

NH LABORATORY SERVICES TEST DIRECTORY

This Test Directory is provided as a service to its visitors. We strive to keep information as current as possible but reserve the right to delete or modify the contents of this directory at any time without notification. Printed copies are not valid for more than 24 hours.

We welcome your feedback on this Test Directory

Please advise us of discrepancies and send your questions, comments or suggestions to the [Test Directory Advisor](#).

The Test Directory provides test-specific information and instruction for collection & handling and transportation for tests performed at our laboratory and those referred to other medical laboratories.

Also included are reference intervals for Chemistry and Hematology tests.

[Chemistry Reference Intervals](#)

[Hematology Reference Intervals](#)

To view information on a particular test, **search by test name (Ctrl+F)**

PATIENT PAY TESTING

For the most up to date payment schedule and costing of non-MSP funded tests, please see [Laboratory Services Payment Schedule](#)

For sample acceptability and stability see [Sample Acceptance & Rejection Guidelines and Stability Charts](#)

PEDIATRIC COLLECTIONS

Pediatric patients require special consideration when doing blood collections. See the following charts for reference when collecting pediatric blood work.

[MAXIMUM BLOOD DRAW FOR PATIENTS LESS THAN 45 KG](#)
[MINIMUM WHOLE BLOOD VOLUMES FOR PEDIATRIC COLLECTIONS](#)

NH LABORATORY SERVICES TEST DIRECTORY

LEGEND

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
WHITE ROWS	CURRENT TESTS					
GREY SHADED ROWS	SEE DIFFERENT TEST					
GREEN SHADED ROWS	CURRENT TESTS WITH MULTIPLE SPECIMEN TYPES &					
PINK SHADED ROWS	TRANSFUSION PRODUCTS					
BLUE SHADED ROWS	TESTS NO LONGER AVAILABLE					
ORANGE SHADED ROWS	SPECIAL REQUIREMENTS					

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
A-ADO ₂	RESPIRATORY ONLY					
ABO/D TYPING	ABO & RH BLOOD TYPE	7 ML EDTA (LAVENDER)	1 ML WHOLE BLOOD	CHILD: 1 ML MIN TRANSFUSION DEPT OR HEMATOLOGY MAY ALREADY HAVE AN EDTA SPECIMEN) NO BBID REQUIRED	SEND COOL	ALL NH TMS EXCEPT: <ul style="list-style-type: none"> CGH TRDT HHHC HHC SHC SKDT MBDH FLDT VLDL
ABO/D NB (NEWBORN)			0.5 ML WHOLE BLOOD	USE CORD BLOOD WHEN AVAILABLE* * COLLECT MIN 0.5 ML CAPILLARY EDTA IF CORD BLOOD IS NOT AVAILABLE (CHECK HEMATOLOGY – MAY USE CBC SAMPLE IF AVAILABLE)		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ABSOLUTE T4 & T8 CELL COUNT & H/S RATIO	SEE CD4/CD8					
ACA	SEE CARDIOLIPIN ANTIBODY					
ACANTHAMOEBA CULTURE		NON-NUTREINT AGAR PLATES	CORNEAL SCRAPING	PROVIDE PLATES TO PHYSICIAN. PHYSICIAN TO PLATE DIRECTLY TO PLATES AT TIME OF COLLECTION.	SEND ROOM TEMP	BCCDC
		ORANGE TOP CONTAINER	CORNEAL BIOPSY	PLACE BIOPSY IN MOIST STERILE GUAZE INTO STERILE CONTAINER		
				SEND TO LAB IMMEDIATELY		
ACE	SEE ANGIOTENSIN CONVERTING ENZYME					
ACETAMINOPHEN LEVEL	TYLENOL PARACETAMOL	RED TOP OR RST (ORANGE)	1 ML SERUM	DO NOT COLLECT IN SST TUBE CENTRIFUGE (ALIQOT IF USING RED TOP) STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: <ul style="list-style-type: none"> • TRDT • HHHC • HHC • SHC • SKDT • MBDH • FLDT • SLH • VLDT
ACETAZOLAMIDE (DIAMOX)	NO LONGER AVAILABLE					
ACETONE LEVEL ORDER HOLD REF UNTIL RE-ROUTED		SST (GOLD)	2 ML SERUM	DO NOT USE ALCOHOL FOR VENIPUNCTURE CENTRIFUGE DO NOT ALIQUOT STORE AT 4°C DEDICATED SERUM FOR ACETONE LEVEL ONLY	SEND COOL	DYNACARE
ACETONE SCREEN	SEE KETONES					
ACETYLCHOLINESTERASE - RBC	SEE CHOLINESTERASE					

NH LABORATORY SERVICES TEST DIRECTORY

ACETYLCHOLINE RECEPTOR ANTIBODY	AChR ANTIBODY MYASTHENIA GRAVIS	SST (GOLD)	2 ML SERUM	REQUIRED REQ: UBC NEUROIMMUNOLOGY REQ CENTRIFUGE 4°C & ALIQUOT STORE AT 4°C	SEND COOL ON ICE	UBC DIAGNOSTIC SERVICES (UBCH)
ACID FAST BACILLI	SEE MYCOBACTERIA CULTURE					
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ACID MALTOSSE IN WBC	SEE ALPHA GALACTOSIDASE					
ACID PHOSPHATASE (GAUCHER DISEASE)	NO LONGER AVAILABLE					
	SEE BETA- GLUCOSIDASE					
ACID PHOSPHATASE (PROSTATIC)	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

ADRENOCORTICOTROPIC HORMONE SEE ACTH STIMULATION IF PATIENT IS BEING GIVEN COSYNTROPIN, SYNACTHEN, CORTROSYN, OR AMPHASTAR AS PART OF A STIMULATION TEST	ACTH	EDTA (LAVENDER)	1 ML PLASMA PEDS: 0.5 ML (MIN 1 ML WHOLE BLOOD)	COLLECT ON ICE CENTRIFUGE AT 4°C & ALIQUOT FREEZE PREFERRED COLLECTION BETWEEN 7-10 AM OR WITHIN THE FIRST 3 HOURS OF WAKING	SEND FROZEN DRY ICE	ST PAULS
ADRENOCORTICOTROPIC HORMONE STIMULATION - ADULT	RAPID ACTH STIMULATION SYNACTHEN STIMULATION COSYNTROPIN STIMULATION CORTROSYN STIMULATION	SST (GOLD)	0.5 ML SERUM	FASTING IS NOT NECESSARY DRAW BASELINE SERUM CORTISOL SYNTHETIC ACTH IS ADMINISTERED VIA I.M. INJECTION AND BLOOD IS DRAWN FOR SERUM CORTISOL LEVELS AT 30 MINS AND 60 MINS POST INJECTION COSYNTROPIN, SYNACTHEN, CORTROSYN, OR AMPHASTAR ARE ALL SYNTHETIC ACTH INJECTIONS ORDER AS TIMED BLOODWORK SPECIMENS WILL BE COLLECTED AT 0, 30 & 60 MINUTES	SEND COOL	
ADRENOCORTICOTROPIC HORMONE STIMULATION – PEDIATRIC				FASTING IS NOT NECESSARY HIGH DOSE ACTH (250 ug): COLLECT CORTISOL LEVELS AT 0 & 60 MINS LOW DOSE ACTH (1 ug): COLLECT CORTISOL LEVELS AT 0, 20 & 30 MINS		

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ACTINOMYCES ANTIBODY	NO LONGER AVAILABLE					
ACTIVATED PARTIAL THROMBOPLASTIN TIME	SEE PARTIAL THROMBOPLASTIN TIME (PTT)					
ACTIVATED C PROTEIN RESISTANCE	SEE FACTOR V LEIDEN					

NH LABORATORY SERVICES TEST DIRECTORY

ACUTE HEPATITIS	SEE HEPATITIS, ACUTE					
ACYLCARNITINE BLOOD SPOT	ACYLCARNITINE PROFILE	PKU CARD- IDENTIFY SPECIFIC TEST ON CARD	4 SPOTS 2 MIN	ALLOW BLOOD SPOTS TO DRY 3 HOURS MIN BEFORE PACKAGING FOR SHIPPING TURN AROUND TIME IS 1 WK CONSULT BIOCHEMICAL GENETICIST AT BCCH FOR URGENT REQUESTS	SEND ROOM TEMP	BCCH
ACYLCARNITINE SERUM **PHYSICIAN MUST SPECIFICALLY REQUEST SERUM ACYLCARNITINE		RED TOP	1 ML SERUM	BLOOD SPOT PREFERRED CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH
ADENOVIRUS	SEE VIRAL CULTURE					
ADENOVIRUS ANTIBODY (SEROLOGY)	NO LONGER AVAILABLE					
ADENOVIRUS (PCR)		RED TOP	1 ML WHOLE BLOOD	COLLECT MON – THURS ONLY ** DO NOT CENTRIFUGE** STORE AT 4°C	SEND COOL	BCCH
ADNA	SEE DNA ANTIBODY					
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ADRENALINE	SEE CATECHOLAMINES					
ADRENOCORTICOTROPIN HORMONE	SEE ACTH					
AFB – ACID FAST BACILLI AFB CULTURE	SEE MYCOBACTERIA CULTURE					
AFP AMNIOTIC FLUID	SEE ALPHA 1 - FETOPROTEIN AMNIOTIC FLUID					

NH LABORATORY SERVICES TEST DIRECTORY

AFP MATERNAL	SEE BIOCHEMICAL MARKERS PRENATAL SCREEN					
A/G RATIO	SEE ELECTROPHORESIS					
ALANINE AMINOTRANSFERASE	SEE ALT					
ALBUMIN LEVEL	ALB SERUM ALBUMIN SERUM ALB	SST (GOLD) PST (LT GRN) RST (ORANGE) RED TOP	1 ML SERUM OR PLASMA	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
ALBUMIN LEVEL, BODY FLUID	SEE BODY FLUID ANALYSIS					
ALBUMIN, URINE	SEE MICROALBUMIN					
ALBUMIN – 5% OR 25% BLOOD PRODUCT FOR TRANSFUSION				SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUESTION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		TMS
ALBUMIN: CREATININE RATIO	SEE MICROALBUMIN					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ALCOHOL	SEE ETHANOL					
ALCOHOL - URINE	SEE ETHANOL LEGAL - OUTPATIENT					

NH LABORATORY SERVICES TEST DIRECTORY

ALDOLASE	NO LONGER AVAILABLE					
ALDOSTERONE RANDOM	ALD RANDOM	EDTA (LAVENDER) OR RED TOP	1 ML PLASMA	PATIENTS SHOULD BE FREE OF SPIRONOLACTONE, EPILRENONE, TRAIPTERENE, & AMILORIDE FOR 4 WEEKS IF POSSIBLE COLLECT BLOOD IN PRE-CHILLED EDTA AFTER PATIENT SEATED FOR 5-15 MINS CENTRIFUGE 4°C WITHIN 15 MINS OF COLLECTION FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
ALDOSTERONE/RENIN RATIO IF A/R RATIO SPECIFIED						
ALDOSTERONE/RENIN RATIO ORDER AS HOLD REF UNTIL UPDATED IN CERNER SUPINE COLLECTIONS ARE GENERALLY UNNECESSARY FOR SCREENING PURPOSES OF PRIMARY ALDOSTERONISM RESULTS >1500 ARE POSITIVE FOR PRIMARY HYPERALDOSTERONISM. CONFIRMATION SHOULD BE FOLLOWED WITH A SALINE SUPPRESSION TEST	ARR A/R RATIO ALD/RENIN RATIO	EDTA (LAVENDER) MUST BE PRE-CHILLED	2 ML PLASMA	SUPINE NO LONGER REQUIRED COLLECT IN PRE-CHILLED EDTA ON ICE CENTRIFUGE AT 4°C AND ALIQUOT WITHIN 15 MINS OF COLLECTION FREEZE IMMEDIATELY Medications should be held for 7 days prior to testing or for as long as is clinically feasible. <ul style="list-style-type: none"> Increased ARR if the patient is on clonidine or beta blockers Decreased ARR if the patient is on spironolactone, ACE inhibitors, ARBs, calcium channel blockers, or doxazosin 	SEND FROZEN	ST PAULS

