Norovirus PCR** 

Tube/Specimen: Stool collected in dry sterile container.

In-Common Laboratories

Requisition: CD0432/CD0433

Division: Virology-Immunology

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:

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)

CD0002A or CD0002B Requisition: Division: Clinical Chemistry - Core

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 169 of 239

Version: 164.0 Current



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

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-Comments:

ProBNP (or BNP)" is written on the requisition form.

Alternate Names: N-terminal B-Type natriuretic peptide (BNP)

LIS Mnemonic: BNP

NT-BNP

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

Division: Immunopathology

#### Occult Blood, Stool

Tube/Specimen: Random stool collection

CD0002 Requisition:

Clinical Chemistry - Core Division:

Amount Required: Smear of stool on hemoccult card Instructions:

Specimen is smeared on hemoccult card by patient or nursing staff. Specimens in other containers will not be accepted. Patients should Comments:

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.

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 170 of 239



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.

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

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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.

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

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

**Effective Date:** 2/9/2024 Page 171 of 239

Version: 164.0 Current



LIS Mnemonic: OSTEO

Ovarian Cancer Antigen see CA125

Division: Clinical Chemistry - Core

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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

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Oxygen Saturation see Blood Gases

Division: Clinical Chemistry - Core

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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.

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

Doc#: 19453 Effective Date: 2/9/2024

Page 172 of 239

Version: 164.0 Current



LIS Mnemonic: HPP

#### Paraneoplastic Antibodies, CSF (Includes anti Ri, Yo, Hu)

Minimum 2.0 mL CSF Tube/Specimen:

Referred Out: In-Common Laboratories

Aliquot at least 2.0 mL CSF into plastic vial. Freeze at once. Instructions:

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

Send copy of requisition.

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

PNP CSF LIS Mnemonic:

#### 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 °C 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

EIA for Giardia/Cryptosporidium is done unless there is a history indicated on the requisition of travel, immigration, Comments:

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)

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 173 of 239



#### **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

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#### Parathyroid Hormone Related Peptide Parathyroid Hormone Related Protein

see PTH Related Peptide

Referred Out: In-Common Laboratories

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#### **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

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 174 of 239

Version: 164.0 Current



Division:

### **PLM Laboratory Test Catalogue**

see PTT

**Partial Thromboplastin Time** 

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.

Indicate on the requisition if immunity (IgG) or recent infection (IgM) is required. Instructions:

LIS Mnemonic: PARVG (IgG Immunity)

PARVM (IgM Diagnosis)

Parvovirus PCR

Referred Out:

Tube/Specimen: One Lavender stoppered 4.0 mL EDTA tube

CD0002A/CD0002B Requisition:

Division: Microbiology-Immunology

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 Shipping:

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 In-Common Laboratories

**PBG Deaminase** see Porphobilinogen Deaminase

Referred Out: In-Common Laboratories

PCP (Pneumocystis jirovecii) PCR

Tube/Specimen: BAL, bronchial wash, induced sputum, bronchial brush, tissue

Requisition: CD0432/CD0433

Division: Virology-Immunology/Bacteriology

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 175 of 239

Version: 164.0 Current



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

Division: Immunopathology

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**Peripheral Smear** 

Division: Hematopathology - Microscopy

Comments: Can be done with Profile

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PFA see Platelet Function Assay

Division: Hematopathology - Coagulation

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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.

LIS Mnemonic: BF PH

pH, Urine

see Urinalysis (including microscopic examination if required)

Division: Clinical Chemistry - Core

Comments: Urine pH is available by dipstick analysis as part of routine urinalysis.

Phenobarbital

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 176 of 239

Version: 164.0 Current



These determinations can be done on micro samples. Send at least 0.5 mL of serum for each. Instructions:

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).

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)

Plain red topped tube. Physician's order MUST state "Free" or "HPLC". Tube/Specimen:

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.

Molecular Diagnostics

Stability: One month refrigerated or 6 months frozen. Specimen may be re-frozen once.

LIS Mnemonic: **FRDIL** 

Division:

see BCR/abl Translocation (RT PCR)

Philadelphia Chromosome

Phosphatase, Alkaline see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

**Phosphate** see Phosphorous, Plasma

Clinical Chemistry - Core Division:

**Phosphorous Inorganic** see Phosphorous, Plasma

Division: Clinical Chemistry - Core

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 177 of 239

Version: 164.0 Current



Phosphorous, Plasma

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

CD0002 Requisition:

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

Referred Out: Mayo Medical Laboratories

**Pituitary Gonadotropins** see LH

Division: Clinical Chemistry - Core

Plasma Hemoglobin

Tube/Specimen: Dark green stoppered lithium heparin tube

Requisition: CD0002

Division: Hematopathology - Core

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 178 of 239

Version: 164.0 Current



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** 

CD0002 Requisition:

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

Division: Hematopathology - Core

Platelet Function Assay

Three light-blue stoppered plastic 2.7 mL Sodium Citrate tubes. Collection must follow a Tube/Specimen:

non-additive tube. Collect a lavender stoppered EDTA tube and order a CBC. Keep specimens at room temperature.