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

ALDOSTERONE 24 HOUR URINE		24 HR URINE CONTAINER NO PRESERVATIVES	6 ML URINE 3 ML ALIQUOT	PATIENT MUST BE OFF BETA BLOCKERS AND DIURETICS FOR 2 WEEKS PRIOR TO TESTING FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS KEEP REFRIGERATED DURING COLLECTION FREEZE URINE ALIQUOT INDICATE 24 HR VOLUME, PATIENT HEIGHT & WEIGHT	SEND FROZEN	ST PAULS
ALK	ALKALINE PHOSPHATASE ALP	PST (LT GREEN) OR SST (GOLD)	0.5 ML SERUM	CENTRIFUGE WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: <ul style="list-style-type: none"> • HHC • HHC • SHC • SKDT • FLDT • VLDT
ALKALINE PHOSPHATASE ISOENZYME	ALKP ISOENZYME 5-NUCLEOTIDASE	SST (GOLD) OR LIGHT GREEN OR LI HEPARIN	1 ML SERUM OR PLASMA	ONLY PERFORMED IF SERUM ALK IS ELEVATED CENTRIFUGE AND ALIQUOT STORE AT 4°C SAMPLE MUST REACH VGH LAB WITHIN 72 HOURS OF COLLECTION OTHERWISE FREEZE	SEND COOL <72 HRS OR FROZEN >72 HRS	VGH
ALLERGEN-SPECIFIC IgE ANTIBODY 5 ALLERGENS/YR COVERED BY MSP 20 ALLERGENS/YR COVERED BY MSP IF ORDERED BY AN IMMUNOLOGIST OR ALLERGY SPECIALIST	RAST- R AUDIO A LLERGO S ORBENT T EST- R AST SAIGE (SPECIFIC ALLERGEN IGE)	RED TOP OR LI HEP (GREEN)	0.1 ML SERUM OR PLASMA PER ALLERGEN	MUST USE BCCH ALLERGEN SPECIFIC IgE ANTIBODY TEST REQUISITION SPECIFY ALLERGEN(S) WANTING TO TEST NO ISOTOPES ADMINISTERED 24 HOURS PRIOR TO VENEPUNCTURE CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ALPHA-1-ANTITRYPSIN, FECAL	A1AT STOOL A1ATB	ORANGE TOP CONTAINER	5 g WALNUT SIZE STOOL SAMPLE	FREEZE WITHIN 30 MINS OF COLLECTION DEDICATED SAMPLE	SEND FROZEN	U of A Hospital
ALPHA-1- ANTITRYPSIN GENOTYPING (PHENOTYPE WILL BE REFLEX IF INDICATED) ORDER HOLD REF UNTIL TEST BUILT	AATG A1ATG	3 ML RED TOP AND EDTA (LAVENDER)	1 ML SERUM	ALIQOT AND FREEZE 1 ML SERUM (PHENOTYPE) AND 1 UNOPENED LAVENDER TUBE (GENOTYPE) REQUIRES CRITERIA FORM SEE A1AT INFO/FORMS	SEND FROZEN ON DRY ICE	ST PAULS
ALPHA-1-ANTITRYPSIN PHENOTYPE	SEE ALPHA-1 ANTITRYPSIN GENOTYPING					
ALPHA 1 FETOPROTEIN, MATERNAL SCREEN	SEE BIOCHEMICAL MARKERS PRENATAL SCREEN					
ALPHA 1 FETOPROTEIN, AMNIOTIC FLUID OPTIMAL GESTATIONAL AGE FOR COLLECTION IS 15-21 WEEKS	AFP AMNIOTIC FLUID	STERILE ORANGE TOP CONTAINER	5 ML AMNIOTIC FLUID 3 ML MIN	MUST USE BCCH PRENATAL REQ AVOID FRI-SUN COLLECTIONS INDICATE GESTATIONAL AGE ON REQUISITION RECORD "AMNIOTIC FLUID" ON REQUISITION WHEN SENDING AMNIOTIC FLUID, ALSO REQUEST SERUM ANALYSIS WHEN POSSIBLE CENTRIFUGE AMNIOTIC FLUID WITHIN 24 HRS AT 3000 RPM FOR 5 MINS STORE AT 4°C	SEND COOL	BCCH
ALPHA-1-ANTITRYPSIN	AAT A1AT	SST (GOLD) OR PST/LI HEPARIN	1 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ALPHA 1 FETOPROTEIN TUMOUR MARKER	AFP TUMOR MARKER	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
ALPHA AMINO ADIPIC SEMIALDEHYDE URINE	AASA URINE	ORANGE TOP CONTAINER NO PRESERVATIVES	5 ML URINE	FIRST MORNING URINE SPECIMEN PREFERRED FREEZE	SEND FROZEN	BCCH
ALPHA- FUCOSIDASE, WBC	FUCOSIDOSIS			URINE OLIGOSACCHARIDES IS THE FIRST LINE SCREENING TEST CONSULT BIOCHEMICAL GENETICIST AT BCCH (BGL) 1-604-875-2307 TO DISCUSS OPTIONS/REFERRAL TO OTHER LABS		BCCH
ALPHA GALACTOSIDASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	FABRY'S DISEASE	WHATMAN 903 BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	USE BGL REQUISITION 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available) 6. Store in 4°C fridge until shipping.	SEND ROOM TEMP	BCCH
ALPHA GALACTOSIDASE PLASMA	FABRY'S DISEASE	Na HEPARIN (DARK GREEN)	2 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE & ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	HIC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ALPHA GLUCOSIDASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	POMPE DISEASE ACID MALTASE GLYCOGEN STORAGE II	WHATMAN 903 BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	BGL Requisition 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available) 6. Store in 4°C fridge until shipping	SEND ROOM TEMP	BCCH
ALPHA GLUCOSIDASE WBC	NO LONGER AVAILABLE					
	SEE ALPHA-GLUCOSIDASE BLOOD SPOT					
ALPHA IDURONIDASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	HURLER DISEASE MUCOPOLYSACCHARIDOSIS TYPE I	WHATMAN 903 BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	BGL Requisition 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available) 6. Store in 4°C fridge until shipping	SEND ROOM TEMP	BCCH
ALPHA MANNOSIDASE WBC	ALPHA MANNOSIDOSIS			URINE OLIGOSACCHARIDES IS THE FIRST LINE SCREENING TEST CONSULT BIOCHEMICAL GENETICIST AT BCCH (BGL) 1-604-875-2307 TO DISCUSS OPTIONS/REFERRAL TO OTHER LABS		BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ALPHATOCOPHERCOL	SEE VITAMIN E					
ALPRAZOLAM LEVEL	XANAX	RED TOP NO GEL	2 ML SERUM	DRAW IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB
ALANINE AMINOTRANSFERASE	ALT SGPT SERUM GLUTAMATE PYRUVATE TRANSAMINASE	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	AVOID HEMOLYSIS CENTRIFUGE (ALIQUOT IF RED TOP) STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: <ul style="list-style-type: none"> • HHHC • HHC • SHC • SKDT • FLDT • VLDT
ALPHA HYDROXY PROGESTERONE	SEE 17- HYDROXY PROGESTERONE					
ALUMINUM LEVEL		NAVY BLUE K2EDTA ONLY BD 368381	1 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING FILL TUBE COMPLETELY -DO NOT MIX CENTRIFUGE AND ALIQUOT: <ul style="list-style-type: none"> • IN A BIOLOGICAL SAFETY CABINET (BSC), PIPETTE SERUM USING A STERILE PIPETTE INTO A 12 X 75mm STERILE POLYPROPYLENE TUBE AND CLOSE TIGHTLY FREEZE	SEND FROZEN	HIC
AMANTIDINE	NO LONGER AVAILABLE					
AMOEBIASIS ANTIBODY	ENTAMOEBA HISTOLYTICA AMOEBIIC LIVER ABSCESS AMOEBIASIS	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOO NOTIC DISEASE REQUISITION CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
AMIKACIN LEVEL MUST INCLUDE DATE/TIME OF LAST DOSE AND DATE/TIME OF COLLECTION		PST (LIGHT GREEN) OR SST (GOLD)	1 ML PLASMA OR SERUM	AVOID HEMOLYSIS <u>TROUGH:</u> <ul style="list-style-type: none"> DRAW 30 MINS PRIOR TO NEXT DOSE (PREFERABLY JUST BEFORE DOSE IS GIVEN) <u>PEAK:</u> <ul style="list-style-type: none"> DRAW 30 MIN AFTER END OF INFUSION <u>RANDOM:</u> <ul style="list-style-type: none"> DRAW PRIOR TO DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HOURS OF COLLECTION FREEZE	SEND FROZEN	VGH
AMINO ACID SCREEN CEREBROSPINAL FLUID (CSF)	<u>TEST INCLUDES:</u> <ul style="list-style-type: none"> Taurine Aspartic acid Asparagine Serine Glutamine Glycine Glutamic acid Threonine Cystine Alanine Citrulline Proline Pipecolic acid Valine Methionine Tyrosine Allo-isoleucine Isoleucine Leucine Phenylalanine Histidine 5-Hydroxylysine Ornithine Lysine Arginine 	CSF TUBE	0.5 ML 0.2 ML MIN	BLOOD FOR AMINO ACIDS MUST BE COLLECTED AT SAME TIME AS CSF SEE AMINO ACID SCREEN – PLASMA INSTRUCTIONS COLLECT CSF ON ICE AND TRANSPORT TO LAB IMMEDIATELY IF BLOODY: <ul style="list-style-type: none"> CENTRIFUGE FOR 10 MINS AT 4°C @ 1800 g REMOVE SUPERNATANT AND FREEZE IN STERILE POLYESTERENE TUBE IMMEDIATELY NOTE ON REQUISITION THAT CSF IS BLOOD STAINED AND CSF WAS TAKEN OFF AFTER SPINNING 	SEND FROZEN ON DRY ICE ASAP	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
AMINO ACID SCREEN - PLASMA	<u>TEST INCLUDES:</u> <ul style="list-style-type: none"> • Taurine • Aspartic acid • Asparagine • Serine • Glutamine • Glycine • Glutamic acid • Threonine • Cystine • Alanine • Citrulline • Proline • Pipecolic acid • Valine • Methionine • Beta Alanine • Tyrosine • Allo-isoleucine • Isoleucine • Leucine • Phenylalanine • Histidine • Tryptophan • 5-Hydroxylysine • Arginininosuccinic acid • Ornithine • Lysine • Arginine 	LI/NA HEPARIN (DARK GREEN) NO GEL	1 ML PLASMA	FASTING REQUIRED: <ul style="list-style-type: none"> • ADULTS & OLDER CHILDREN: OVERNIGHT • SMALL BABIES <1 YR: 3-4 HRS (OR BEFORE NEXT FEED) COLLECT ON ICE AND TRANSPORT TO LAB STAT CENTRIFUGE FOR 10 MIN AT 4°C @ 1840 RCF WITHIN 1 HOUR OF COLLECTION FREEZE IN STERILE POLYSTERENE TUBE IMMEDIATELY PLASMA SHIPPED ON DRY ICE TO BE RECEIVED WITHIN 72 HRS OF COLLECTION	SEND FROZEN ON DRY ICE	BCCH
AMINO ACID SCREEN - URINE RANDOM 24 HR URINES FOR KNOWN CYSTINURIA PATIENTS		STERILE ORANGE TOP CONTAINER	10 ML 2 ML URINE	PLACE ON ICE AND TRANSPORT TO LAB IMMEDIATELY SEND ENTIRE VOID- DEDICATED SAMPLE FREEZE URINE IN URINE TRANSPORT BOTTLE	SEND FROZEN	BCCH
AMIODARONE LEVEL ORDER HOLD REF UNTIL RE-ROUTED	CORDARONE DESETHYLAMIODARONE	RED TOP	3 ML SERUM	COLLECT WITHIN 1 HOUR PRIOR TO NEXT DOSE MUST INDICATE DATE/TIME OF COLLECTION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	CALGARY LAB SERVICES

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
AMMONIA LEVEL	NH3 NH4	EDTA (LAVENDER)	1 ML WHOLE BLOOD PEDS: 500uL EDTA MICROTAINER	DRAW AMMONIA WITHOUT A TOURNIQUET (IF POSSIBLE). REMOVE TOURNIQUET 1-3 MINS PRIOR TO VENIPUNCTURE AVOID DRAWING FROM A LINE OR USING A BUTTERFLY UNLESS VENIPUNCTURE IS EXTREMELY DIFFICULT AVOID HEMOLYSIS - RECOLLECT IF SAMPLE HEMOLYSED FILL TUBE TO MAXIMUM DRAW AMOUNT COLLECT ON ICE AND TRANSPORT TO LAB WITHIN 15 MINS. CENTRIFUGE AT 4°C WITHIN 15 MINS OF COLLECTION AND ALIQUOT STORE AT 4°C TESTING MUST BE COMPLETED WITHIN 30 MINS OF COLLECTION FREEZE PLASMA IF TEST NOT DONE AT FACILITY REGIONAL SAMPLES RECEIVED THAWED AT UHNBC ARE UNSUITABLE FOR ANALYSIS AND WILL BE REJECTED.	SEND FROZEN	NH CHEM ONLY: <ul style="list-style-type: none">FSJHDCDHUHNBC
AMNIOTIC FLUID: L/S RATIO	SEE FETAL LUNG MATURITY SCREEN					
AMNIOTIC FLUID CYTOGENETICS	SEE CYTOGENETICS, AMNIOTIC FLUID					
α-AMINO-3-HYDROXY-5-METHYL-4-ISOXAZOLEPROPRIONIC ACID RECEPTOR ORDER HOLD REF TO MADL UNTIL BUILT IN CERNER NO LONGER MSP BILLABLE	AMPA RECEPTOR ANTIBODY	SST (GOLD) OR RED TOP	1.0 ML	MUST SUBMIT MITGOEN AUTOANTIBODY REQ (SEE REQ FOR INSTRUCTIONS ON SHIPPING, ETC.) CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	MADL
		STERILE CSF TUBE OR POLYSTYRENE	3.0 ML	MUST SUBMIT MITGOEN AUTOANTIBODY REQ (SEE REQ FOR INSTRUCTIONS ON SHIPPING, ETC.) FREEZE		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
AMPHETAMINE LEVEL	NO LONGER AVAILABLE					
AMPHETAMINE LEVEL – PEDIATRIC	NO LONGER AVAILABLE					
AMPHETAMINE URINE-QUALITATIVE ***LAB ONLY***	AMPHETAMINE CONFIRMATION 'SPEED' MDMA ECSTASY	STERILE ORANGE TOP CONTAINER	10 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL OR FROZEN	PROV TOX LAB
FOR SCREENING SEE DRUG SCREEN, URINE						
AMPHETAMINE SCREEN	SEE DRUG SCREEN, URINE					
AMYLASE LEVEL		SST (GOLD) OR PST (LIGHT GREEN)	1 ML	CENTRIFUGE STORE AT 4°C AMYLASE WILL BE CANCELLED IF ORDERED CONCURRENTLY WITH LIPASE AS LIPASE IS A MORE SENSITIVE TEST	SEND COOL	NH CHEM ONLY: <ul style="list-style-type: none">• TRDT• UHNBC
AMYLASE LEVEL , BODY FLUID	SEE BODY FLUID ANALYSIS					
AMYLASE, RANDOM URINE	URINE AMYLASE	STERILE ORANGE TOP CONTAINER	5 ML RANDOM URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS REFRIGERATE DURING COLLECTION STORE AT 4°C SEND 5 ML ALIQUOT	SEND COOL	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
AMYLASE, 24 HR URINE		24 HR URINE BOTTLE NO PRESERVATIVE	24 HR TOTAL URINE	REFRIDGERATE DURING ENTIRE COLLECTION SEND 2 ML ALIQUOT- NO PRESERVATIVES STORE AT 4°C	SEND COOL	VGH
ANA	SEE NUCLEAR ANTIBODY SCREEN					
ANCA	SEE NEUTROPHIL CYTOPLASMIC ANTIBODY					
ANDROSTENEDIONE		RED TOP	2 ML SERUM	ALLOW TO CLOT UPRIGHT FOR 1 HOUR CENTRIFUGE AND ALIQUOT INTO NON-ADDITIVE BD VACUTAINER STORE AT 4°C	SEND COOL	LIFELABS BURNABY
ANGELMAN SYNDROME DNA DETECTION	ORDER DNA ANALYSIS					
ANGIOTENSIN CONVERTING ENZYME	ACE	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
		CSF TUBE	2 ML CSF	IF ORDERED ON CSF, COLLECT SERUM ALSO AND SEND WITH CSF SPECIMEN		
ANTHRAX ANTIBODY	NO LONGER AVAILABLE					
ANTI BETA 2 GLYCOPROTEIN SCREEN	SEE BETA 2 GLYCOPROTEIN					
ANTI CARDIOLIPIN ANTIBODY	SEE CARDIOLIPIN ANTIBODY					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ANTI CCP	SEE CYCLIC CITRULLINATED PEPTIDE ANTIBODY					
ANTI CENTROMERE ANTIBODY	SEE NUCLEAR ANTIBODY EIA SCREEN					
ANTI DIURETIC HORMONE	NO LONGER AVAILABLE					
ANTI DNA	SEE DNA ANTIBODY					
ANTI ENDOMYSIAL ANTIBODY	SEE TISSUE TRANSGLUTIMASE					
ANTI GAD65	SEE GLUTAMIC ACID DECARBOXYLASE					
ANTI GBM	SEE GLOMERULAR BASEMENT MEMBRANE ANTIBODY					
ANTI GLIADIN ANTIBODY	NO LONGER AVAILABLE					
	SEE TISSUE TRANSGLUTIMASE					
ANTI INTERFERON ANTIBODY	SEE INTERFERON ANTIBODY					
ANTI ISLET CELL ANTIBODY	SEE ISLET CELL ANTIBODY					
ANTI JO 1	SEE EXTRACTABLE NUCLEAR					
ANTI MICROSOMAL ANTIBODY	SEE THYROPEROXIDASE ANTIBODY					
ANTI MITOCHONDRIAL ANTIBODY	SEE MITOCHONDRIAL ANTIBODY					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ANTI MYELOPEROXIDASE ANTIBODY	SEE NEUTROPHIL CYTOPLASMIC ANTIBODY					
ANTI MUSK ANTIBODY	SEE MUSK ANTIBODY					
ANTI PARIETAL ANTIBODY	SEE PARIETAL ANTIBODY SCREEN					
ANTI PHOSPHOLIPID ANTIBODY	SEE PHOSPHOLIPID ANTIBODY					
ANTI SMOOTH MUSCLE ANTIBODY	SEE SMOOTH MUSCLE ANTIBODY					
ANTI SPERM ANTIBODY	SEE SPERM ANTIBODY					
ANTI SSA	SEE EXTRACTABLE NUCLEAR ANTIGEN					
ANTISTREPTOLYSIN O TITRE	SEE STREPTOLYSIN O ANTIBODY SCREEN					
ANTI THROMBIN III	SEE THROMBIN III ANTIBODY ASSAY					
ANTI THYROGLOBULIN	SEE THYROGLOBULIN					
ANTI THYROID ANTIBODY	SEE THYROID MICROSOMAL ANTIBODY					
ANTI TRYPSIN	SEE ALPHA 1 ANTITRYPSIN					
ANTI Xa	SEE FACTOR Xa ACTIVITY					
APOLIPOPROTEIN B	APO B	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C DO NOT FREEZE	SEND COOL	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
APOLIPOPROTEIN E (GENOTYPE)	LIPO E LIPOPROTEIN E	EDTA (LAVENDER)	3 ML WHOLE BLOOD	DO NOT OPEN TUBE OR CENTRIFUGE STORE AT 4°C	SEND COOL	ST PAULS
APT TEST	FETAL HGB	STERILE ORANGE TOP CONTAINER	1 ML STOOL OR VOMITUS	BRING TO LAB WITHIN 30 MINS STORE AT ROOM TEMP	SEND AT ROOM TEMP	NH CHEM UHNBC ONLY
FOR FETAL HGB CONSULT PATHOLOGIST						
APTT	SEE PARTIAL THROMBOPLASTIN TIME (PTT)					
ARBOVIRUS ANTIBODY	PHLEBOVIRUS ANTIBODY FLAVIVIRUS DENGUE VIRUS YELLOW FEVER	SST (GOLD)	2 ML SERUM	MUST USE BCCDC ZOO NOTIC DISEASE REQUISITION SEE eLAB HANDBOOK FOR OTHER VIRUSES THAT MAY BE INCLUDED AND CONSULTATION INSTRUCTIONS IF REQUIRED COLLECT MIN 1 HR AFTER MEAL TO PREVENT LIPEMIA ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE STORE AT 4°C	SEND COOL TDG CAT B	BCCDC
ARIPIRAZOLE LEVEL	ABILIFY LEVEL	RED TOP NO GEL	2 ML SERUM	DRAW IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS INDICATE LAST DOSE DATE AND TIME STORE AT 4°C	SEND COOL	PROV TOX

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ARSENIC LEVEL URINE ORDER HOLD REF UNTIL BUILT IN CERNER	RANDOM URINE	STERILE ORANGE TOP CONTAINER OR	5 ML URINE 10 ML OPTIMAL	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS	SEND FROZEN	HIC
	24 HR URINE	24 HR URINE BOTTLE MUST BE METAL FREE	***** 24HR TOTAL URINE	PATIENT MUST AVOID SEAFOOD CONSUMPTION FOR 5 DAYS PRIOR TO SAMPLE COLLECTION INDICATE IF RANDOM OR 24HR URINE		
ARTERIAL BLOOD GAS	SEE BLOOD GAS, ARTERIAL					
ARYLSULPHATASE A LEVEL (WBC)	METACHROMATIC LEUKODYSTROPHY	LITHIUM HEPARIN (DARK GREEN)	3 ML WHOLE BLOOD	PRIOR CONSULTATION WITH BIOCHEMICAL GENETICIST IS ENCOURAGED PHONE 1-604-875-2307 PRIOR TO DRAWING SPECIMEN COLLECT A CONTROL SPECIMEN FROM A DIFFERENT PERSON AT THE SAME TIME	SEND AT ROOM TEMP MUST ARRIVE WITHIN 24 HOURS	BCCH
ASA	SEE SALICYLATE					
ASPERGILLUS PRECIPITINS	ASPERGILLUS ANTIBODY FARMERS LUNG PRECIPITINS ASPERGILLUS FUMIGATUS TEST FOR INVASIVE ASPERGILLOSIS	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE STORE AT 4°C SHIP TO VGH AND THEY WILL DIRECT TO CARLSTEN LAB	SEND COOL	VGH
ASPERGILLUS CULTURE	SEE FUNGAL CULTURE – BCCDC					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ASPARTATE AMINOTRANSFERASE	AST SGOT	PST (LT GREEN) OR SST (GOLD)	0.5 ML SERUM	AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: <ul style="list-style-type: none"> • HHHC • HHC • SHC • SKDT • FLDT • VLDT
AST, BODY FLUID	SEE BODY FLUID ANALYSIS					
AUTOIMMUNE LIVER PROFILE ORDER HOLD REF UNTIL BUILT IN CERNER NO LONGER MSP BILLABLE		SST (GOLD) OR RED TOP	1 ML SERUM	MUST USE MITOGEN AUTOANTIBODY REQUISITION CENTRIFUGE AND ALIQUOT SERUM FREEZE	SEND FROZEN	MADL
		CSF-STERILE TUBE	3 ML			
AVIAN LIPOPROTEIN A ***NOT THE SAME AS LIPOPROTEIN (a)***	APO A LIPO A LIPOPROTEIN A	SST (GOLD)	0.5 ML SERUM	ASSAY MAY HELP TO DETERMINE RISK OF ATHEROSCLEROSIS FASTING 12-14 HRS PREFERRED CENTRIFUGE AND ALIQUOT STORE AT 4°C DO NOT FREEZE	SEND COOL	ST PAULS
AVIAN PRECIPITINS ANTIBODY	THERMOPHILIC FUNGAL SEROLOGY IgG PRECIPITIN SCREEN	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE STORE AT 4°C SHIP TO VGH AND THEY WILL DIRECT TO CARLSTEN LAB	SEND COOL	VGH

NH LABORATORY SERVICES TEST DIRECTORY

B

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
1,3-BETA-D-GLUCAN	FUNGITELL ASSAY	SST (GOLD) ONLY	0.5 ML SERUM PEDIATRIC: 0.2 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE WITHIN 2 HOURS OF COLLECTION FREEZE ENTIRE TUBE DO NOT ALIQUOT	SEND FROZEN	HIC
B12	SEE VITAMIN B12					
BARBITURATES URINE SCREEN	SEE DRUG SCREEN, URINE					
BARBITURATES URINE QUANTITATIVE ***LAB ONLY***	URINE BARBITURATES QUANTITATIVE CONFIRMATION	ORANGE TOP CONTAINER	1 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR SCREENING SEE DRUG SCREEN, URINE						
BARTONELLA HENSELAE ANTIBODY	CAT SCRATCH DISEASE BARTONELLA IgG BARTONELLA ANTIBODY	SST (GOLD)	2 ML	DO NOT DRAW WITHIN AN HOUR AFTER A MEAL (AVOID LIPEMIC SAMPLES) CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
BARTONELLA SPECIES NAT ORDER HOLD REF FOR SAMPLES OTHER THAN TISSUE UNTIL BUILT IN CERNER	CAT SCRATCH DISEASE	EDTA (LAVENDER)	1 ML	SEE eLAB HANDBOOK FOR MORE DETAIL ON SPECIMEN TYPES COLLECT IN STERILE CONTAINER (DO NOT SUBMIT CSF IN A VACUTAINER TUBE) STORE AT 4°C	SEND AT ROOM TEMP	BCCDC
		CSF				
		FLUID				
		TISSUE				
		SWAB		MUST BE IN TRANSPORT MEDIA		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
B CELL CLONALITY GENETIC TEST ORDER HOLD REF UNTIL TEST BUILT IN CERNER	B CELL CLONALITY B- CLONALITY	EDTA (LAVENDER)	6 ML WHOLE BLOOD	MUST SEND BCCA GENETICS LABORATORY LYMPHOID TESTING REQUISITION STORE AT ROOM TEMP	SEND AT ROOM TEMP	BCCA
BCR-ABL1	BCR/ABL1 KINASE DOMAIN MUTATION CML KINASE DOMAIN MUTATION ALL KINASE DOMAIN MUTATION	4 x 7 ML EDTA (LAVENDER)	20 ML WHOLE BLOOD	COLLECT MON-THURS BEFORE NOON SEND SAME DAY AS COLLECTED MUST USE BCCA GENETICS LABORATORY LYMPHOID TESTING REQUISITION OR BCCA CANCER GENETICS LABORATORY MYELOID TESTING REQUISITION	SEND AT ROOM TEMP	BCCA
BENCE JONES PROTEIN	SEE ELECTROPHORESIS URINE					
BENZODIAZEPINE URINE QUANTITATIVE *** LAB ONLY***	BENZODIAZEPINE CONFIRMATION ALPRAZOLAM (XANAX)	ORANGE TOP CONTAINER	1 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR SCREENING SEE DRUG SCREEN, URINE						
BENZTROPINE LEVEL	NO LONGER AVAILABLE					
BETA 2 GLYCOPROTEIN	B2 GLYCOPROTEIN ANTIBODIES B2 GLYCOPROTEIN IgG/IgM	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH



NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BETA 2 MICROGLOBULIN TUMOUR MARKER	B2M	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCA
	B2M TUMOUR MARKER BETA 2 MICROGLOBULIN	ORANGE TOP CONTAINER	10 ML			
BETA 2 TRANSFERRIN	CSF LEAK	ORANGE TOP CONTAINER AND SST (GOLD) OR RED TOP	10µL FLUID (EAR OR NOSE) AND 1ML SERUM	ALLOW FLUID TO DRIP FROM EAR OR NOSE INTO CONTAINER (DON'T BLOW NOSE) CENTRIFUGE SST AND ALIQUOT FREEZE SAMPLES STAT DEDICATED SAMPLES	SEND FROZEN	ST PAULS
BETA-GALACTOCEREBROSIDASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	KRABBE DISEASE	903 WHATMAN BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	BGL Requisition 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke. 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight. 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available). 6. Store in 4°C fridge until shipping.	SEND ROOM TEMP	BCCH (BGL)
BETA-GLUCOSIDASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	GAUCHER DISEASE	903 WHATMAN BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	BGL Requisition 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke. 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight. 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available). 6. Store in 4°C fridge until shipping.	SEND ROOM TEMP	BCCH (BGL)

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BETA HUMAN CHORIONIC GONADOTROPIN QUALITATIVE URINE	URINE PREG TEST URINE BHCG BHCG QL	ORANGE TOP CONTAINER	1 ML URINE	FRESH MORNING SAMPLE PREFERRED	SEND COOL	ALL NH CHEM
BETA HUMAN CHORIONIC GONADOTROPIN QUANTITATIVE SERUM	BHCG QN	SST (GOLD) OR RED TOP	0.1 ML SERUM	CENTRIFUGE STORE 4°C	SEND COOL	NH CHEM ONLY: • GRB • MMH • FSJH • DCDH • BVDH • PRRH • UHNBC
BETA HUMAN CHORIONIC GONADOTROPIN TUMOUR MARKER	BHCG TUMOUR MARKER	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	VGH
BETA HYDROXYBUTYRATE	KETONES ACETONE SCREEN	PST/SST/RED	0.5 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
BICARBONATE	SEE CARBON DIOXIDE LEVEL					
BILE ACIDS ***FOR INVESTIGATION OF <u>INTRAHEPATIC CHOLESTASIS OF PREGNANCY</u> ONLY*** ***IF INVESTIGATING INTRAHEPATIC CHOLESTASIS OF CHILDHOOD, SEE URINE BILE ACIDS***	BILE SALTS	PST (LT GREEN) (PREFERRED) OR Li HEPARIN OR RED TOP (NO ADDITIVE)	0.5 ML SERUM OR PLASMA	FASTING (8 HRS) <u>PREFERRED</u> - INDICATE THE # HOURS SINCE LAST EATING ON THE REQ CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCH
BILE ACIDS, URINE CALL CW BIOCHEMICAL GENETICS LAB AT (604) 875-2307 FOR APPROVAL BY BIOCHEMICAL GENETICIST	BILE METABOLIC DEFECT BILE SYNTHESIS DEFECT	ORANGE TOP CONTAINER	2 ml FRESH MORNING SAMPLE	PATIENT MUST BE OFF URSO OR ACTIGALL FOR 6 DAYS PRIOR TO COLLECTION FREEZE	SEND FROZEN	BCCH (BGL)

NH LABORATORY SERVICES TEST DIRECTORY

BILE PIGMENTS	SEE BILIRUBIN TOTAL					
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BILIRUBIN, BODY FLUID	SEE BODY FLUID ANALYSIS					
BILIRUBIN DIRECT 	DBIL DIRECT BILIRUBIN	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.1 ML SERUM OR PLASMA	CENTRIFUGE STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: • HHHC • TRDT • HHC • MBDH • SHC • SKDT • FLDT • VLDT
BILIRUBIN TOTAL 	TBIL TOTAL BILIRUBIN	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.1 ML SERUM OR PLASMA	CENTRIFUGE STORE AT 4°C	SEND COOL	ALL NH CHEM EXCEPT: • HHHC • HHC • SHC • SKDT • FLDT • VLDT
BILIRUBIN URINE	NO LONGER AVAILABLE					
BIOCHEMICAL MARKERS PRENATAL SCREEN THERE ARE SEVERAL DIFFERENT TESTS THAT BCCH PERFORMS DEPENDING ON GESTATIONAL AGE THEY WILL DETERMINE THE CORRECT TEST TO RUN REGARDLESS OF WHAT IS ORDERED ON THE REQUISITION	SERUM INTEGRATED PRENATAL SCREEN (SIPS): • SIPS PART 1 • SIPS PART 2 QUAD SCREEN PRENATAL BIOCHEMICAL MARKER SCREEN	RED TOP OR SST (GOLD)	5 ML SERUM OPTIMAL 3 ML MIN	MUST USE PRENATAL BIOCHEMISTRY LABORATORY REQUISITION CENTRIFUGE AND ALIQUOT WITHIN 24 HRS OF COLLECTION FREEZE (CAN SEND COOL IF TESTED WITHIN 4 DAYS OF COLLECTION)	SEND FROZEN ON DRY ICE	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BIOTINIDASE		RED TOP NO ADDITIVE	1 ML SERUM	CENTRIFUGE AND ALIQUOT WITHIN 1 HR OF COLLECTION FREEZE	SEND FROZEN	BCCH
BK VIRUS VIRAL LOAD PEDIATRIC (<19 YRS) ORDER HOLD REF UNTIL BUILT	POLYOMAVIRUS VIRAL LOAD PED	RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C (STABLE FOR 7 DAYS)	SEND COOL	BCCH
FOR ADULTS SEE POLYOMAVIRUS VIRAL LOAD						
BLADDER STONES	SEE CALCULUS					
BLASTOMYCES ANTIBODY ORDER HOLD REF UNTIL BUILT IN CERNER	BLASTOMYCES DERMATITIDIS BLASTOMYCOSIS	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOOONOTIC DISEASE REQUISITION COLLECT MIN 1 HR AFTER A MEAL TO PREVENT LIPEMIA CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
BLASTOMYCES ANTIGEN APPROVAL REQUIRED- CONTACT DR. MORSHED 604-707-2622 SEE BCCDC ZOOONOTIC DISEASE REQUISITION ORDER HOLD REF UNTIL BUILT IN CERNER	BLASTOMYCES DERMATITIDIS BLASTOMYCOSIS	SST (GOLD)	2 ML SERUM	COLLECT ≥ 1 HR POST MEAL TO AVOID LIPEMIA CENTRIFUGE STORE AT 4°C	SEND COOL OR FROZEN	BCCDC
		CSF STERILE TUBE	1 ML CSF	STORE AT 4°C IF TRANSPORT < 2 DAYS OTHERWISE FREEZE		
		BAL- STERILE CONTAINER	1 ML FLUID			
		URINE STERILE CONTAINER	5 ML URINE			
BLEEDING TIME	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST		SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BLOOD ALCOHOL		SEE ETHANOL LEVEL					
BLOOD CULTURES		SEE CULTURE, BLOOD					
BLOOD CULTURE ENDOCARDITIS/ BRUCELLOSIS		SEE CULTURE, BLOOD					
BLOOD GAS	ARTERIAL	ABG ARTERIAL BLOOD GAS	HEPARINIZED SYRINGE	1 ML WHOLE BLOOD	COLLECTED BY RESPIRATORY	BRING TO RESP DEPT OR CHEM DEPT ASAP	UHNBC RESP DEPT & ALL NH CHEM
	CAPILLARY	CAPILLARY BLOOD GAS	HEPARINIZED CAPILLARY TUBE		COLLECTED BY RESPIRATORY		
	CORD, ARTERIAL	ABG CORD CORD ABG	HEPARINIZED SYRINGE	1 ML WHOLE BLOOD	COLLECTED BY WARD COLLECT IN PRE- HEPARINIZED SYRINGE PLACE ON ICE IMMEDIATELY	BRING TO CHEM DEPT ASAP	ALL NH CHEM EXCEPT: • HHC • SHC • FLDT
	CORD, VENOUS	VBG CORD CORD VBG	HEPARINIZED SYRINGE	1 ML WHOLE BLOOD	COLLECTED BY WARD COLLECT IN PRE- HEPARINIZED SYRINGE PLACE ON ICE IMMEDIATELY		
	VENOUS	VBG VENOUS BLOOD GAS	LITHIUM HEPARIN (DARK GREEN)	1 ML WHOLE BLOOD	COLLECT ON ICE IMMEDIATELY BRING TO LAB IMMEDIATELY		ALL NH CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BLOOD GROUP	SEE ABO/D TYPE					
BLOOD GROUP CBS LAB ORDERABLE ONLY	SEE PRENATAL BLOOD GROUP	EDTA (LAVENDER)	7 ML WHOLE BLOOD	2 x 7 ML EDTA TUBES PREFERRED STORE AT 4°C	SEND COOL	CBS
BLOOD SMEAR	SEE CBC					
BNP	SEE NT-BRAIN NATRIURETIC PEPTIDES					
BODY FLUID ANALYSIS	<u>FLUID TESTS:</u> <ul style="list-style-type: none"> CELL COUNT CELL COUNT W/DIFF 	EDTA (LAVENDER)	0.5 – 1.0 ML FLUID	IMMEDIATELY DELIVER ALL FLUID CONTAINERS TO LAB AND HAND TO A TECHNOLOGIST DO NOT REFRIGERATE PRIOR TO TESTING STORE AT 4°C POST TESTING	SHIP AS PER EACH TEST	HEM & CHEM
FOR CSF – SEE CEREBROSPINAL FLUID ANALYSIS	<u>FLUID TYPES:</u> <ul style="list-style-type: none"> PERITONEAL FLUID PLEURAL FLUID PERICARDIAL FLUID DIALYSATE FLUID SYNOVIAL FLUID 					
BODY FLUID CHEMISTRY	<u>AVAILABLE TESTS:</u> <ul style="list-style-type: none"> ALBUMIN AMYLASE BILIRUBIN CHOLESTEROL CREATININE GLUCOSE LDH LACTATE LIPASE PROTEIN TRIG URATE 	ORANGE TOPPED STERILE CONTAINER	1 ML FLUID	IMMEDIATELY DELIVER ALL FLUID CONTAINERS TO LAB AND HAND TO A TECHNOLOGIST DO NOT REFRIGERATE PRIOR TO TESTING ALIQUOT FLUID FROM ORANGE TOP CONTAINER AND CENTRIFUGE STORE AT 4°C POST TESTING	SEND ROOM TEMP	HEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BODY FLUID CRYSTALS	BF CRYSTALS	EDTA (LAVENDER)	0.5 ML FLUID	IMMEDIATELY DELIVER ALL FLUID CONTAINERS TO LAB AND HAND TO A TECHNOLOGIST DO NOT REFRIGERATE PRIOR TO TESTING STORE AT 4°C POST TESTING	SEND ROOM TEMP	NH HEM ONLY: • FSJH • UHNBC
	BF CRYSTALS REFERRAL			STORE AT RT		KGH
BODY FLUID PH	SEE pH BODY FLUID					
BONE MARROW REQUEST UHNBC		SEE BONE MARROW PROCESS FOR ALL COLLECTION DETAILS		FOR CYTOGENETICS AND FLOW CYTOMETRY SPECIMENS SEE INDIVIDUAL TESTS FOR COLLECTION AND TRANSPORTATION		HEM
BONE MARROW REQUEST REFERRAL				ORDERED BY REGIONAL LAB ONLY SEND BIOPSY, MARROW SLIDES, EXCESS ASPIRATE, CBC RESULTS, PERIPHERAL BLOOD SLIDES (UNSTAINED & UNFIXED)	SEND ROOM TEMP	HEM
BORDETELLA PERTUSSIS CULTURE	BORDETELLA NAT PERTUSSIS CULTURE WHOOPING COUGH WHOOPING COUGH NAT	NASOPHARYNGEAL (PERNASAL) SWAB- (AMIES CHARCOAL TRANSPORT MEDIUM SWAB) OR VIRAL SWAB		COLLECT NP SWAB OR NPW SAMPES AS PER PERTUSSIS SPECIMEN COLLECTION KIT INSTRUCTIONS REFRIGERATE AS SOON AS POSSIBLE STORE 4°C	SEND COOL SHIP SAME DAY	BCCDC
BORRELIA BURGDORFERI SEROLOGY	SEE LYME ANTIBODY					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
BREAST CANCER SUSCEPTIBILITY GENE 1	BRCA-1 BREAST CANCER GENE 1			PATIENT MUST BE ENROLLED IN THE HEREDITARY CANCER PROGRAM. PHYSICIAN TO FILL OUT AND SEND THE HCP REFERRAL FORM		BCCA
BROMAZEPAM LEVEL	NO LONGER AVAILABLE					
BROMPHENIRAMINE LEVEL	NO LONGER AVAILABLE					
BRONCHIAL ASPIRATIONS/ BRUSHINGS FOR CYTOLOGY	SEE CYTOLOGY SEE PRESERVATIVE TABLE					
BRUCELLA ANTIBODY SCREEN	BRUCELLOSIS UNDULANT FEVER	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOONOTIC DISEASE REQUISITION COLLECT MIN 1 HR AFTER A MEAL TO PREVENT LIPEMIA ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE DO NOT NEED TO ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
BUN	SEE UREA					
BUPRENORPHINE	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
C1 ESTERASE INHIBITOR	FUNCTIONAL C1 INHIBITOR	SODIUM CITRATE (LIGHT BLUE)	1 ML PLASMA	FILL TUBE COMPLETELY CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
C1 ESTERASE INHIBITOR BLOOD PRODUCT FOR TRANSFUSION				SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION. SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
C1Q BINDING	CIRCULATING IMMUNE COMPLEX RAJI CELL ASSAY	SST (GOLD) OR RED TOP	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
C2, C5, C6, C7, C8, C9 COMPLEMENT	SEE COMPLEMENT					
C3 COMPLEMENT	C3	SST (GOLD) OR RST (ORANGE)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	CHEM
C4 COMPLEMENT	C4	SST (GOLD) OR RST (ORANGE)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	CHEM
CA 125	CANCER ANTIGEN 125	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCA

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CA 15-3	CANCER ANTIGEN 15-3	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCA
CA 19-9	CANCER ANTIGEN 19-9	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCA
CA 27-29	CANCER ANTIGEN 27-29	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCA
CADMIUM LEVEL		NAVY BLUE (K2 EDTA)	2 ML WHOLE BLOOD	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING DO NOT OPEN TUBE DO NOT SPIN SEND WHOLE BLOOD AT 4°C	SEND COOL	HIC
CAFFEINE LEVEL		Li HEP (DARK GREEN) NO SST	1 ML PLASMA	COLLECT 0-4 HR PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	HIC
CALCIFEROL	25 HYDROXYCHOLECALCIFEROL VITAMIN D 25 HYDROXY VITAMIN D	RED TOP OR MICROTAINER (FOR PEDS) NO ADDITIVE	1 ML 0.5 ML PEDS	MSP PAYBALE ONLY IN PEDS (<19 YRS) WHEN REQUESTED BY A SPECIALIST SEE LAB SERVICES PAYMENT SCHEDULE CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCH
CALCITONIN LEVEL		RED TOP	1 ML SERUM	DEDICATED SAMPLE- NO ADD ONS COLLECT ON ICE CENTRIFUGE 4°C AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CALCIUM/ CREATININE RATIO URINE	CA:CR RATIO NOT TO BE CONFUSED WITH ALB/CREAT RATIO	ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CALCIUM LEVEL, 24 HOUR URINE	24 HR URINE CALCIUM	24 HR URINE BOTTLE	5 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTION ADJUST FINAL pH TO 3-4 WITH 6N HCL CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CALCIUM LEVEL IONIZED	IONIZED CALCIUM	SST (GOLD)	FILL SST TUBE UNTIL VACUUM IS EXHAUSTED (ACCEPT TUBE IF >1/2 FULL) 3 ML IN 5.0 ML GOLD TUBE OR 2 ML IN 3.5 ML GOLD TUBE	TOURNIQUET APPLICATION MUST BE BRIEF WITH NO HAND PUMPING DRAW A DEDICATED TUBE FOR IONIZED CALCIUM PUT TAPE ON THE CAP TO ALERT ACCESSIONING STAFF KEEP SAMPLE AT ROOM TEMP PRIOR TO CENTRIFUGATION DO NOT OPEN (ANAEROBIC SPECIMEN REQUIRED) SAMPLE SHOULD BE SPUN AFTER 30 MINS AND WITHIN 1 HOUR OF COLLECTION CENTRIFUGE AT 4°C AND KEPT AT 4°C UNTIL ANALYSIS INSPECT TO ENSURE COMPLETE SEPARATION OF CELLS AND SERUM BY GEL	SEND COOL DEDICATED UNOPENED TUBE	CHEM
CALCIUM LEVEL TOTAL	CA LEVEL	PST (LT GREEN) OR SST (GOLD) OR RED TOP	1 ML SERUM OR PLASMA	TOURNIQUET APPLICATION MUST BE BRIEF NO HAND PUMPING AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM


NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CALCIUM LEVEL URINE	URINE CALCIUM LEVEL	ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CALCULUS , REFERRED OUT	RENAL STONE BLADDER STONES RENAL CALCULI	ORANGE TOP CONTAINER NO FIXATIVES		STORE AT ROOM TEMP	SEND AT ROOM TEMP	VGH
CALPROTECTIN, FECAL	FECAL CALPRO fCAL	ORANGE TOP CONTAINER STERILE NO ADDITIVE	10 GRAMS (APPROX 2 TBSP)	FOR PATIENTS >18 YEARS SEE LIFELABS TEST GUIDELINE- FCALP REQUISITION MUST STATE IBD AS FOR DIAGNOSIS FOR PATIENT TO QUALIFY FOR MSP COVERAGE SELF PAY TEST FOR ANY OTHER PATIENTS TO BE COLLECTED UPON RECEIPT OF SAMPLE	SEND FROZEN	LIFELABS
CALPROTECTIN, FECAL PEDIATRIC			5 GRAMS	FOR PEDIATRIC PATIENTS <18 YEARS MUST INDICATE THAT PATIENT HAS AN EXISTING DIAGNOSIS FOR MSP COVERAGE. SELF PAY TEST FOR ANY OTHER PATIENTS TO BE COLLECTED UPON RECEIPT OF SAMPLE STORE AT 4°C IF RECEIVED <3DAYS OTHERWISE FREEZE	SEND COOL OR FROZEN	BCCH
CANDIDA ANTIBODY	SEE ALLERGEN SPECIFIC IGE ANTIBODY					
CANNABINOIDS URINE QUANTITATIVE ***LAB ONLY***	CANNABINOIDS CONFIRMATION THC CONFIRMATION	ORANGE TOP CONTAINER	50 ML	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR CANNABINOIDS SCREEN SEE DRUG SCREEN, URINE						

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CARBAMAZEPINE LEVEL	TEGRETOL LEVEL	RED TOP OR RST (ORANGE) NO SST	1 ML SERUM	DOSAGE STABLE FOR 6 DAYS COLLECT IMMEDIATELY BEFORE NEXT DOSE OR AT LEAST 6 HOURS POST DOSE INDICATE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT (RED TOP) STORE AT 4°C	SEND COOL	CHEM
CARBAPENEMASE PRODUCING ORGANISM	CPO	STARSWAB II	N/A	INSERT TIP OF SWAB INTO RECTUM AND PLACE BACK INTO TRANSPORT MEDIA	ROOM TEMP	MICRO
CARBON DIOXIDE LEVEL	BICARB CO2 HCO3	PST (LT GREEN) OR SST (GOLD) OR RED TOP	1 ML SERUM OR PLASMA	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CARBOXY TERMINAL TELOPEPTIDE NOT COVERED BY MSP	C TELOPEPTIDE C-TERMINAL TELOPEPTIDE CTX	SST (GOLD)	2 ML	PATIENT MUST BE FASTING 8-10 HRS LET CLOT FOR 30 MINS CENTRIFUGE AND ALIQUOT INTO BD NON-ADDITIVE VACUTAINER FREEZE	SEND FROZEN	LIFELABS
CARBOXYHEMOGLOBIN LEVEL	CARBON MONOXIDE LEVEL COHB	LITHIUM HEPARIN (DARK GREEN)	3-4 ML WHOLE BLOOD	COLLECT ON ICE DO NOT OPEN DO NOT CENTRIFUGE DELIVER IMMEDIATELY TO LAB SEND WHOLE BLOOD STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CARCINOEMBRYONIC ANTIGEN	CEA LEVEL	SST (GOLD)	1 ML SERUM	MUST USE PHSA TUMOR MARKER REQ CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCA
CARDIOLIPIN ANTIBODY SCREEN ***NOT LUPUS ANTICOAGULANT***	ACA ANTI CARDIOLIPIN ANTIBODY (IgG & IgM)	SST (GOLD)	1 ML SERUM	SCREEN INCLUDES IgG & IgM CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
CARNITINE OFTEN ORDERED WITH ACYLCARNITINE		RED TOP NO ADDITIVE NO SST	0.5 ML SERUM	IF ACYLCARNITINE ORDERED, SEND BLOOD DOT CARD WITH CARNITINE SPECIMEN CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH
CAROTENE LEVEL 	BETA-CAROTENE	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
CATECHOLAMINES RANDOM URINE **24 HR URINE TEST PREFERRED**	URINE CATECHOLAMINE RANDOM CATECHOLAMINE INCLUDES: <ul style="list-style-type: none"> DOPAMINE EPINEPHRINE NOREPINEPHRINE ADRENALINE NO LONGER OFFERED	ORANGE TOP CONTAINER NO PRESERVATIVE	150 ML URINE	DO NOT DELAY PROCESSING ALIQUOT INTO TO 12 X 75ML TUBES (FILL TO 2/3 FULL AND FREEZE IMMEDIATELY) ALTERNATIVELY ALIQUOT INTO 2 ORANGE TOP STERILE CONTAINERS (APPROX 50-75 ML IN EACH) THAWED/PARTIALLY THAWED SAMPLES WILL BE REJECTED	SEND FROZEN	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CATECHOLAMINES TOTAL	PLASMA CATECHOLAMINES <u>INCLUDES:</u> <ul style="list-style-type: none"> DOPAMINE EPINEPHRINE NOREPINEPHRINE ADRENALINE NO LONGER OFFERED	EDTA (LAVENDER)	5.0 ML PLASMA PREFERRED 2 ML MIN	FASTING SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING PATIENT MUST BE SUPINE FOR 30 MINS PRIOR TO AND DURING COLLECTION COLLECT 2 PRECHILLED 7.0 ML EDTA (LAVENDER) TUBES CENTRIFUGE @ 4°C AND ALIQUOT WITHIN 60 MINS OF COLLECTION FREEZE IMMEDIATELY	SEND FROZEN ON ICE	HIC
CATECHOLAMINES TOTAL 24 HOUR URINE	<u>INCLUDES:</u> <ul style="list-style-type: none"> DOPAMINE EPINEPHRINE NOREPINEPHRINE ADRENALINE NO LONGER OFFERED	24 HR URINE CONTAINER NO PRESERVATIVE	150 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INCLUDE 24 HOUR URINE VOLUME AND URINE CREATININE RESULT KEEP URINE REFRIGERATED DURING COLLECTION DO NOT DELAY PROCESSING ALIQUOT INTO TO 12 X 75ML TUBES (FILL TO 2/3 FULL) AND FREEZE IMMEDIATELY ALTERNATIVELY ALIQUOT INTO 2 ORANGE TOP STERILE CONTAINERS (APPROX 50-75 ML IN EACH) THAWED/PARTIALLY THAWED SAMPLES WILL BE REJECTED IF 24 HR URINE METANEPHRINES ORDERED CONCURRENTLY ONLY ONE SAMPLE OF 2 ALIQUOTS IS REQUIRED	SEND FROZEN	VGH
CBC W/ DIFF	COMPLETE BLOOD COUNT CBC WITH AUTOMATED DIFFERENTIAL	EDTA (LAVENDER)	1 ML WHOLE BLOOD	MANUAL DIFFERENTIAL PERFORMED IF ABNORMAL CRITERIA MET PERIPHERAL SMEAR PERFORMED IF ABNORMAL CRITERIA MET DO NOT SPIN STORE AT 4°C	SEND COOL	HEM
CLOSTRIDIUM BOTULINUM-TOXIN DETECTION, CULTURE AND TYPING	SERUM (TOXIN AND TYPING ONLY)	SST (GOLD)	ADULTS/CHILD: 10 ML INFANTS: 3 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL ON ICE ASAP	BCCDC
	FECES (INFANTS SEND POOLED ENEMA)	STERILE CONTAINER	25 G	STORE AT 4°C		

NH LABORATORY SERVICES TEST DIRECTORY

ORDER HOLD REF UNTIL BUILT MUST CONSULT MEDICAL MICROBIOLOGIST 604-767-3618 OR ON	VOMITUS/STOMACH CONTENTS	STERILE CONTAINER	100 ML	SEND PROMPTLY		
	FOOD REMNANTS	STERILE CONTAINER	200 G			

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CLOSTRIDIUM DIFFICILE	C. DIFFICILE C. DIFF C. DIFF TOXIN CDT	ORANGE TOP CONTAINER	5.0 ML STOOL	STOOL MUST BE LIQUID FORMED STOOL WILL BE REJECTED REFRIGERATE IMMEDIATELY AFTER COLLECTION STORE AT 4°C	SEND COOL	MICRO
SEE CLOSTRIDIUM DIFFICILE TOXIN STOOL NAAT FOR C. DIFF SPECIMENS TO BE SENT FOR CONFIRMATORY TESTING						
CLOSTRIDIUM DIFFICILE TOXIN STOOL NAAT ***LAB ONLY***		ORANGE TOP CONTAINER		ORDERED BY MICROBIOLOGY STAFF ONLY STORE AT 4°C	SEND COOL	UHNBC MICRO
CD4/CD8 PEDIATRIC ORDER HOLD REF UNTIL BUILT	CD4/CD8 RATIO PED T & B LYMPHOCYTES PEDIATRIC IMMUNOPHENOTYPING PEDIATRIC	EDTA (LAVENDER)	1 ML WHOLE BLOOD	STAT TEST - SENSURE STAT IS MARKED ON THE TRANSPORT CONTAINER MUST BE RECEIVED AND PROCESSED BY BCCH WITHIN 30 HOURS OF COLLECTION	SEND ROOM TEMP	BCCH
CELL COUNT W/ DIFF (BODY FLUID)	SEE BODY FLUID ANALYSIS					
CENTROMERE ANTIBODY SCREEN	NO LONGER AVAILABLE					
	REFLEXED AS PART OF NUCLEAR ANTIBODY SCREEN					

NH LABORATORY SERVICES TEST DIRECTORY

CERVICAL SMEARS	PAP SMEAR	BLUE SLIDE CONTAINER		NOT ORDERED IN CERNER COLLECTED BY WARD LABEL SLIDES CLEARLY WRAP REQUISITION AROUND BLUE SLIDE CONTAINER		BCCA
CERULOPLASMIN		SST (GOLD) OR PST (LIGHT GREEN)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	VGH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CEREBROSPINAL FLUID (CSF) ANALYSIS ****PHYSICIAN TO PRIORITIZE TESTS WHEN LESS THAN MINIMAL VOLUME COLLECTED****	CSF TESTS: <ul style="list-style-type: none"> CELL COUNT & DIFF GLUCOSE LACTIC ACID PROTEIN GRAM STAIN & CULTURE- ORDER CSF CULTURE	STERILE TUBES FROM LUMBAR PUNCTURE TRAY	4 ML CSF (MIN 1 ML CSF IN EACH OF 4 TUBES)	COLLECTION DONE BY MEDICAL STAFF COLLECT CSF IN SEQUENTIAL ORDER INTO 4 STERILE CSF TUBES PROVIDED IN THE CSF COLLECTION KITS DELIVER TO LAB IMMEDIATELY AND HAND SPECIMENS TO A LAB TECHNOLOGIST DO NOT REFRIGERATE PRIOR TO TESTING TUBE #1: CHEMISTRY (1.0ML) TUBE#2: VIROLOGY (1.0 ML) INDICATE SPECIFIC VIRUS ON BCCDC VIROLOGY REQ TUBE #3: MICROBIOLOGY OR CRYPTOCCUS OR MENINGOCOCCUS (1.0 ML) TUBE 4: HEMATOLOGY (1.0 ML) **ONLY 3 TUBES SUBMITTED: TUBE 1: CHEMISTRY TUBE 2: MICROBIOLOGY TUBE 3: HEMATOLOGY	SHIP AS PER INDIVIDUAL TEST	HEM & CHEM
	FUNGAL CULTURE SEE FUNGAL CULTURE BCCDC CRYPTOCOCCUS SEE CRYPTOCCAL ANTIGEN CSF HERPES PCR (HSV) SEE HERPES SIMPLEX VIRUS 1 AND 2 NAT TB CULTURE SEE MYCOBACTERIA CULTURE SYPHILIS/VDRL SEE CSF SYPHILIS					BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