Division: Hematopathology - Coagulation

Samples must be received within three (3) hours of collection. Traumatic draws should be avoided. Instructions:

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 179 of 239



Alternate Names: PFA

Platelet Function Studies see Platelet Aggregation

Division: Hematopathology - Coagulation

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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  $4^{\circ}$ C, or frozen on dry ice. Stability – 12 hours in saline at  $4^{\circ}$ 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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 180 of 239



**PNH** see Paroxysmal Nocturnal Hemoglobinuria Hematopathology - Flow Cytometry Division: **PNP Antibodies** see Paraneoplastic Antibodies, Serum and Paraneoplastic Antibodies, CSF PNP Antibodies, CSF Referred Out: In-Common Laboratories PO4 see Phosphorus, Plasma Division: Clinical Chemistry - Core Polycythemia Vera see Jak2 gene mutation Division: Molecular Diagnostics Polvoma PCR One lavender stoppered 4.0 mL EDTA tube Tube/Specimen: Requisition: CD0002A/CD0002B Division: Microbiology-Immunology 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 Shipping: minutes and ship one 2 mL aliquot at 2 to 8°C. LIS Mnemonic: POLY Polysaccharide Screen see Mucopolysaccharide Screen Referred Out: In-Common Laboratories Porphobilinogen Deaminase (ALA Dehydratase, Uro-1-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 accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition. LIS Mnemonic: **PBGD** Porphyrins, Blood see Porphyrin Screen, Plasma

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

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

**Effective Date:** 2/9/2024 Page 181 of 239

Version: 164.0 Current



Referred Out: In-Common Laboratories

## 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.

Referred Out: In-Common Laboratories

Specimen required: 20 mL aliquot of well-mixed urine covered in foil to protect from light. Instructions:

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** 

PBG

#### Porphyrin Screen, 24-Hour Urine

24-hour urine collection in container with 5g Sodium Carbonate Tube/Specimen:

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

Foil-covered Lavender topped EDTA tube. Tube/Specimen:

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

Send copy of requisition.

Stability: Frozen: 2 months

LIS Mnemonic: MISC REF

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 182 of 239



Porphyrin Screen, Fecal

Tube/Specimen: 50g stool in a sterile container.

Protect from light!

Referred Out: In-Common Laboratories

Instructions:

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

Send copy of requisition.

Molecular Diagnostics

ST Porph LIS Mnemonic:

**Post-BMT** see Chimerism Analysis for BMT

Division: Molecular Diagnostics

**Post-BMT recipient** see Chimerism Analysis for BMT

**Post Transfusion Purpura** 

Division:

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. Tube/Specimen:

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

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF K

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Potassium, Plasma see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

Potassium, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 183 of 239

Version: 164.0 Current



#### Potassium, 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

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.

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

LIS Mnemonic: U24 K

UK

#### **PRA** see HLA Antibody Screening

Division: Hematopathology - Histocompatibility (HLA)

#### PRA/LAS

### (Islet Transplant Program ONLY)

Tube/Specimen: Two 5.0 mL Red topped tubes.

Referred Out: University of Alberta

Instructions: Do Not Accession.

Centrifuge 15 minutes at 3000 rpm.

Aliquot all serum into plastic transport tube. Label with patient's full name, HCN and date and time of collection.

Freeze at -20°C or lower (-70°C is preferred).

#### PRAD1 see BCL1-IGH gene fusion

Division: Molecular Diagnostics

#### Prealbumin, Serum

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: **PREALB** 

**Doc#:** 19453

# Pre-BMT donor

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

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

Version: 164.0 Current Effective Date: 2/9/2024

Page 184 of 239



**Pre-BMT** recipient

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

**Pregnancy, Urine** Qualitative urine HCG (urine pregnancy) testing will no longer be offered as of Feb 4, 2019

Prekallikrein see Fletcher Factor

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

Procainamide/NAPA Levels

Plain Red topped tube. Tube/Specimen:

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 Stoppered 4.0 mL EDTA

CD0002 Requisition:

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 185 of 239



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 Auto Diff CBC WAM Profile Auto Diff Profile, P

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

Lavender Stoppered 4.0 mL EDTA and Light Blue Stoppered plastic 2.7 mL Sodium Citrate tubes; must be a full draw. Tube/Specimen:

Requisition: CD0002 - write 'Citrate for Platelet' under 'Other tests'

Division: Hematopathology - Core

DO NOT CENTRIFUGE Instructions:

Testing includes automated differential, WBC count, RBC count, hematocrit (HCT), hemoglobin (HB), and platelet count (result from Citrate, Comments:

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**

Lavender Stoppered 4.0 mL EDTA Tube/Specimen:

Requisition:

Division: Hematopathology - Microscopy

Testing includes CBC. Comments:

LIS Mnemonic:

### Profile, No Diff

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

CD0002 Requisition:

Division: Hematopathology - Core

\*Request available for Nova Scotia Health Central Zone Inpatient Services and Clinics only\* Comments:

Testing includes Hematocrit (HCT), Hemoglobin (HB), Platelet Count, Red Cell Count and WBC.

LIS Mnemonic: CBCND, CBC No Auto Diff, Profile No Diff, PND

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 186 of 239

Version: 164.0 Current



**Progesterone** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: This test must not be confused with 17-Hydroxyprogesterone.

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 Shipping:

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** 

**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

Centrifuge at 4°C. Instructions:

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

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

PROL LIS Mnemonic:

**Prostatic Specific Antigen** 

see PSA

Division: Clinical Chemistry - Core

**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

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

vials (12x75).

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 187 of 239



**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).

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**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.