	TOXOPLASMOSIS ORDER <i>TOXOPLASMA</i> <i>ANTIBODY (MUST SEND</i> <i>SST ALSO)</i>			SEE BCCDC ZOO NOTIC REQUISITION MUST INCLUDE BLOOD SAMPLE (SST)		
	NEISSERIA/MENING- OCOCCAL CULTURE SEE <i>NEISSERIA</i> <i>MENINGITIDIS CSF</i>					BCCH
	OLIGOCLONAL SEE <i>OLIGOCLONAL</i> <i>BANDS</i>			OLIGOCLONAL BANDING REQUIRES SERUM (SST) TO BE SENT AS WELL		VGH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CH50	SEE COMPLEMENT					
CHLAMYDIA ANTIBODY	NO LONGER AVAILABLE					
CHLAMYDIA/ GONORRHEA	CX CHLAM/GC NAAT	APTIMA UNISEX COLLECTION KIT		COLLECTIONS FROM EYE AND OTHER NON GENITAL SITES WILL BE PROCESSED AND REPORTED WITH A DISCLAIMER: "This nucleic acid method has not been fully validated for detection of Chlamydia trachomatis and Neisseria gonorrhoeae from non- genital sites or in swab samples from children less than 16 years of age" IF REQUESTED WITH LYMPOGRANULOMA VENEREUM (LGV) PLEASE SEND DIRECTLY TO BCCDC (SEE LGV)	2-30°C STABLE FOR 60 DAYS	MICRO
	VAG CHLAM/GC NAAT	APTIMA VAG COLLECTION KIT				

NH LABORATORY SERVICES TEST DIRECTORY

CHLAMYDIA/ GONORRHEA, URINE	CHLAM/GC URINE NAAT	APTIMA URINE COLLECTION KIT	INITIAL STREAM URINE 20-30 MLS	<p>PATIENT MUST NOT VOID FOR AT LEAST ONE HOUR PRIOR TO COLLECTION</p> <p>PATIENT SHOULD COLLECT THE FIRST 20 – 30 ML OF VOIDED URINE ONLY INTO STERILE ORANGE TOP CONTAINER</p> <p>SHOULD NOT BE MIDSTREAM URINE</p> <p>FEMALE PATIENTS SHOULD NOT CLEANSE LABIAL AREA PRIOR TO COLLECTION</p> <p>TRANSFER 2ML TO THE APTIMA URINE COLLECTION TUBE WITHIN 24 HRS OF COLLECTION</p> <p>COLLECT A SEPARATE SAMPLE FOR URINALYSIS OR CULTURE</p>	2-30°C STABLE FOR 30 DAYS	MICRO
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CHLORAMPHENICOL LEVEL USUALLY TROUGH LEVEL	CHLOROMYCETIN LEVEL	RED TOP	1 ML SERUM	DO NOT COLLECT IN SST INDICATE DATE/TIME OF LAST DOSE ALLOW TO CLOT FOR 1 HOUR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	LIFELABS
CHLORIDE LEVEL	CL	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CHLORIDE LEVEL, BODY FLUID	SEE BODY FLUID ANALYSIS					

NH LABORATORY SERVICES TEST DIRECTORY

CHLORIDE LEVEL URINE		ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CHLORIDE LEVEL - 24 HOUR URINE	24 HOUR CHLORIDE LEVEL 24 HOUR URINE CL	24 HR URINE CONTAINER	5 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CHLORIDE SWEAT TEST	SWEAT CHLORIDE TEST			COLLECTED BY LABORATORY PERSONNEL BOOK THROUGH CHEMISTRY DEPT LOC. 2431		CHEM
CHOLESTEROL BODY FLUID	SEE BODY FLUID ANALYSIS					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CHOLESTEROL TOTAL	TOTAL CHOLESTEROL	SST (GOLD) OR RED TOP	0.5 ML SERUM	FASTING NOT REQUIRED UNLESS SPECIFICALLY REQUESTED BY PHYSICIAN CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CHOLINESTERASE	PSEUDO-CHOLINESTERASE DIBUCAINE NUMBER FLUORIDE NUMBER	SST (GOLD)	1 ML SERUM	HISTORY OF PATIENT IS REQUIRED CENTRIFUGE COLD AND ALIQUOT SERUM/PLASMA FREEZE SEND TO ROYAL COLUMBIAN HOSPITAL LAB	SEND FROZEN	RCH

NH LABORATORY SERVICES TEST DIRECTORY

CHROMIUM LEVEL		BD ROYAL BLUE NON-ADDITIVE (# 368380)	1 ML SERUM	CENTRIFUGE WITHIN 2 HOURS OF COLLECTION ALIUOT TO STARSTEDT METAL FREE PASTIC SCREW CAP TUBE STORE AT 4°C	SEND COOL	U OF A
CHROMOGRANIN A		SST (GOLD)	0.5 ML SERUM	MUST USE BCCA TUMOUR MARKER REQUISITION CENTRIFUGE AND ALIUOT FREEZE	SEND FROZEN	BCCA
CHROMOSOMES	SEE CYTOGENETICS					
CHYLOMICRONS		SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIUOT STORE AT 4°C	SEND COOL	VGH
CHYLOMICRONS BODY FLUID		ORANGE TOP CONTAINER	1 ML BODY FLUID			

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CINH	SEE COAGULATION INHIBITOR SCREEN					
CITRATE LEVEL, 24 HOUR URINE	24 HOUR URINE CITRATE LEVEL URINE 24 HOUR URINE CITRATE LEVEL	24 HR URINE CONTAINER	20 ML URINE ALIUOT	REFRIGERATE SAMPLE DURING COLLECTION FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ADJUST FINAL PH TO ≤ 7.0 SAMPLE UNACCEPTABLE IF PH >7.0 FREEZE	SEND FROZEN	VGH

NH LABORATORY SERVICES TEST DIRECTORY

C-KIT MUTATION		2 x 7.0 ML EDTA (LAVENDER)	14 ML WHOLE BLOOD	MUST USE BCCA CANCER GENETICS MYELOID REQUISITION COLLECT MON-THURS BEFORE NOON SEND SAME DAY AS COLLECTION	SEND AT ROOM TEMP	BCCA
		PARAFFIN BLOCK/SOLID TUMOR		MUST USE BCCA CANCER GENETICS SOLID TUMOUR REQUEST FORM- MOLECULAR		
CK, BODY FLUID	SEE BODY FLUID ANALYSIS					
CK, SERUM	SEE CREATINE KINASE					
CKMB	NO LONGER AVAILABLE ORDER TROPONIN					
CLOBAZAM LEVEL	FRISIUM URBANYL	RED TOP NO SST	2 ML SERUM	DRAW SAMPLE JUST PRIOR TO NEXT DOSE NOTE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CLOMIPRAMINE LEVEL	ANAFRANIL LEVEL	RED TOP NO SST	1 ML SERUM	REQ MUST INDICATE THE TRICYCLIC PATIENT IS TAKING DRAW SAMPLE JUST PRIOR TO NEXT DOSE NOTE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

CLOZAPINE LEVEL	CLOZARIL	RED TOP NO SST	2 ML SERUM	DRAW SAMPLE JUST PRIOR TO NEXT DOSE NOTE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	LIFELABS BURNABY
CML KINASE DOMAIN MUTATION	SEE BCR-ABL1					
COMPLETE METABOLIC PANEL **LAB ORDER ONLY**	CMP		AS PER SPECIFIC TEST	INCLUDES: <ul style="list-style-type: none"> • E7 • AST • ALT • ALK • LD • CALCIUM • PO4 • ALBUMIN • PROTEIN • GLOBULIN • URATE 	AS PER SPECIFIC TEST	CHEM
CMV	SEE CYTOMEGALOVIRUS					
COAGULATION INHIBITOR SCREEN (INCLUDES INR & PTT)	CINH MIXING STUDY CIRCULATING ANTICOAGULANT	NA CITRATE (LIGHT BLUE) FILL TUBE COMPLETELY	4.5 ML WHOLE BLOOD NO CAPILLARY SAMPLES	PATIENT CANNOT BE ON ANY ANTICOAGULANTS PRIOR TO TEST IF HCT >0.55 ADJUST ANTICOAGULANT IN TUBE PRIOR TO COLLECTION DELIVER TO LAB WITHIN 30 MINS OF COLLECTION CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION SEND INR & PTT RESULTS	SEND FROZEN ON DRY ICE	HEM
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
COBALT LEVEL		NAVY BLUE (EDTA) Greiner Bio- One VACUETTE® brand	6ML WHOLE BLOOD	SEE AHS CHEMISTRY REQ USE POWDER FREE GLOVES DURING COLLECTION IF COLLECTING MULTIPLE TUBES, COLLECT FIRST DO NOT CENTRIFUGE	SEND COOL	U OF A
COCAINE LEVEL		RED TOP	2 ML SERUM	CENTRIFUGE AND ALIQUOT	SEND COOL	

NH LABORATORY SERVICES TEST DIRECTORY

FOR SCREENING ORDER DRUG SCREEN, URINE		NO SST		STORE AT 4°C		PROV TOX LAB
COCAINE LEVEL, PEDIATRIC		RED TOP NO SST	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCH
FOR SCREENING ORDER DRUG SCREEN, URINE						
COCAINE, URINE QUANTITATIVE ***LAB ONLY***	COCAINE CONFIRMATION	ORANGE TOP CONTAINER	50 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR SCREEN ORDER DRUG SCREEN, URINE						
COCCIDIOIDES ANTIBODY	COCCIDIOIDES IMMITIS	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOO NOTIC DISEASE REQUISITION	SEND COOL	BCCDC
	VALLEY FEVER COCCIDIODOMYCOSIS	CSF	2 ML	CENTRIFUGE STORE 4°C		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
COLD AGGLUTININ SCREEN REFERRAL	CAS COLD AGGLUTININS	RED TOP AND EDTA (LAVENDER) NO SST	2 ML SERUM & 0.5 ML WHOLE BLOOD	<u>COLLECT WARM:</u> <ul style="list-style-type: none"> PRE-WARM TUBES TO 37°C KEEP ALL TUBES AT 37°C BRING TO LAB IMMEDIATELY PLACE IN 37°C WATERBATH FOR 30-60 MINS CENTRIFUGE AND ALIQUOT RED TOP AND FREEZE INDICATE PROCESSED AT 37°C ON THE ALIQUOT TUBE STORE EDTA AT 4°C 	SEND EDTA COOL SEND SERUM ALIQUOT FROZEN	ST PAULS
FOR PNEUMONIA REFER TO MYCOPLASMA SEROLOGY						
COMPLEMENT C3 & C4	SEE C3, C4 COMPLEMENT					
COMPLEMENT C1Q LEVEL	C1BQ C1Q BINDING CIRCULATING IMMUNE COMPLEXES	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
COMPLEMENT TOTAL	ORDER COMPLEMENT CLASSICAL CLASSICAL PATHWAY COMPLEMENT TOTAL CH10/CH100/CH50 CLASSICAL	RED TOP	1 ML SERUM	INSTRUCTIONS: <ul style="list-style-type: none"> ALLOW TO CLOT AT ROOM TEMP FOR 60 MINS CENTRIFUGE @ 4°C FOR 10 MINS (IF AVAILABLE) ALIQUOT FREEZE IMMEDIATELY 	SEND FROZEN ON DRY ICE	VGH
	ORDER COMPLEMENT ALTERNATIVE ALTERNATIVE PATHWAY CH10/CH100/CH50 ALTERNATIVE					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

COPPER LEVEL		NAVY BLUE (NO ADDITIVE) OR NAVY BLUE (K2 EDTA)	2 ML SERUM	MAINTAIN TUBE IN AN UPRIGHT POSITION TO AVOID CONTAMINATION WITH STOPPER TRANSPORT TO LAB WITHIN 1 HOUR CENTRIFUGE AND ALIQUOT INTO A FALCON ROUND-BOTTOM POLYPROPYLENE TUBE USING A STERILE PIPETTE STORE AT 4°C IF SHIPPING SAME DAY AS COLLECTION STORE AT 4°C IF NOT SHIPPING SAME DAY AS COLLECTION FREEZE	SEND COOL IF SAME DAY SEND FROZEN IF NOT SAME DAY	VGH
COPPER LEVEL, PEDIATRIC		NAVY BLUE (NO ADDITIVE)	1 ML SERUM	MAINTAIN TUBE IN AN UPRIGHT POSITION TO AVOID CONTAMINATION WITH STOPPER TRANSPORT TO LAB WITHIN 1 HR CENTRIFUGE AND ALIQUOT INTO A FALCON ROUND-BOTTOM POLYPROPYLENE TUBE USING A STERILE PIPETTE STORE AT 4°C IF SHIPPING SAME DAY AS COLLECTION STORE AT 4°C IF NOT SHIPPING SAME DAY AS COLLECTION FREEZE SERUM	SEND COOL IF SAME DAY SEND FROZEN IF NOT SAME DAY	BCCH
COPPER LEVEL, 24 HOUR URINE (ADULT & PEDIATRIC)	URINE 24 HOUR COPPER LEVEL	24 HR URINE CONTAINER	20 ML URINE ALIQUOT *orange top sterile container only	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INDICATE TOTAL URINE VOL RANDOM SPECIMENS ARE NOT ACCEPTED STORE AT 4°C MUST ARRIVE AT BCCH NEXT DAY AFTER COLLECTION	SEND COOL	BCCH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

CORTISOL 24 HOUR URINE (ADULT & PEDIATRIC)	24 HOUR URINE CORTISOL FREE	24 HR URINE CONTAINER	50 ML URINE ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS CENTRIFUGE NO PRESERVATIVES REQUIRED FREEZE URINE	SEND FROZEN	VGH
CORTISOL LEVEL	RANDOM CORTISOL	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE STORE AT 4°C ORDER HOLD REF TO ST. PAUL'S LAB FOR CORTISOL ANALYSIS FOR SPECIAL CASES WHERE SERUM CORTISOL RESULTS MAY BE IN QUESTION DUE TO PHYSIOLOGICAL INTERFERENCES OR PRESENCE OF HIGH DOSES OF STEROIDS	SEND COOL	CHEM
CORTISOL AM (0700-0900)	AM CORTISOL	SST (GOLD)	0.5 ML SERUM	DRAW SAMPLE BETWEEN 0700-0900 CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CORTISOL PM (1500-1700)	PM CORTISOL	SST (GOLD)	0.5 ML SERUM	DRAW SAMPLE BETWEEN 1500-1700 CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CORTISOL, SALIVARY		SALIVETTES FROM SARSTEDT #51.1534		CONTACT VGH CHEMISTRY ACCESSIONING FOR COLLECTION TUBES AND PROTOCOL	SEND COOL	VGH
CORTROSYN STIMULATION	SEE ACTH STIMULATION					
COSYNTROPIN STIMULATION	SEE ACTH STIMULATION					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
COTININE URINE	NICOTINE METABOLITE	ORANGE TOP CONTAINER	20 ML URINE	COLLECT RANDOM URINE	SEND COOL	VGH
COVID-19 CORONAVIRUS NAAT		VIRAL UTM SWAB LOWER RESPIRATORY SALINE GARGLE		REFER TO THE LATEST COVID INFO ON OurNH FOR COLLECTION REQUIREMENTS: COVID-19 STORE AT 4°C	SEND COOL TDG CAT B	UHNBC
COVID-19 CORONAVIRUS NAAT FUSION		VIRAL UTM SWAB LOWER RESPIRATORY SALINE GARGLE		REFER TO THE LATEST COVID INFO ON OurNH FOR COLLECTION REQUIREMENTS: COVID-19 STORE AT 4°C	SEND COOL TDG CAT B	UHNBC
COVID-19 SEROLOGY		SST (GOLD)	5 ML SERUM	COLLECT 1 HR MIN AFTER A MEAL TO AVOID LIPEMIA ALLOW TO CLOT FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL TDG CAT B	BCCDC
COVID-19 SPIKE ANTIBODY **PRE-REGENERON THERAPY** STAT TEST- LABEL SAMPLE AND PACKAGING WITH 'STAT PRE-REGENERON'	2019-nCoV Ab COVID ANTI-SPIKE Ab COVID ANTI-SPIKE PROTEIN	SST (GOLD)	5 ML SERUM	COLLECT 1 HR MIN AFTER A MEAL TO AVOID LIPEMIA ALLOW TO CLOT FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C PATHOLOGIST APPROVAL REQUIRED <u>NI:</u> <ul style="list-style-type: none"> REGULAR HOURS: DR. WOODBECK 250-565-2427 OFF-HOURS: PATHOLOGIST ON-CALL VIA UHNBC SWITCHBOARD <u>NE/NW:</u> <ul style="list-style-type: none"> DR. AZAR 514-892-5021 	SEND COOL STAT TDG CAT B	BCCDC
COXSACKIEVIRUS ANTIBODY IgG	SEE ENTEROVIRUS NAT					
COXSACKIEVIRUS ANTIBODY IgM						

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
C-PEPTIDE	CPEP	SST (GOLD) OR RED TOP	1 ML SERUM	PATIENT MUST BE FASTING – MIN 10 HRS (OVERNIGHT) PATIENT MUST AVOID HAVING A RADIOISOTOPE SCAN PRIOR TO COLLECTION AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
C-REACTIVE PROTEIN (ADULT & PEDIATRIC)	CRP HS CRP HIGH SENSITIVITY	SST (GOLD)	1 ML SERUM	AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
C-telopeptide RANDOM, BASELINE, 3 MONTHS	CTX	SST (GOLD)	1 ML SERUM	THIS TEST IS NOT COVERED BY MSP- CONTACT LIFELABS DIRECTLY FOR COST OF TEST PATIENT MUST BE FASTING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	LIFE LABS
CREATININE	CR CREA eGFR GFR	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML PLASMA OR SERUM	GFR CALCULATION INCLUDED WITH CREATINE AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CREATINE KINASE	CK CPK	PST (LIGHT GREEN) OR SST (GOLD)	0.5 ML PLASMA OR SERUM	AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
CREATINE KINASE (BODY FLUID)	SEE BODY FLUID ANALYSIS					
CREATINE METABOLITES	SEE PURINES AND PYRIMIDINES					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CREATININE, BODY FLUID	SEE BODY FLUID ANALYSIS					
CREATININE CLEARANCE	CREA CLEARANCE	24 HR URINE CONTAINER AND SST (GOLD)	10 ML ALIQUOT AND 0.5ML SERUM	<p>FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS RECORD START & END TIME</p> <p>SERUM CREATININE MUST BE COLLECTED WITHIN 24 HRS OF EITHER START OR END TIME OF URINE COLLECTION (COLLECTION TIME OF URINE AND SERUM CAN'T BE >24HRS APART)</p> <p>RECORD HIEGHT (CM) AND WEIGHT (KG) OF PATIENT. REQUIRED FOR CLEARANCE CALCULATION</p> <p>CENTRIFUGE URINE & SST</p> <p>STORE AT 4°C</p>	SEND COOL	CHEM
CREATININE, 24 HOUR URINE	24 HR URINE CREATININE	24 HR URINE CONTAINER	10 ML ALIQUOT	<p>FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS</p> <p>CENTRIFUGE</p> <p>STORE AT 4°C</p>	SEND COOL	CHEM
CREATININE, URINE	RANDOM URINE CREATININE URINE CREA	ORANGE TOP CONTAINER	1 ML URINE	<p>CENTRIFUGE</p> <p>STORE AT 4°C</p>	SEND COOL	CHEM
CREUTZFELDT- JACOB DISEASE CEREBROSPINAL FLUID ANY ADDITIONAL TESTING SHOULD BE HELD UNTIL A NEGATIVE RESULT IS RECEIVED	CJD PRION PROTEIN, 14-3-3 TAU PROTEIN QUAKING INDUCED CONVERSION TEST S100	STERILE CSF TUBE NO GLASS OR POLYSTYRENE	2 ML OPTIMAL 1 ML MIN MUST BE CLEAR	<p>REFER TO CJD PROTOCOL BEFORE PROCEEDING</p> <p>REQUIRES SPECIAL HANDLING</p> <p>SEE NML GUIDE TO CSF TEST PANEL FOR CJD</p> <p>MUST USE NATIONAL MICROBIOLOGY LAB PRION DISEASES REQ</p> <p>SEE NML CSF SHIPPING INSTRUCTIONS FOR ADDRESS AND IMPORTANT INFO</p> <p>FREEZE ASAP</p> <p>STORE AT -30°C</p>	SEND FROZEN ON DRY ICE TDG CAT B	BCCDC WILL FORWARD TO NML (AS PER BCCDC 2022/01-10)

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CRYOFIBRINOGEN		NA CITRATE (LIGHT BLUE)	1 ML PLASMA	FASTING PREFERRED <u>INSTRUCTIONS:</u> <ul style="list-style-type: none"> PLACE SPECIMEN IN WARM WATER IMMEDIATELY AFTER COLLECTION BRING TO LAB IMMEDIATELY PLACE IN 37C WATERBATH AND INCUBATE FOR 1 HR MINIMUM KEEP SPECIMEN AT 37C UNTIL PLASMA HAS SEPARATED FROM CELLS DO NOT CENTRIFUGE CAREFULLY REMOVE PLASMA AVOIDING TRANSFER OF RED CELLS STORE AT 4°C	SEND COOL	HEM
CRYOGLOBULIN		RED TOP	1ML SERUM	FASTING PREFERRED <u>INSTRUCTIONS:</u> <ul style="list-style-type: none"> PLACE SPECIMEN IN WARM WATER IMMEDIATELY AFTER COLLECTION BRING TO LAB IMMEDIATELY PLACE IN 37C WATERBATH AND INCUBATE FOR 1 HR MINIMUM KEEP SPECIMEN AT 37C UNTIL PLASMA HAS SEPARATED FROM CELLS DO NOT CENTRIFUGE CAREFULLY REMOVE PLASMA AVOIDING TRANSFER OF RED CELLS STORE AT 4°C	SEND COOL	HEM
CRYOPRECIPITATE BLOOD PRODUCT FOR TRANSFUSION				GROUP & SCREEN MAY BE REQUIRED - CONTACT TRANSFUSION MEDICINE DEPARTMENT		
CRYPTOCOCCUS ANTIGEN	CRYPTOCOCCUS ANTIGEN	SST (GOLD)	0.5ML SERUM	SEE BCCDC ZOONOTICS REQUISITION CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
	CRYPTOCOCCUS Ag CRYPTOCOCCAL LATEX AGGLUTINATION	CSF TUBE	1.0 ML CSF	STORE AT 4°C		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CRYSTALS, BODY FLUID	SEE BODY FLUID ANALYSIS					
CULTURE ANAEROBIC WOUND	ANAEROBIC WOUND CULTURE DEEP WOUND	A.C.T II COLLECTION AND TRANSPORT SYSTEM	N/A	LIMITED TO SWABS COLLECTED DURING SURGERY SWABS OF INFECTED HUMAN OR ANIMAL BITES SWABBING AREA WITH VISIBLE PUS IS PREFERRED SWABS WITH CONSULTATION –SEND COPY OF REQUISITION WITH SWAB TO MICRO LAB	SEND AT ROOM TEMP	MICRO
CULTURE ASPIRATE	ABSCESS ASPIRATE ASPIRATE CULTURE	A.C.T II COLLECTION AND TRANSPORT TUBE	1 – 4 ML	<u>PROCESS:</u> <ul style="list-style-type: none"> CLEANSE SKIN OR MUCOSAL SURFACES DISINFECT THE RUBBER STOPPER OF THE A.C.T II COLLECTION & TRANSPORT TUBE ASPIRATE THE DEEPEST PORTION OF THE LESION OR EXUDATE WITH A NEEDLE AND SYRINGE PUSH THE NEEDLE THROUGH THE RUBBER STOPPER OF THE COLLECTION TUBE AND SLOWLY INJECT THE SAMPLE ON TOP OF THE AGAR DO NOT INJECT AIR INTO THE TUBE REMOVE THE NEEDLE AND SYRINGE AND DISPOSE IN SHARPS CONTAINER IF VOLUME OF FLUID IS > 4 ML, INJECT INTO A STERILE ORANGE TOP CONTAINER UNTIL 4 ML LEFT IN SYRINGE, THEN INJECT REMAINING 4 ML INTO A.C.T. II TRANSPORT TUBE	SEND AT ROOM TEMP	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
<p>CULTURE BLOOD</p> <p>IT IS OPTIMAL TO COLLECT SPECIMEN PRIOR TO COMMENCING ANTIBIOTIC THERAPY</p> <p>FOR COMPLETE BLOOD CULTURE COLLECTION SEE OURNH COLLECTING BLOOD CULTURES</p> <p><i>ADDITIONAL CULTURES SHOULD NOT BE DONE FOR 48 HRS. FOLLOW UP BLOOD CULTURES SHOULD ONLY BE DONE FOR PATIENTS WITH INFECTIVE ENDOCARDITIS (ACUTE OR CHRONIC) OR STAPH AUREUS BACTEREMIA. REQUESTS FOR OTHER DIAGNOSES SHOULD BE QUESTIONED AND DISCUSSED WITH THE PHYSICIAN. IF UNABLE TO RESOLVE, REFER TO PATHOLOGIST.</i></p> <p>**FOR INFECTIVE ENDOCARDITIS (UNLESS OTHERWISE REQUESTED), DRAW TWO SETS IMMEDIATELY, DRAW A THIRD SET AFTER ONE HOUR AND A FOURTH SET AFTER 2 HOURS.</p>	<p>BLOOD CULTURES</p> <p>BLOOD CULTURE ENDOCARDITIS/ BRUCELLOSIS</p> <p>BLOOD CULTURE FOR YEAST</p>	<p><u>ADULT CULTURE BOTTLES:</u></p> <ul style="list-style-type: none"> • 2 AEROBIC • 2 ANAEROBIC <p>OR</p> <p>PEDIATRIC CULTURE BOTTLE</p>	<p>ADULT: 8-10 ML PER BOTTLE</p> <p>PED: 0.5-4 ML PER BOTTLE</p>	<p>CLEAN VENIPUNCTURE AREA:</p> <p>OPTION 1: IF USING IODINE, CLEANSE AREA FIRST WITH 70% ISOPROPYL ALCOHOL THEN SWAB AREA WITH 10% POVIDONE-IODINE IN A CIRCULAR OUTWARD MOTION. ALLOW IODINE TO DRY FOR ONE MINUTE.</p> <p>OPTION 2: IF USING CHLORHEXIDINE AMPULE OR PREP PAD, CLEANSE AREA FIRST WITH 70% ISOPROPYL ALCOHOL SWAB AREA IN A CIRCULAR OUTWARD MOTION.</p> <p>IF SITE NEEDS TO BE PROBED AGAIN WITH FINGER, DISINFECT FINGER WITH APPROPRIATE DISINFECTANT</p> <p>ADULT: (14yrs – Adult) COLLECT BLOOD FROM 2 DIFFERENT SITES PREFERRABLY FROM EACH ARM. THE SAME ARM CAN BE USED BUT USE 2 DIFFERENT VEINS & COLLECTIONS SHOULD BE 5 MINUTES APART. ONE VENIPUNCTURE AND ONE LINE DRAW CAN ALSO BE PERFORMED, IF NECESSARY</p> <p>DRAW 15-20 ML OF BLOOD FROM EACH SITE AND INOCULATE ONE AEROBIC AND ONE ANAEROBIC BOTTLE (2 SETS IN TOTAL)</p> <p>MIX ALL BOTTLES 4-5 TIMES. DO NOT COLLECT PEDIATRIC BOTTLES ON ADULTS. INOCULATE AEROBIC BOTTLE ONLY IF COLLECTION IS DIFFICULT.</p> <p>SEE NEXT PAGE FOR PEDIATRIC COLLECTION</p>	<p>SEND AT ROOM TEMP</p> <p>DELIVER ASAP TO MICRO DEPT</p>	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB																					
CULTURE, BLOOD PEDIATRIC	BLOOD CULTURE PEDIATRIC	PEDIATRIC CULTURE BOTTLE	PED: 0.5-4 ML PER BOTTLE	<p>PEDIATRIC (0-13 YRS):</p> <p>COLLECT BLOOD FROM ONE VENIPUNCTURE SITE</p> <p>IF <4 ML BLOOD COLLECTED, INOCULATE ONE PEDIATRIC BOTTLE</p> <p>IF >4 ML COLLECTED, INOCULATE ONE PEDIATRIC BOTTLE WITH 4 ML AND A SECOND PEDIATRIC BOTTLE WITH THE REMAINING VOLUME</p> <p>MIX ALL BOTTLE 3-4 TIMES</p> <p>RECOMMENDED BLOOD VOLUMES FOR PEDIATRIC BLOOD CULTURE COLLECTION</p> <table><thead><tr><th>WEIGHT</th><th>VOLUME ML</th><th>MIN VOL ML</th></tr></thead><tbody><tr><td>< 1 kg</td><td>0.5-1.0</td><td>0.4</td></tr><tr><td>1-3 kg</td><td>1</td><td>0.5</td></tr><tr><td>3-10 kg</td><td>3</td><td>1</td></tr><tr><td>10-20 kg</td><td>3</td><td>1-2</td></tr><tr><td>20-35 kg</td><td>5-10</td><td>4</td></tr><tr><td>>35 kg</td><td>10</td><td>4</td></tr></tbody></table>	WEIGHT	VOLUME ML	MIN VOL ML	< 1 kg	0.5-1.0	0.4	1-3 kg	1	0.5	3-10 kg	3	1	10-20 kg	3	1-2	20-35 kg	5-10	4	>35 kg	10	4	SEND AT ROOM TEMP DELIVER ASAP TO MICRO DEPT	MICRO
WEIGHT	VOLUME ML	MIN VOL ML																									
< 1 kg	0.5-1.0	0.4																									
1-3 kg	1	0.5																									
3-10 kg	3	1																									
10-20 kg	3	1-2																									
20-35 kg	5-10	4																									
>35 kg	10	4																									
CULTURE CERVIX	CX CULTURE	STARSWAB II	N/A	USE A SPECULUM MOISTENED WITH WATER SWAB THE ENDOCERVICAL CANAL AVOID VAGINAL WALLS DURING COLLECTION	STORE AT ROOM TEMP	MICRO																					
CULTURE CEREBROSPINAL FLUID	CSF CULTURE	CSF TUBE 2	1 ML	COLLECTED BY PHYSICIAN	STORE AT ROOM TEMP DELIVER ASAP TO MICRO DEPT	MICRO																					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE EAR	EAR CULTURE	STARSWAB II	N/A	SWAB THE EAR CANAL OR DRAINAGE FROM THE MIDDLE EAR IF ASPIRATION IS PERFORMED SEE CULTURE, ASPIRATE	STORE AT ROOM TEMP	MICRO
CULTURE EYE	EYE CULTURE AQUEOUS ASPIRATE VITREOUS ASPIRATE	STARSWAB II	N/A	PRE-MOISTEN SWAB WITH STERILE SOLUTION COLLECT EYE SWAB PRIOR TO THE APPLICATION OF TOPICAL ANESTHETIC ROLL THE SWAB OVER THE CONJUNCTIVA FOR CULTURE OF BOTH EYES, USE SEPARATE SWABS	STORE AT ROOM TEMP TRANSPORT AQUEOUS OR VITREOUS ASPIRATES, BIOPSY MATERIAL AND ENUCLEATIONS TO MICRO IMMEDIATELY OTHER OCULAR SAMPLES TRANSPORT TO LAB WITHIN 24 HRS	MICRO
	CONJUNCTIVAL SCRAPING CULTURE	PLATES AND BROTH MEDIA SUPPLIED FRESH BY LAB BAP/CHOC/ SAB/THIO/ SLIDE		COLLECTED BY PHYSICIAN (USUALLY OPHTHALMOLOGIST) FOR FACILITIES WITHOUT MICROBIOLOGY DEPARTMENT, PLEASE CONTACT UHNBC MICROBIOLOGY DEPT IN ADVANCE		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE FLUID	BODY FLUID CULTURE STERILE BODY FLUID CULTURE	A.C.T II COLLECTION AND TRANSPORT TUBE	1 – 4 ML	<u>INSTRUCTIONS:</u> <ul style="list-style-type: none"> CLEANSE SKIN SURFACE DISINFECT THE RUBBER STOPPER OF THE A.C.T II TUBE INSERT NEEDLE INTO THE CLEANSED SKIN & ASPIRATE BODY FLUID PUSH THE NEEDLE THROUGH THE RUBBER STOPPER OF THE COLLECTION TUBE AND SLOWLY INJECT THE SAMPLE ON TOP OF THE AGAR DO NOT INJECT AIR INTO THE TUBE REMOVE THE NEEDLE AND SYRINGE AND DISPOSE IN SHARPS CONTAINER IF VOLUME OF FLUID IS > 4 ML INJECT INTO A STERILE ORANGE TOP CONTAINER UNTIL 4 ML LEFT IN SYRINGE INJECT REMAINING 4 ML INTO A.C.T. II TRANSPORT TUBE 	SEND ROOM TEMP	MICRO
	PERITONEAL DIALYSIS FLUID CULTURE PD FLUID CULTURE	50 ML CENTRIFUGE TUBE (BLUE CAP) STERILE ORANGE TOP CONTAINER	50 ML	SUBMIT SAMPLE OF EFFLUENT		
CULTURE GENITAL	GENITAL CULTURE LABIA CULTURE VULVA CULTURE PENIS CULTURE VAGINA CULTURE ON PATIENT <13 YRS OR >55 YRS	STARSWAB II	N/A	CLEANSE AREA WITH STERILE SALINE	STORE AT ROOM TEMP	MICRO
FOR CHANCROID OR HAEMOPHILUS DUCREYI SEE BCCDC MANUAL	IUD	STERILE ORANGE TOP CONTAINER				