Alternate Names: TP

LIS Mnemonic: CSF TP

BF TP

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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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 188 of 239

Version: 164.0 Current



**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

LIS Mnemonic: 2LAVDNA

Prothrombin Time see INR (PT)

Division: Hematopathology - Core

# Protoporphyrin, Erythrocyte/Free

(Do Not Confuse with Zinc Protoporphyrins)

Tube/Specimen: <u>Two</u> Lavender topped EDTA tubes. **Protect from light!** 

Referred Out: In-Common Laboratories

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

Doc#: 19453 Effective Date: 2/9/2024

Page 189 of 239

Version: 164.0 Current



Instructions: **Do Not Centrifuge!** 

Send one lavender topped tube to Hematopathology – Core lab for CBC; Hematocrit result required.

Refrigerate.

Send copy of requisition.

Stability: Whole blood refrigerated -2 weeks; frozen -2 months.

LIS Mnemonic: MISC REF & CBC

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#### **Protriptyline 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: PROTR

#### **Proviral HIV DNA V3 Genotyping**

Tube/Specimen: 4.0 mL Lavender topped EDTA tube.

Referred Out: BC Centre for Excellence

Requisition: Laboratory Requisition Form for NON-B.C. Patients Only

Shipping: Whole blood may be transported at 2 to 25°C to be received within 24 hours. **Do not centrifuge specimen!** 

LIS Mnemonic: RO HIVPROVIRAL

#### Prozac see Fluoxetine Level

Referred Out: In-Common Laboratories

**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

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 190 of 239

Version: 164.0 Current



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

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Pseudocholinesterase see Acetylcholinesterase, Plasma

Division: Clinical Chemistry – Core

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Pseudocholinesterase Phenotyping see Cholinesterase Phenotyping

Referred Out: In-Common Laboratories

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PT see INR (PT)

Division: Hematopathology - Core

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PT 20210 mutation see Prothrombin Gene Mutation

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**PT 50% Mix** 

Division:

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

Requisition: CD0002

Division: Hematopathology - Coagulation

Molecular Diagnostics

Instructions: This test is done only when the INR (PT) is abnormal.

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PTH Intact see Parathyroid Hormone Intact

Division: Clinical Chemistry - Core

**PTH Related Peptide** 

Tube/Specimen: Green topped <u>Sodium</u> Heparin tube, BD#366480. Lithium Heparin tubes are <u>NOT</u> acceptable.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 191 of 239

Version: 164.0 Current



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** 

#### **PTP Antibody Testing**

#### see Post Transfusion Purpura

Referred Out: McMaster University HSC

PTT

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

CD0002 Requisition:

Division: Hematopathology - Core

Instructions: Indicate on requisition if patient is on any anticoagulants.

Alternate Names: Partial Thromboplastin Time

#### PTT 50% Mix

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

CD0002 Requisition:

Division: Hematopathology - Coagulation

Instructions: This test is done only when the PTT is abnormal.

PTT Dade

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

CD0002 Requisition:

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** Pyridoxic Acid **Pyridoxine** 

see Vitamin B6 Level

Referred Out: In-Common Laboratories

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 192 of 239



**Pvruvate** 

(Do Not Confuse with Pyruvate Kinase)

Collectors MUST call Clinical Chemistry (VG 473-4340; HI 473-4843) for instructions prior to collection. Tube/Specimen:

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

Clinical Chemistry must make a filtrate from the sample before sending it to the Referred-out bench; untreated samples are not suitable for Instructions:

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

Gold Stoppered 5.0 mL SST Tube/Specimen:

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Comments: This test will be referred out be the laboratory.

Alternate Names: Coxiella Burnetii RO QFEVER LIS Mnemonic:

**QBCRA – Mutation Analysis** 

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

QuantiFERON®-TB Gold

see IGRA

Referred Out: St. John Regional Hospital

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

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 193 of 239

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Uncontrolled When Printed



Division:

## **PLM Laboratory Test Catalogue**

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#### see BCR-ABL gene fusion

Quinidine Level

Tube/Specimen: Plain Red topped tube.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into a plastic vial.

Send copy of requisition.

Molecular Diagnostics

Stability: Room temperature 14 days, Refrigerated 14 days, Frozen 28 days

LIS Mnemonic: Quinid

RA Titre see Rheumatoid Factor

Division: Clinical Chemistry - Core

**Rabies Immunity** 

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Clinical data should be indicated on the requisition. Instructions:

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

LIS Mnemonic: RO RABIES

see Sirolimus Rapamycin

Division: Clinical Chemistry - Toxicology

RAR alpha see PML-RAR gene fusion

Division: Molecular Diagnostics

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see PML - RAR gene fusion RARa

Division: Molecular Diagnostics

**RAST Tests (Allergy Testing)** 

Tube/Specimen: Gold topped SST tube. A copy of the RAST requisition MUST accompany the specimen.

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

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 194 of 239



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

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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 <u>20 minutes</u>.

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

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Red Blood Cell Folate see Folate, Red Cell

Division: Clinical Chemistry - Core

\_\_\_\_\_

Red Cell Count see Profile

Hematopathology - Core

Clinical Chemistry - Core

Red Cell Folate see Folate Red Cell

Red Cell Survival

Division:

Division:

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

**Doc#:** 19453 **Effective Date:** 2/9/2024

Page 195 of 239

Version: 164.0 Current



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!

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

Send copy of requisition.

Note: Specimens from timed collections (24, 48, and 72 hour) or formed stool are <u>not acceptable</u>.

Stability: Frozen – 7 days

LIS Mnemonic: ST Reduce

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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

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**Reticulocyte Count** 

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Core

Comments: Profile must be ordered with test.

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Retinoic Acid Receptor see PML-RAR gene fusion

Division: Molecular Diagnostics

Retinoic Acid Receptor Alpha see PML – RAR gene fusion

Division: Molecular Diagnostics

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Retinol see Vitamin A

Referred Out: In-Common Laboratories

**Doc#:** 19453

\_\_\_\_\_

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

Version: 164.0 Current Effective Date: 2/9/2024 Page 196 of 239



### 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:

#### **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.

RF Quantitative Alternate Names:

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

Division: Microbiology-Immunology

Clinical data should be indicated on the requisition. Indicate specific test request (spotted fever or typhus group). Instructions:

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

LIS Mnemonic: RO ROSER

Rivotril see Clonazepam

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 197 of 239

Version: 164.0 Current



Referred Out:	In-Common	Laboratories
Keleneu Out.	III-Common	Laboratories

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RNP see Anti-Nuclear Antibody (ANA)

Division: Immunopathology

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RO see Anti-Nuclear Antibody (ANA)

Division: Immunopathology

**ROS1 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.

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**Rotavirus PCR** 

Tube/Specimen: Stool collected in dry sterile container

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: Assay tests for Norovirus 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

Routine typing of Haemophilus influenza (From sterile sites or questionable outbreaks)

Tube/Specimen: Isolate, typing

Referred Out: IWK

Instructions: Porter service for delivery.

Shipped as Category B.

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RPR see Syphilis Serology

Division: Virology-Immunology

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RST see Syphilis Serology

Division: Virology-Immunology

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

**Doc#:** 19453

**Effective Date:** 2/9/2024

Version: 164.0 Current

Page 198 of 239



Rubella

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: RUBG (IgG)

RUBM (IgM)

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Rubeola see Measles Antibody

Division: Virology-Immunology

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Saccharomyces cer. Antibodies

S. cerevisiae Antibodies

Tube/Specimen: Gold topped SST tube.

Referred Out: In-Common Laboratories

Instructions Centrifuge at room temperature.

Aliquot at least 1.0 mL serum and refrigerate.

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

Send copy of requisition.

Stability: Refrigerated – 1 week.

LIS Mnemonic: ASCA

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**Salicylates** 

Division:

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: SAL

see Cyclosporine

Sandimmune IV

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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 199 of 239

Version: 164.0 Current



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

Clinical data should be indicated on the requisition. Refer to "Microbiology User's Manual" for collection procedures. Instructions:

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** 

Royal Blue topped Trace Element K2 EDTA tube (BD368381). Tube/Specimen:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 200 of 239



Serotonin Level

Gold topped SST tube. Tube/Specimen:

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

Division: Clinical Chemistry - Core

Sex Hormone Binding Globulin

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

SHBG LEVEL LIS Mnemonic:

**Sezary Cells** 

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 201 of 239



Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology – Microscopy

Comments: Analysis must include a CBC, Auto Differential, and Manual Differential.

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SGOT, Plasma see Aspartate Aminotransferase (AST), Plasma

Division: Clinical Chemistry - Core

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SGPT, Plasma see Alanine Aminotransferase (ALT), Plasma

Division: Clinical Chemistry - Core

SHM see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

**Short Tandem Repeats** (STR)

see Chimerism Analysis for BMT

(BIK)

Division: Molecular Diagnostics

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Sickle Cell Screen

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

Requisition: CD0002

Division: Hematopathology - Core

\_\_\_\_\_

Sinequan see Doxepin Level

Sirolimus

Referred Out:

Tube/Specimen: Lavender Stoppered 4.0 mL EDTA

In-Common Laboratories

Requisition: CD0002

**Doc#:** 19453

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

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

**Version:** 164.0 Current **Effective Date:** 2/9/2024

Page 202 of 239



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.

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.

LIS Mnemonic: U24 NA

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 203 of 239

Version: 164.0 Current



U NA

#### Somatic BRCA mutation in ovarian tumor

Tube/Specimen: Tissue in paraffin block

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Alternate names: BRCA 1/2 in ovarian cancer

LIS mnemonic: 2LAVDNA

#### **Somatic hypermutation**

#### see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

#### Somatomedin-C

#### see Insulin Like Growth Factor-1

Division: Clinical Chemistry - Core

#### Specific Gravity, Fluid

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF SG

#### Specific Gravity, Random Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination in a plain container.

CD0002 Requisition:

Division: Clinical Chemistry - Core

Specimen required: 4 mL urine aliquot from well-mixed collection Instructions:

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

LIS Mnemonic: U SG

**Spinal Fluid** 

#### Division: Hematopathology - Core

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 204 of 239

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

see specific test for instructions.



Spinal Fluid L	actate	see Lactate, Spinal Fluid
Referred Out:	In-Common Laboratories	
SSA		see Anti-Nuclear Antibody (ANA)
Division:	Immunopathology	
SSB/LA		see Anti-Nuclear AB (ANA)
Division:	Immunopathology	
ST OB		see Occult Blood, Stool
Division:	Clinical Chemistry - Core	
		, Apheresis Product and BM Harvest
Tube/Specimen:	Lavender Stoppered 4.0 mL EDTA	
Requisition:	CD0002C	
Division:	Hematopathology - HLA	
Instructions:	The HLA laboratory (902-473-7841 The volume of product collected is	in 30 minutes or less after collection to ensure optimal results.  1) should be notified in advance when requesting this test. required on the requisition (exception; Peripheral Blood). Is arriving after 16:00 hours are to be stored at 4°C overnight and will be tested the following day. The especimen to the Flow laboratory.
Shipping:	Maintain specimen at room tempera	nture.
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		see Fecal Chloride
Referred Out:	In-Common Laboratories	
Stool Electroly	tes	see Fecal Electrolytes
Referred Out:	In-Common Laboratories	
Section: Manag Doc#: 19453	gement System\PLM\General\PLM W	Tebsite\General\Test Catalogue\ Version: 164.0 C Effective Date: 2/9



Stool	Fat	see ]	Fat,	Feca	l
	I at	Sec.	Lui	I ccu	

Referred Out: In-Common Laboratories

**Stool for Calprotectin** see Calprotectin, Fecal

Referred Out: In-Common Laboratories

STR see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Streptococcus, Group B

Vaginal or rectal swabs for culture Tube/Specimen:

Referred Out: IWK

Instructions: Shipped as Biological Substance Category B.

Strongyloidiasis Serology

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002A/CD0002B Requisition:

Division: Microbiology-Immunology

Clinical data should be indicated on the requisition. Instructions:

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

RO STRONG LIS Mnemonic:

Sugar PC see Glucose PC, Plasma

Division: Clinical Chemistry - Core

Sulfonylurea

Tube/Specimen: Random urine; keep refrigerated.

Referred Out: Mayo Medical Laboratories

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

Send copy of requisition.

Stability: Room temperature for 72 hours, refrigerated for 14 days (preferred), frozen for 180 days.

LIS Mnemonic: **FSLFU** 

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024 Page 206 of 239



Referred Out:

## **PLM Laboratory Test Catalogue**

**Surmontil** see Trimipramine Level

In-Common Laboratories

Synovial Analysis

Tube/Specimen: Synovial Fluid

Requisition: CD0002

Division: Hematopathology - Core

Instructions: Amount required: 5 mL aliquot of synovial fluid collected in lavender stoppered 4.0 mL EDTA tube.

Indicate on requisition the site of aspiration and which test is requested. Options for testing include Gram Stain, Cell Count, and Crystals. Comments:

Tests that are not individually requested will not be performed. Send immediately to Laboratory Client Support Services, 1st floor Mackenzie

Should be processed within 4 hours of collection.

Alternate Names: Joint Fluid

LIS Mnemonic: SF CT

SF CRY

ED SYNOVIAL [Emergency department careset]

Syphilis Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Alternate Names:

MHA-TP

RST

Reagin Screen Test

**VDRL TPPA** 

LIS Mnemonic: SYPH

t(11:14) see BCL1-IGH gene fusion

Division: Molecular Diagnostics

t(14:18) see BCL2-IGH gene fusion

Molecular Diagnostics Division:

T(15:17)see PML-RAR gene fusion

Division: Molecular Diagnostics

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

**Doc#:** 19453

Effective Date: 2/9/2024

Version: 164.0 Current

Page 207 of 239



t(2:5)		see ALK-NPM gene fusion
Division:	Molecular Diagnostics	
t(4:11)		see AF4-MLL gene fusion
Division:	Molecular Diagnostics	
t(8:21)		see AML1-ETO gene fusion
Division:	Molecular Diagnostics	
T3, Free		
Tube/Specimen:	Gold Stoppered 5.0 mL SST	
Requisition:	CD0002	
Division:	Clinical Chemistry - Core	
Shipping:	Separate serum within 5 hours of colle	ection. 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		see Thyroxine, Free
Division:	Clinical Chemistry - Core	
T790M		see Circulating Tumor DNA
Division:	Molecular Diagnostics	
TAB (MA)		see Anti-Thyroid Peroxidase Antibodies
Division:	Clinical Chemistry - Core	
TAB (TA)		see Anti-Thyroglobulin Antibodies
Division:	Clinical Chemistry - Core	
Tacro		see FK 506
Division:	Clinical Chemistry - Toxicology	

Version: 164.0 Current Effective Date: 2/9/2024

Page 208 of 239



**Tacrolimus** see FK 506

Clinical Chemistry - Toxicology Division:

**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

CD0002C Requisition:

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.

Maintain specimen at room temperature. Shipping:

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.

CD4 Cells Alternate Names:

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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 209 of 239



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

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TCR beta chain see T-cell lymphoid clonality

Division: Molecular Diagnostics

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TCR Gene Rearrangement Study see IgG/TCR Gene Rearrangement Study

Division: Molecular Diagnostics

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Tegretol see Carbamazepine

Division: Clinical Chemistry - Core

Tegretol Epoxide see Carbamazepine-10, 11 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

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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 210 of 239

Version: 164.0 Current



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

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

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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 Instructions:

and after a steady state concentration has been achieved (4-5 half-lives).

Alternate Names: Aminophylline

LIS Mnemonic: THEO

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 211 of 239

Version: 164.0 Current



#### Thermal Amplitude

#### see Cold Agglutinin Titre

Division: Transfusion Medicine

Thiamine (Vitamin B1), plasma

One 4.0 mL Lavender topped EDTA tube. Wrap in tinfoil within 1 hour of collection to protect from light. Tube/Specimen:

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)

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 Tube/Specimen:

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.

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.

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 212 of 239



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 Phenotyping 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:

BRBC: 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.

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 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

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

Doc#: 19453

Effective Date: 2/9/2024 Page 213 of 239

Version: 164.0 Current



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

Tube/Specimen: Gold topped SST tube.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 1.0 mL serum. Freeze.

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

Send copy of requisition.

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 214 of 239

Version: 164.0 Current



Stability:	30 days frozen.

LIS Mnemonic: **FFTPO** 

Thrombotic Thrombocytopenia Purpura see Adams-13 Testing

Referred Out: London HSC-Victoria Hospital

Thyrocalcitonin see Calcitonin

Division: Clinical Chemistry - Core

Thyroglobulin High Sensitivity

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

Division: Clinical Chemistry - Core

Nova Scotia Health Central Zone: Thyroglobulin requests are automatically also assayed for TGAB and TSH. Comments:

All other Nova Scotia Health Zones: Thyroglobulin requests are automatically also assayed for TGAB.

Shipping: Separate serum within 5 hours of collection. Prepare two aliquots.

Stability: Serum stable for 48 hours at room temperature and 72 hours at 2 to 8°C. Prepare two aliquots, freeze and send frozen serum, if longer.

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]

Thyroglobulin Antibodies see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

**Thyroid Antibodies** see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

Thyroid Antibodies see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

**Thyroid Function Tests** see TSH

Clinical Chemistry - Core

Thyroid Receptor Antibody

Division:

Tube/Specimen: Gold topped SST tube.

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

Version: 164.0 Current Doc#: 19453 Effective Date: 2/9/2024

Page 215 of 239



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

Thyrotropin Binding Inhibitory Ig TBII Alternate Names:

Thyrotropin Receptor Antibody Long Acting Thyroid Stimulator LATS

LIS Mnemonic: TRAB

#### **Thyroid Stimulating Hormone** see TSH

Clinical Chemistry - Core Division:

# **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)

Gold topped SST tube. Tube/Specimen:

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

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 216 of 239

Version: 164.0 Current



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 Transgl		see Anti-Tissue Transglutaminase		
Division:	Immunopathology			
Tobramycin L	evel			
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 Bilirubir	1	see Bilirubin Total, Plasma		
Division:	Clinical Chemistry - Core			
Total CO2, Pla	asma	see Bicarbonate, plasma		
Division:	Clinical Chemistry - Core			

Division: Hematopathology - Core

**Total Eosinophil Count** 

Effective Date: 2/9/2024 Page 217 of 239

Version: 164.0 Current

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

see Eosinophil Count



Total Iron Binding Capacity see Iron, Plasma

Division: Clinical Chemistry - Core

Total Protein, Plasma see Protein Total, Plasma

Division: Clinical Chemistry - Core

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Total VDB see Bilirubin Total, Plasma

Division: Clinical Chemistry - Core

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**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)

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**Toxoplasmosis Avidity** 

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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 218 of 239

Version: 164.0 Current



Toxoplasmosis PCR

Amniotic Fluid (minimum 1 mL), CSF (minimum 1 mL), 4.0 mL EDTA Lavender stoppered tube (minimum 3 mL), Pleural Fluid Tube/Specimen:

(minimum 1 mL), Vitreous Fluid (minimum 1 mL), Bronchio-alveolar lavage (minimum 10 mL), Tissue

CD0432/CD0433 Requisition:

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.

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

RO ROSER LIS Mnemonic:

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

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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)

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

\*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

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 219 of 239



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

CD0002 Requisition:

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

TRF LIS Mnemonic:

Division:

Division:

Division:

Division:

**Doc#:** 19453

see BCL1-IGH gene fusion

Translocation (11:14)

Division: Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

Translocation (14:18) see BCL2-IGH gene fusion

Division: Molecular Diagnostics

Translocation (15:17) see PML-RAR gene fusion

Translocation (2:5)

see ALK-NPM gene fusion

Translocation (4:11) see AF4-MLL gene fusion

**Translocation (8:21)** see AML1-ETO gene fusion

Version: 164.0 Current Section: Management System\PLM\General\PLM Website\General\Test Catalogue\

> Effective Date: 2/9/2024 Page 220 of 239



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

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Tricyclic Screen (TCA)

Physician must specify name of drug(s)

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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

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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

Trimipramine Level

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

Referred Out: In-Common Laboratories

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 221 of 239

Version: 164.0 Current



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.

Plain red topped tubes and lavender topped EDTA tubes are acceptable. Indicate serum or plasma on aliquot tube. Note:

LIS Mnemonic: TRIMI

**Triptil** see Protriptyline Level

Referred Out: In-Common Laboratories

Tropheryma Whipplei

Whole blood: 4.0 mL EDTA Lavender stoppered tube (2 mL) or bone marrow: 4.0 mL EDTA Lavender stoppered tube Tube/Specimen:

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

Clinical Chemistry - Core Division:

A separate specimen tube is required for Troponin T-HS analysis. Note:

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

Gold Stoppered 5.0 mL SST Tube/Specimen:

Requisition: CD0002A/CD0002B

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

**Doc#:** 19453

Effective Date: 2/9/2024 Page 222 of 239

Version: 164.0 Current



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

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**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

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**TSH** 

**TSI** 

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

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see Thyroid Receptor Antibody

see Thyroid Stimulating Immunoglobulin

TSH Receptor Antibody

Referred Out: In-Common Laboratories

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Referred Out: In-Common Laboratories

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TTG see Anti-Tissue Transglutaminase

Division: Immunopathology

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TTP Assay see Adams-13 Testing

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 223 of 239

Version: 164.0 Current



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.

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

RO ROSER LIS Mnemonic:

see Acetaminophen Tylenol

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)

CD0001\_05\_2019 Requisition:

Division: Transfusion Medicine

Indicate on requisition date and time required, the planned procedure, transfusion, and pregnancy history. Send copy of patient's antibody Instructions:

card if patient has known antibodies.

Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection

Inpatient Extended Type and Screen protocol testing valid for 21 days unless patient is transfused platelets/red cells then testing valid for 96 Note:

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).

Group and Crossmatch Alternate Names:

Crossmatch

Type and Crossmatch

#### Unbound Calcium see Ionized Ca

Division: Clinical Chemistry - Core

### Urate, 24-Hour Urine

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 224 of 239



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

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Urea Nitrogen, Plasma see Urea, Plasma

Division: Clinical Chemistry - Core

Urea Nitrogen, Urine see Urea, 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

Alternate Names: BUN

Urea Nitrogen

LIS Mnemonic: UREA

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 225 of 239



#### 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

U UREA

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#### 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

#### 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

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Uric Acid, Urine see Urate, Urine

Division: Clinical Chemistry - Core

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 226 of 239

Version: 164.0 Current



#### Urinalysis (including microscopic examination if required)

Tube/Specimen: 10 to 50 mL random urine collected in sterile plastic screw top container

CD0002 Requisition:

Division: Clinical Chemistry - Core

Urine will be initially examined only for color, clarity, and chemical analysis (by dipstick). Microscopic analysis will only be performed if Comments:

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)

**Urinary Catecholamines** see Catecholamine, Urine

Division: Clinical Chemistry - Toxicology

see C-Telopeptide

Urinary Cross Links

(Pyridinium Telopeptide and other

Peptides)

Division:

Division:

**Doc#:** 19453

Referred Out: In-Common Laboratories

Urine HCG, Qualitative Qualitative urine HCG (urine pregnancy) testing will no longer be offered as of Feb 4, 2019

see Porphobilinogen Deaminase **Uro-1-Synthetase** 

Referred Out: In-Common Laboratories

**Uroporphyrin, 24-Hour Urine** see Porphyrin Screen, 24-Hour Urine

Referred Out: In-Common Laboratories

VWFsee VonWillebrand Workup

Hematopathology - Coagulation

Hematopathology - Coagulation

V W F Activity see VonWillebrand Workup

V W F Antigen see VonWillebrand Workup

Division: Hematopathology - Coagulation

**Section:** Management System\PLM\General\PLM Website\General\Test Catalogue\ Version: 164.0 Current

> Effective Date: 2/9/2024 Page 227 of 239



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

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Valproic Acid see Valproate

Division: Clinical Chemistry - Core

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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

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Variable Number Tandem Repeats (VNTR)

see Chimerism Analysis for BMT

Division:

Division: Molecular Diagnostics

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Varicella Zoster Immune Status

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

Instructions: Requisition must indicate immune status.

Virology-Immunology

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 228 of 239

Version: 164.0 Current



Chicken Pox Titre Alternate Names:

LIS Mnemonic: VZI

#### Varicella Zoster 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

For CSF: IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens Comments:

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.

CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen. Shipping:

All other specimens store at 4°C up to 3 days, if longer freeze at -70°C.

E BFME (CSF) LIS Mnemonic:

E HSVVZ (all other specimens)

#### Vascular Endothelial Growth Factor

Tube/Specimen: Lavender topped K2EDTA tube.

Referred Out: In-Common Laboratories

Instructions: 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.

Room temperature 4 hours, refrigerate 48 hours, frozen 1 year. Stability:

Alternate name: VEGF-D LIS Mnemonic: MISC REF

### Vasculitis Panel

#### (ANCA)

#### (Includes Anti-MPO, Anti-PR3, Anti-GBM)

Gold Stoppered 5.0 mL SST Tube/Specimen:

CD0002 Requisition:

Division: Microbiology Immunology

Synonyms: ANCA, Anti-Neutrophil Cytoplasmic Antibody, Anti-GBM, Anti-Glomerular Basement Membrane, Anti-MPO, Anti-Myeloperoxidase,

Anti-PR3, Anti-Proteinase 3

LIS Mnemonic: Vasc Pnl

#### Vasoactive Intestinal Polypeptide (VIP)

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 229 of 239



Tube/Specimen: Lavender topped EDTA tube. Patient fasting status is preferred as levels may be increased otherwise.

Referred Out: In-Common 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: Room temperature 4 hours, refrigerated 24 hours, frozen 6 months.

LIS Mnemonic: VIP

see Copeptin

#### Vasopressin

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.

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#### VDB see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

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**VDRL** 

Tube/Specimen: CSF minimum 200  $\mu L$ 

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: For serum specimens see Syphilis Serology

Shipping: Ship at 2 to 8°C up to 2days, if longer freeze at -70°C.

LIS Mnemonic: I VDRL

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### **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

VIP see Vasoactive Intestinal Polypeptide

Referred Out: Mayo Medical Laboratories

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

**Doc#:** 19453 **Effective Date:** 2/9/2024 Page 230 of 239

Version: 164.0 Current



Viscosity, Serum

Tube/Specimen: Plain red topped tube kept at 37°C.

Referred Out: In-Common Laboratories

Instructions: Send to Esoteric Immunology Laboratory to be processed.

Keep serum cold. Do not freeze.

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

LIS Mnemonic: VISC Serum

Vitamin A Level

Tube/Specimen: Plain red topped tube. Protect from light!

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum, wrap in tinfoil to protect from light! Freeze! Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

In-Common Laboratories

LIS Mnemonic: VIT A RO

Vitamin B1, Whole Blood

see Thiamine, Whole Blood

Vitamin B2 (Riboflavin)

Referred Out:

Lavender topped EDTA tube. Protect from light! Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: 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

Send copy of requisition.

LIS Mnemonic: VITB2

Vitamin B3 (Niacin)

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.

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

Send copy of requisition.

Stability: Frozen - 56 days

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024 Page 231 of 239



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

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

(Do not confuse with Vitamin D (1, 25 dihydroxy) Level)

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002

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

**Doc#:** 19453

Page 232 of 239

Version: 164.0 Current



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

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#### 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

Referred Out:

#### VNTR see Chimerism Analysis for BMT

Division: Molecular Diagnostics

#### Voltage-gated Calcium Channel Antibody

Tube/Specimen: Gold topped SST tube.

Instructions: Aliquot at least 1.0 mL serum. Freeze!

In-Common Laboratories

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

Doc#: 19453

**Effective Date:** 2/9/2024 Page 233 of 239

Version: 164.0 Current



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

Send copy of requisition.

LIS Mnemonic: VGCC

### 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.

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

LIS Mnemonic: VGKC

#### 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.

Peripheral blood: 5 days at 4°C or frozen Stability:

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

Send sample and copy of requisition to Hematopathology Coagulation lab for processing. Instructions:

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

delay in results.

VWF Multimer Assay LIS Mnemonic:

VonWillebrand Factor Multimer Assay

#### Von Willebrand Workup

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

Version: 164.0 Current **Doc#:** 19453 Effective Date: 2/9/2024

Page 234 of 239



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

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**Water Deprivation Test** 

see Anti-Diuretic Hormone

Referred Out: In-Common Laboratories

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WBC see Profile

Division: Hematopathology - Core

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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

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 235 of 239

Version: 164.0 Current



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

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Western Equine Encephalitis see ARBO Virus

Division: Virology-Immunology

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Xylose Absorption Test see D'Xylose Tolerance Test

Referred Out: In-Common Laboratories

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Zarontin see Ethosuximide Level

Referred Out: In-Common Laboratories

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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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Zika Virus Serology

Tube/Specimen: Gold Stoppered 5.0 mL SST

Requisition: CD0002A/CD0002B

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

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 236 of 239

Version: 164.0 Current



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

Zinc Level RO

#### 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

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

**Doc#:** 19453

Version: 164.0 Current Effective Date: 2/9/2024

Page 237 of 239



# **APPENDIX A**

1. 24 hour Urine processing for Calcium, Oxalate, Magnesium, Phosphorous

Step	Action		
1.1	Mix specimen by inversion a minimum of ten times.		
1.2	Aliquot all tests other than calcium, oxalate, magnesium, phosphorous and uric acid.		
1.3	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.		
1.4	Add 25mL of 6N HCl to the collection container. Add half if urine is halved.		
1.5	Mix specimen by inversion a minimum of ten times and allow to sit for five minutes.		
1.6	Measure urine pH.		
1.7	If urine pH is less than or equal to 3, aliquot sample.		
	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.		
1.8	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.		

2. 24 hour Urine processing for Uric Acid

	2. 24 hour office processing for one Adia				
Step	Action				
2.1	Mix sample by inversion a minimum of ten times.				
2.2	Aliquot all tests other than calcium, magnesium, phosphorous, oxalate and uric acid.				
2.3	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 <i>Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous.</i>				
2.4	Add 25mL of 1N NaOH to the collection container. Add half if urine is halved.				
2.5	Mix sample by inversion a minimum of ten times and allow to sit for five minutes.				
2.6	Measure urine pH.				
2.7	If urine pH is greater than or equal to 8, aliquot sample.				
	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.				
2.8	If calcium, magnesium, phosphorous and/or oxalate are also ordered, proceed to <i>Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous</i> , using the other half of the sample set aside in step 2.3.				

**Doc#:** 19453

**Effective Date:** 2/9/2024 Page 238 of 239

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Version: 164.0 Current

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3. 24 hour Urine processing for catecholamine, 5-Hydroxyindole acetic acid (5HIAA) and/or Metanephrine

Step	Action		
3.1	Mix sample by inversion a minimum of ten times.		
3.2	Aliquot sample.		
3.3	Measure urine pH.		
3.4	If: pH <2  pH >4 and ≤6 and received in original 24- hour acidified container within 8 hours from the end of collection	Then:  Adjust pH by slowly adding 6N NaOH, one drop at a time, until the pH is between 2 and 4.  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.	
	pH >4 <u>and</u> ≤6 <u>but</u> received <u>greater</u> than 8 hours from the end of collection	The test will be cancelled automatically by the system upon verification of the pH results.	
	pH >6	The test will be cancelled automatically by the system upon verification of the pH results.	
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**Effective Date:** 2/9/2024 Page 239 of 239

Version: 164.0 Current