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE GROUP B STREP	GROUP B STREP SCREEN GBS SCREEN	STARSWAB II	N/A	COLLECT AT 35-37 WEEKS GESTATION SWAB VAGINA INTROITUS AND RECTUM USING THE SAME SWAB	STORE AT ROOM TEMP	MICRO
CULTURE NOSE	NASAL CULTURE	STARSWAB II	N/A	ROUTINE NASAL CULTURES ARE ONLY PERFORMED FOR STAPH CARRIAGE. SWABS WITHOUT THIS REQUEST WILL BE REJECTED FOR MRSA CARRIAGE, REFER TO MRSA SCREEN FOR NASAL SINUS ASPIRATE SEE ASPIRATE CULTURE	STORE AT ROOM TEMP	MICRO
CULTURE ORAL	ORAL CULTURE	STARSWAB II	N/A	SWAB TONGUE, GUMS OR ORAL MUCOSA FOR YEAST AND VINCENT'S ORGANISMS	STORE AT ROOM TEMP	MICRO
CULTURE RESPIRATORY (LOWER)	ET ASPIRATE CULTURE	STERILE SUCTION CONTAINER	1.0 ML	ASPIRATE INTO STERILE CONTAINER SEAL CONTAINER WITH TIGHT FITTING LID DO NOT SUBMIT WITH TUBING ATTACHED	STORE AT ROOM TEMP	MICRO
	BRONCHIAL WASHING CULTURE BRONCHIAL BRUSHINGS CULTURE BRONCHIAL ALVEOLAR LAVAGE (BAL) CULTURE	STERILE ORANGE TOP CONTAINER		COLLECTED BY PHYSICIAN		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE SPUTUM	SPUTUM CULTURE	STERILE ORANGE TOP CONTAINER	1.0 ML	RINSE MOUTH WITH FRESH TAP WATER OR STERILE WATER (DO NOT SWALLOW WATER) DO NOT GARGLE WITH MOUTHWASH COLLECT SPUTUM RESULTING FROM A DEEP COUGH DO NOT SUBMIT SALIVA OR POSTNASAL DISCHARGE	STORE AT ROOM TEMP	MICRO
				FOR CYSTIC FIBROSIS OR PEDIATRIC PATIENTS, REFER TO CYSTIC FIBROSIS RESPIRATORY CULTURE		
CULTURE STOOL	STOOL CULTURE	GREEN TOP ENTERIC PLUS CONTAINER OR STERILE ORANGE TOP CONTAINER	5 ML	FOLLOW STOOL CULTURE COLLECTION INSTRUCTIONS <u>PROCESS:</u> <ul style="list-style-type: none"> STOOL IS PASSED INTO A CLEAN DRY CONTAINER TRANSFER A PORTION OF THE STOOL INTO TRANSPORT CONTAINER USE ORANGE TOP CONTAINER IF ARRIVING IN LAB SAME DAY USE GREEN TOP CONTAINER IF TRANSPORT > 1 DAY 	STORE AT ROOM TEMP	MICRO
CULTURE THROAT	THROAT CULTURE TONSIL CULTURE	STARSWAB II	N/A	<u>PROCESS:</u> <ul style="list-style-type: none"> PLACE GENTLE PRESSURE ON TONGUE WITH A TONGUE DEPRESSOR SWAB THE POSTERIOR PHARYNX, TONSILLAR AREA, AND INFLAMED OR EXUDATIVE AREAS AVOID TONGUE, BUCCAL MUCOSA, AND UVULA 	STORE AT ROOM TEMP	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE TISSUE	BIOPSY CULTURE TISSUE CULTURE ENUCLEATIONS	SMALL TISSUES: <ul style="list-style-type: none"> A.C.T II COLLECTION & TRANSPORT SYSTEM LARGE TISSUES: <ul style="list-style-type: none"> STERILE ORANGE TOP CONTAINER 	3- 4 MM	<u>PROCESS:</u> <ul style="list-style-type: none"> CLEANSE SKIN OR MUCOSAL AREAS SAMPLE VIABLE INFECTED TISSUE RATHER THAN SUPERFICIAL DEBRIS OR DEBRIDEMENT COLLECT TISSUE, AVOIDING NECROTIC AREAS FOR SMALL TISSUES: PRESS TISSUE SLIGHTLY INTO THE SURFACE OF THE MEDIA IN THE TRANSPORT VIAL LARGE TISSUES: PLACE IN STERILE ORANGE TOP CONTAINER	STORE AT ROOM TEMP DELIVER TO MICRO IMMEDIATELY AFTER COLLECTION	MICRO
CULTURE URETHRA	URETHRA CULTURE	STARSWAB II	N/A	<u>PROCESS:</u> <ul style="list-style-type: none"> EXPRESS EXUDATE ONTO SWAB FROM DISTAL URETHRA IF NO EXUDATE, COLLECT 1 HR AFTER URINATION WIPE AREA CLEAN INSERT FINE TIPPED SWAB 2 TO 4 CM INTO URETHRA, ROTATE FOR 1 TO 2 SEC AND WITHDRAW 	STORE AT ROOM TEMP	MICRO
CULTURE URINE	URINE CULTURE MID STREAM URINE	STERILE ORANGE TOP CONTAINER OR GREY TOP URINE TUBE W/ PRESERVATIVE	4 ML	FOLLOW URINE CULTURE COLLECTION INSTRUCTIONS SEND TO LAB AS SOON AS POSSIBLE STORE AT 4°C	SEND COOL	MICRO

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CULTURE WOUND	WOUND CULTURE ABSCESS CULTURE	STARSWAB II	N/A	<u>PROCESS:</u> <ul style="list-style-type: none"> REMOVE SURFACE EXUDATE (PUS) BY WIPING WITH STERILE SALINE OR 70% ALCOHOL SWAB INFECTED AREA IF OPEN WOUND, PASS SWAB DEEP INTO LESION SAMPLING THE "FRESH BORDER" 	STORE AT ROOM TEMP	MICRO
CYANIDE LEVEL ORDER HOLD REF TO LIFELABS UNTIL ORDERABLE BUILT		GREY TOP (OXALATE/ FLUORIDE)	2 ML	SELF PAY DO NOT OPEN TUBE SEND WHOLE BLOOD STORE FROZEN	SEND FROZEN	LIFELABS
CYCLIC CITRULLINATED PEPTIDE ANTIBODY MSP RESTRICTIONS	CCP ANTIBODY ANTI-CCP	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE MSP PAYABLE ONLY IF ORDERED BY A RHEUMATOLOGIST OR INTERNIST. NOT MSP PAYABLE FOR ESTABLISHED REHUMATOID ARTHRITIS	SEND FROZEN	VGH
CYCLOSPORIN LEVEL ORDER HOLD REF UNTIL BUILT IN CERNER	RANDOM CYCLOSPORIN	EDTA (LAVENDER)	3.0 ML WHOLE BLOOD	COLLECT 12 ± 2 HRS AFTER LAST DOSE WRITE CYCLO-PRE ON TUBE ***** DO NOT CENTRIFUGE STORE AT 4°C	SEND COOL	ST PAULS
CYCLOSPORIN 2 HR ORDER HOLD REF UNTIL BUILT IN CERNER	POST-CYCLOSPORIN POST CYCLO 2HR CYCLO	EDTA (LAVENDER)	3.0 ML WHOLE BLOOD	COLLECT 2 HRS ± 15 MIN POST DOSE (NO DEVIATION – VERY STRICT TIMING IS REQUIRED) WRITE CYCLO-POST ON TUBE ***** DO NOT CENTRIFUGE STORE AT 4°C	SEND COOL	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

CYCLOSPORIN TROUGH ORDER HOLD REF UNTIL BUILT IN CERNER	PRE- CYCLOSPORIN	EDTA (LAVENDER)	3.0 ML WHOLE BLOOD	COLLECT JUST PRIOR TO NEXT DOSE (NO DEVIATION – VERY STRICT TIMING IS REQUIRED) WRITE CYCLO-P ON TUBE ***** DO NOT CENTRIFUGE STORE AT 4°C	SEND COOL	ST PAULS
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CYSTATHIONINE	NO LONGER AVAILABLE					
CYSTIC FIBROSIS	SEE DNA ANALYSIS					
CYSTIC FIBROSIS RESPIRATORY CULTURE ORDER HOLD REF TO BBCH (PED <18 YRS) OR SPH (>18 YRS) UNTIL BUILT IN CERNER	CF SPUTUM CF COUGH SWAB CF RESPIRATORY CULTURE	ORANGE TOP CONTAINER STARPLEX SWAB		COLLECT SPUTUM SAMPLE OR THROAT SWAB SAMPLES FROM PEDIATRIC PATIENTS <18 YEARS WILL BE REFERRED TO BCCH	SEND ROOM TEMP	ST PAULS BCCH
CYSTINE, WHITE BLOOD CELL NO LONGER AVAILABLE SEE AMINO ACID SCREEN-PLASMA OR CEREBROSPINAL FLUID ANALYSIS						
CYSTINE, 24 HR URINE 24 HR URINE CYSTINES ARE ONLY DONE FOR KNOWN CYSTINURIA PATIENTS FOR SCREENING COLLECT CYSTINE, RANDOM		24 HR URINE CONTAINER	DO NOT ALIQUOT SEND ENTIRE SPECIMEN FROZEN	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INSTRUCTIONS: <ul style="list-style-type: none"> • ENTIRE SAMPLE MUST BE DEDICATED FOR CYSTINE • FREEZE DURING COLLECTION • ADD SUBSEQUENT COLLECTIONS TO FROZEN URINE • FREEZE ENTIRE SAMPLE AFTER COLLECTION 	SEND FROZEN	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

CYSTINE, RANDOM	CYSTINE SCREEN	ORANGE TOP CONTAINER	MIN: 2 ML OPTIMAL: 10 ML	ENTIRE RANDOM SAMPLE MUST BE DEDICATED FOR CYSTINE COLLECT ON ICE OR KEEP REFRIGERATED FREEZE URINE IMMEDIATELY	SEND FROZEN	CHEM
CYTOGENETIC INVESTIGATION OF STILLBORNS	SEE EMBRYOPATHOLOGY					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CYTOGENETICS, AMNIOTIC FLUID	AMNIOTIC FLUID CYTOGENETICS	TWO STERILE CONICAL TUBES		PHYSICIAN TO COMPLETE RCH CYTOGENETICS REQUISITION ENSURE MOTHER'S AGE AT CONCEPTION COLLECTED BY OBSTETRICIAN DURING AMNIOCENTESIS KEEP AT ROOM TEMP DO NOT FREEZE CALL ROYAL COLUMBIAN HOSPITAL BEFORE SENDING AT (604) 520-4484	SEND AT ROOM TEMP TO BE RECEIVED WITHIN 24 HRS	RCH
CYTOGENETICS, BLOOD (ADULT >16YRS)	CHROMOSOME ANALYSIS KARYOTYPE CHROMOSOME HIGH RESOLUTION BANDING	SODIUM HEPARIN (DARK GREEN)	1.0 ML WHOLE BLOOD	MUST USE VGH CONSTITUTIONAL CYTOGENETICS REQ OR VGH HEMATOLOGICAL NEOPLASIA CYTOGENETICS REQ COLLECT MON – THURS BEFORE NOON DO NOT CENTRIFUGE STORE AT ROOM TEMP SEND OUT SAME DAY TO VGH CYTOGENETICS LAB	SEND AT ROOM TEMP	VGH

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CYTOGENETICS, BLOOD CHILD (0-16YRS)	POSTNATAL CONSTITUTIONAL CYTOGENETICS CHROMOSOME ANALYSIS KARYOTYPE CHROMOSOME HIGH RESOLUTION BANDING	SODIUM HEPARIN (DARK GREEN) OR CORD BLOOD (SODIUM HEPARIN)	CHILD: 3 ML WHOLE BLOOD BABY: 1 ML WHOLE BLOOD	COLLECT MONDAY TO THURSDAY TO ENSURE SPECIMEN ARRIVES DURING WEEK DAYS MUST FILL OUT BCCH POSTNATAL CONSTITUTIONAL CYTOGENETICS REQ DO NOT CENTRIFUGE STORE AT ROOM TEMP SPECIMEN MUST ARRIVE AT BCCH WITHIN 72 HRS OF COLLECTION	SEND ROOM TEMP	BCCH
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CYTOGENETICS, BONE MARROW REQUIRES PATHOLOGIST APPROVAL		BLOOD: 1-EDTA (LAVENDER) AND 1-Na HEP (DARK GREEN) PLUS BONE MARROW: 2 MEDIA TUBES MARKED CYTO GENETICS PLUS UNSTAINED MARROW AND BLOOD SLIDES	5 ML WHOLE BLOOD AND 2 -CYTO GENETIC TUBES OF BONE MARROW	MUST USE BCCA CANCER GENETICS REQUISITION SEND CBC RESULTS AND PATHOLOGY REPORTS SEND WHOLE BLOOD, BONE MARROW AND SLIDES AT ROOM TEMP MUST ARRIVE AT BCCA WITHIN 24 HRS OF COLLECTION	SEND ROOM TEMP SAME DAY SEND AS URGENT	BCCA CANCER GENETICS LAB

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CYTOLOGY		ORANGE TOP CONTAINER OR CYTOLYTE CONICAL TUBE	1-2 ML FLUID	<p>COLLECTED BY WARD USE BCCA CYTOLOGY REQUISITION</p> <p>BCCA WILL NOT ACCEPT ENTIRE COLLECTIONS- A WELL MIXED ALIQUOT IS ACCEPTABLE</p> <p>PLACE ALIQUOT IN ORANGE TOP STERILE CONTAINER OR CYTOLYTE CONICAL TUBE</p> <p>.....</p> <p><u>LAB:</u></p> <ul style="list-style-type: none"> • ADD EQUAL AMOUNT OF CYTOLYTE (HAS FIXATIVE), 50% ALCOHOL, OR 10% BUFFERED FORMALIN • LABEL WITH "ALCOHOL ADDED OR FORMALIN ADDED" IF REQUIRED <p>NOTE: BRONCHIAL BRUSHINGS & FINE NEEDLE ASPIRATES GO TO BCCA</p>	SEND AT ROOM TEMP	BCCA
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CYTOMEGALOVIRUS BY PCR	CMV PCR CMV VIRAL LOAD CMV VIRAL LOAD BY PCR CMV NAT	7.0 ML EDTA (LAVENDER) ACD OR HEPARIN NOT ACCEPTABLE	ABSOLUTE MIN: 5.0 ML WHOLE BLOOD ABSOLUTE MIN: 2.0 ML PLASMA	<p>PCR METHODOLOGY AT ST. PAUL'S REQUIRES A MINIMUM OF 7ML EDTA (2 ML PLASMA)</p> <p>CENTRIFUGE SPECIMEN AT 1300 RCF FOR 10 MINS</p> <p>ASEPTICALLY REMOVE PLASMA FROM THE RED CELLS WITHIN 4 HRS OF COLLECTION AND ALIQUOT INTO STERILE CRYOVIAL</p> <p>STORE 4°C IF SENDING IN <6 DAYS OTHERWISE FREEZE</p> <p>FOR PATIENTS <19 YEARS OLD SEND SAMPLES TO BCCH</p>	<p>SEND COOL IF <6 DAYS</p> <p>SEND FROZEN IF >6 DAYS ON DRY ICE</p> <p>SEND AS TDG CAT B</p>	ST PAULS

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CYTOMEGALOVIRUS BY PCR (PEDIATRIC <19 YRS)	CMV VIRAL LOAD PEDIATRIC CMV PCR CMV NAT	RED TOP- UNSPUN	OPTIMAL: 2.0 ML WHOLE BLOOD MIN: 1.0 ML WHOLE BLOOD	PCR METHODOLOGY AT BC CHILDREN'S REQUIRES A RED TOP TUBE UNSPUN SOME ADULT PATIENTS INITIALLY TESTED AT CHILDREN'S MAY CONTINUE TO HAVE RED TOP TUBES COLLECTED COLLECT MON – THURS ONLY ** DO NOT CENTRIFUGE** STORE AT 4°C SPECIMENS MUST BE RECEIVED WITHIN 48 HRS OF COLLECTION	SEND COOL ON ICE	BCCH
		AMNIOTIC FLUID- STERILE CONTAINER	MINIMUM VOLUME FOR FLUIDS: 1.0 ML			
		CSF- STERILE CONTAINER	0.3 ML			
		URINE- STERILE CONTAINER	0.5 ML			


TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
CYTOMEGALOVIRUS SALIVARY	CMV NAT SALIVA FOR CMV	UTM VIRAL SWAB		SEE CMV SWAB COLLECTION INSTRUCTIONS SEE BC CHILDREN'S HOSPITAL OUTPATIENT REQUISITION ONLY DONE ON CHILDREN ≤ 21 DAYS OLD WHO ARE PATIENTS OF BCCH	SEND COOL	BCCH

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CYTOMEGALOVIRUS SEROLOGY ACUTE- IgG & IgM OR IMMUNITY- IgG	CMV CMV ANTIBODY ANTI- CMV CMV IgG CMV IgM	SST (GOLD)	3 ML SERUM	SEE BCCDC SEROLOGY SCREENING REQ TESTS PERFORMED WILL BE DETERMINED BY INFO ON THE REQUISITION ALLOW TO CLOT UPRIGHT FOR 1HR CENTRIFUGE STORE AT 4°C DO NOT FREEZE	SEND COOL	BCCDC
CYTOTOXIC ANTIBODY	SEE HLA ANTIBODY INVESTIGATION					


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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
DAT	SEE DIRECT ANTIGLOBULIN TEST					

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DDIMER	FDP FIBRINOGEN DEGRADATION PRODUCTS XDP	NA CITRATE (LIGHT BLUE)	FULL TUBE	FILL VACUTAINER COMPLETELY STORE UNOPENED WHOLE BLOOD @RT AND TEST WITHIN 8 HRS OF COLLECTION IF TESTING WILL <u>NOT</u> BE DONE WITHIN 4 HOURS OF COLLECTION, DOUBLE-SPIN SPECIMEN AND FREEZE PLASMA IN A POLYPROPYLENE TUBE	SEND WHOLE BLOOD AT ROOM TEMP IF ARRIVING WITHIN 8 HOURS OF DRAW SEND FROZEN IF ARRIVING >8 HOURS OF DRAW	CHEM
7-DEHYDROCHOLESTEROL  PROTECT FROM LIGHT	SLOS	RED TOP	3 ML SERUM 1 ML MIN	CALL TO GET APPROVAL FROM BCCH BIOCHEMICAL GENETICS LAB 1-604-875-2345 LOCAL 7436 FAX 604-875-3434 PROTECT FROM LIGHT SERUM- CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCH (BGL)
		AMNIOTIC FLUID (PRENATAL DIAGNOSIS ONLY) APPROVAL REQUIRED AHEAD OF TIME	10 ML OPTIMAL 3 ML MIN			

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

DEHYDROEPIANDROSTERONE SULPHATE	DHEAS	SST/PST OR EDTA (LAVENDER)	1 ML PLASMA OR SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C IF <6 DAYS TO REACH VGH FREEZE IF >6 DAYS TO REACH VGH	SEND COOL <6 DAYS SEND FROZEN >6 DAYS	VGH
DEHYDROEPIANDROSTERONE SULPHATE, PEDIATRIC	DHEAS PED	RED TOP OR Li HEP OR EDTA (LAVENDER)	0.5 ML SERUM OR PLASMA <u>MICROTAINER ACCEPTABLE</u>	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH
DELTA AMINOLEVULINIC ACID 24 HR URINE LIGHT SENSITIVE  PROTECT FROM LIGHT	ALA ACID DALA DELTA AMINOLEVULINIC ACID	24 HR URINE COLLECTION ONLY ADD 15 ML 6N HCL NO RANDOM SAMPLES	100 ML URINE 12 ML ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS REFRIGERATE AND PROTECT FROM LIGHT DURING ENTIRE COLLECTION ALIQUOT URINE TO A URINE TRANSPORT BOTTLE AND ADJUST pH 2-7 FREEZE URINE ALIQUOT	SEND FROZEN KEEP PROTECTED FROM LIGHT	VGH
DEOXYPYRIDINOLINE CROSSLINKS URINE	NO LONGER AVAILABLE					
	SEE C- TELOPEPTIDE					
DESIPRAMINE LEVEL QUANTITATIVE	NORPRAMIN PERTOFANE	RED TOP NO SST/GEL	2 ML SERUM	DRAW IMMEDIATELY PRIOR TO NEXT DOSE (MIN 12 HR POST) INDICATE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT WITHIN 2 HR OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

DEXAMETHASONE SUPPRESSION	DST	SST (GOLD) OR RED TOP	1 ML SERUM	THE PATIENT IS GIVEN 1.0 mg DEXAMETHASONE TO BE TAKEN ORALLY AT BEDTIME CARE SHOULD BE TAKEN THAT THE PATIENT'S SLEEP IS NOT DISTURBED OVERNIGHT FASTING IS REQUIRED FASTING BLOOD IS DRAWN NEXT MORNING FOR SERUM CORTISOL DETERMINATION CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
DIBUCAINE NUMBER	SEE CHOLINESTERASE					
DIGOXIN LEVEL	LANOXIN	RED TOP TUBE OR RST (ORANGE) NO SST	1 ML SERUM	DRAW JUST BEFORE NEXT DOSE OR AT LEAST 6 HOURS AFTER LAST DOSE INDICATE LAST DOSE DATE AND TIME CENTRIFUGE (ALIQOT IF RED TOP SERUM) STORE AT 4°C	SEND COOL	CHEM
DIHYDROTESTOSTERONE	DHT ANDROSTANOLONE	SST (GOLD) OR RED TOP	1ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
DIHYDROXYVITAMIN D 1,25 LEVEL	SEE VITAMIN D 1, 25 HYDROXY LEVEL					
DILANTIN TUMOUR MARKER		SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCA

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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DILUTE RUSSELL VIPER VENOM TEST	SEE LUPUS ANTICOAGULANT					
DIPHTHERIA ANTIBODY APPROVAL REQUIRED UNLESS PATIENT IS <16 YRS AND/OR ORGAN TRANSPLANT PATIENT	CORYNEBACTERIUM DIPHTHERIAE Ab	SST (GOLD)	2 ML SERUM	APPROVAL REQUIRED: Contact BCCDC Zoonotic Diseases and Emerging Pathogens Program Head at (604)-707-2622 or Medical Microbiologist on-call at (604)-661-7033 SEE BCCDC ZOOTICS REQ CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
DIPHTHERIA CULTURE		SWAB		STORE AT 4°C	SEND COOL	BCCDC
DIRECT ANTIGLOBULIN TEST	DAT COOMBS TEST	EDTA (LAVENDER)	1 ML WHOLE BLOOD	ADULT: COLLECT MIN 1-6ML EDTA CHILD: COLLECT MIN 1 ML EDTA NEONATE: SEE NB DAT	SEND COOL	TMS
DIRECT ANTIGLOBULIN TEST, NEWBORN	NB DAT		0.5 ML WHOLE BLOOD	USE CORD BLOOD WHEN AVAILABLE* * COLLECT MIN 0.5 ML CAPILLARY EDTA IF CORD BLOOD IS NOT AVAILABLE (TRANSFUSION OR HEMATOLOGY MAY ALREADY HAVE AN EDTA SPECIMEN)		
DIURETIC HORMONE (ADH)	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
DNA ANALYSIS FOR HEMOCHROMATOSIS: ORDER HFE 1	COMMON DISEASES: (MORE ON REQ) <ul style="list-style-type: none"> • ANGELMAN SYNDROME • DNA DETECTION • ASHKENAZI CARRIER SCREENING (TAY SACHS DISEASE) • CHARCOT-MARIE-TOOTH TYPE 1A • CYSTIC FIBROSIS (CF, CFTR) • DYSTONIA • FSH DYSTROPHY • FRAGILE X SYNDROME • HFE-RELATED HEMOCHROMATOSIS • THALASSEMIA • HUNTINGTON'S • HYPOCHONDROPLASIA • MYOTONIC DYSTROPHY • PRADER-WILLI SYNDROME • SENSORINEURAL HEARING LOSS (CONNEXIN) • 1p/19q CHIMERISM 	EDTA (LAVENDER)	7 ML WHOLE BLOOD PEDS: 2 ML WHOLE BLOOD NEWBORN CORD BLOOD	**MUST INCLUDE REQUISITION WITH SAMPLE** INCLUDE DIAGNOSIS AND HISTORY ON BCCH MOLECULAR GENETICS LABORATORY REQUISITION (FAILURE TO INCLUDE DETAILED CLINICAL HISTORY MAY RESULT IN CANCELLATION OF TEST) **COLLECT MON-THURS ONLY STORE AT ROOM TEMPERATURE <u>SEND WITHIN 72 HRS</u>	SEND ROOM TEMP	BCCH
DNA ANTIBODY	ANTI-DNA ANTI-ds DNA n-DNA DOUBLE STRANDED DNA	SST (GOLD)	0.5 ML SERUM	AVOID HEMOLYSIS & LIPEMIA CENTRIFUGE AND ALIQUOT FREEZE ***SAMPLES MUST BE RECEIVED FROZEN*** IF SPECIMEN RECEIVED THAWED AND SPECIMEN IS >24 HRS OLD, TEST WILL BE CANCELLED	SEND FROZEN	HEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
DNA PROBE	SEE INDIVIDUAL TESTS: <ul style="list-style-type: none"> • BCR-ABL1 • JAK2 • BCL-2 • PML-RARA FISH 					
DOUBLE STRANDED DNA	SEE DNA ANTIBODY METHOD INCLUDES ds DNA					
2,3-DPG	NO LONGER AVAILABLE					
DQ2, DQ8	SEE HLA DQ2, DQ8					
DRVVT	SEE DILUTE RUSSELL VIPER VENOM TEST					

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ECHINOCOCCUS ANTIBODY	ECHINOCOCCUS GRANULOSUS ECHINOCOCCOSIS	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOO NOTICS REQ COLLECT AT LEAST 1 HR POST MEAL TO AVOID LIPEMIA ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
ECHOVIRUS ANTIBODY	NO LONGER AVAILABLE					
	SEE ENTEROVIRUS NAT					
ELASTASE, FECAL	FECAL ELASTASE PANCREATIC ELASTASE STOOL MEAT FIBRES (STOOL)	ORANGE TOP CONTAINER	200 G OPTIMAL 50 g STOOL	WALNUT SIZED WELL FORM STOOL PREFERRED FREEZE	SEND FROZEN	BCCH
ELECTROLYTE PANEL	<u>ANION GAP:</u> <ul style="list-style-type: none"> E2 E4 E5 E6 LYTES	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM OR PLASMA	ORDER E2 FOR OUTPATIENTS UNLESS ORDERED BY A SPECIALIST AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
ELECTROLYTES, STOOL WILL BE DISCONTINUED 1 NOV 2021	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ELECTROLYTES, URINE	URINE LYTES	ORANGE TOP CONTAINER	2.0 ML URINE	CENTRIFUGE AND ALIQUOT	SEND COOL	CHEM
ELECTROPHORESIS, SERUM (SCREENING)	EP SERUM EP PEP PROTEIN ELECTROPHORESIS	SST (GOLD)	1 ML SERUM	ORDERABLE ONLY ONCE VERY 21 DAYS. IMMUMOFIXATION DONE ONLY IF PATHOLOGIST DEEMS NECESSARY CENTRIFUGE AND ALIQUOT STORE AT 4°C VERIFY PROTEIN RESULT BEFORE SENDING EP TO UHNBC	SEND COOL	CHEM
FOR QUANTITATION ORDER SERUM FREE LIGHT CHAINS	IMMUNOFIXATION LIGHT CHAINS (SCREENING)					
ELECTROPHORESIS, URINE	UEP URINE ELECTROPHORESIS BENCE JONES PROTEIN	ORANGE TOP CONTAINER OR 24 HR URINE CONTAINER	20 ML URINE	ORDERABLE ONLY ONCE VERY 21 DAYS SAMPLES SHOULD BE REFRIGERATED SOON AFTER COLLECTION 24 HR URINES ARE NOT ADVISABLE UNLESS REFRIGERATION OCCURS DURING COLLECTION SEND TO LAB ASAP	SEND COOL	CHEM

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
EMBRYOPATHOLOGY < 20 WEEKS GESTATION	PRODUCTS OF CONCEPTION POC PREGNANCY LOSS STILLBORN INFANTS INVESTIGATION CYTOGENETICS	LEAK-PROOF CONTAINER *NO FIXATIVES*		ADD A SMALL AMOUNT OF STERILE NORMAL SALINE TO PREVENT DRYING DURING TRANSPORT DO NOT ADD FORMALIN MUST SEND BCCH PARENTAL RESPONSIBILITY FOR MAKING ARRANGEMENTS FORM MUST USE <20 BCCH BIOPSYEMBRYOPATHOLOGY CONSULT REQUEST FORM OR > 20 BCCH PERINATAL LOSS REQ SPECIMENS ARE STABLE AT 4°C FOR UP TO 7 DAYS IF KEPT MOIST SEND TO LAB IMMEDIATELY AND STORE AT 4°C (LEAVE A NOTE IN HISTOLOGY THAT SPECIMEN IS IN REFRIGERATOR) REGIONAL SITES SEND DIRECTLY TO BCCH TO AVOID DELAY <u>NOTE:</u> ALL REGISTERABLE STILLBIRTHS (>20 WKS GESTATION) AND LIVEBIRTHS NEED TO BE TRANSFERRED BY LICENSED FUNERAL HOMES OR BODY REMOVAL SERVICES AND NEED AUTOPSY CONSENT FORMS PLUS INSTRUCTIONS FOR DISPOSITION SEND SPECIMEN COOL PACK ABSORBENT MATERIAL IN COOLER TO PROTECT AGAINST SPILLS CONTACT EMBRYOPATHOLOGY LAB TO INFORM THEM THAT SPECIMEN IS BEING SENT	SEND COOL	BCCH
EMBRYOPATHOLOGY > 20 WEEKS GESTATION ORDER HOLD REF UNTIL BUILT IN CERNER						
ENA	SEE EXTRACTABLE NUCLEAR ANTIGEN					
ENCEPHALITIS IgG ANTIBODY	NO LONGER AVAILABLE					
	SEE PHLEBOVIRUS SEROLOGY OR ENCEPHALITIS VIRUS NAT					

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ENCEPHALITIS IGM ANTIBODY	NO LONGER AVAILABLE					
	SEE PHLEBOVIRUS SEROLOGY OR ENCEPHALITIS VIRUS NAT					
ENCEPHALITIS VIRAL NAT ORDER HOLD REF UNTIL BUILT IN CERNER		STERILE CSF CONTAINER	0.5 ML	DR TO COLLECT ASEPTICALLY STORE AT 4°C	SEND COOL	BCCDC
ENOXAPARIN	SEE HEPARIN LEVEL					
ENTEROBIUS VERMICULARIUS	PINWORM EXAM ENTEROBIASIS	PINWORM PADDLE SEE BCCDC CONTAINER ORDER FORM		IDEAL SPECIMEN IS EARLY MORNING AND PRIOR TO BOWEL MOVEMENT SEE BCCDC PARASITOLOGY REQ STORE AT ROOM TEMP	SEND ROOM TEMP	BCCDC
ENTEROVIRUS NAT ORDER HOLD REF UNTIL BUILT IN CERNER	ENTEROVIRUS PCR	RED TOP	2 ML	CENTRIFUGE AND ALIQUOT STORE AT 4°C		BCCH
EOSIN 5 MALEMIDE BINDING	SEE RBC MEMBRANE FLOW ANALYSIS					
EOSINOPHIL SMEAR (SWAB)	NO LONGER AVAILABLE					
EOSINOPHIL SMEAR (URINE)		ORANGE TOP CONTAINER	10 ML URINE	MUST BE TRANSPORTED TO LAB AND HAVE SLIDES MADE WITHIN 3 HRS (1 HOUR IDEAL) FROM TIME OF COLLECTION STORE AT 4°C	SEND COOL	HEM
EPO	SEE ERYTHROPOIETIN LEVEL					
EPSTEIN BARR SCREEN	EBV SCREEN EBV ACUTE (IgG & IgM)	SST (GOLD)	1 ML SERUM	SEE BCCDC SEROLOGY REQ ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1HR CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
EPSTEIN BARR VIRUS BY PCR PEDIATRIC ORDER HOLD REF UNTIL BUILT IN CERNER	EBV BY PCR PED EBV VIRAL LOAD PED	RED TOP	2 ML SERUM	DO NOT CENTRIFUGE SEND CLOTTED RED TOP DO NOT OPEN STORE AT 4°C SPECIMEN MUST BE RECEIVED WITHIN 48 HRS OF COLLECTION	SEND COOL	BCCH
ERYTHROPOIETIN LEVEL w/ CBC	EPO ERYTHROID PROGENITOR ASSAY	SST (GOLD) OR RED TOP & 3.0 ML EDTA (LAVENDER)	1 ML SERUM	MORNING COLLECTION BETWEEN 0730-1200 RECOMMENDED CENTRIFUGE AND ALIQUOT SERUM WITHIN 2 HOURS OF COLLECTION FREEZE	SEND FROZEN	VGH
ERYTHROCYTE SEDIMENTATION RATE (6YRS – ADULT) ORDERS FOR ESR WILL BE CANCELLED IF ORDERED CONCURRENTLY WITH CRP AS IT IS THE MORE SENSITIVE TEST	ESR SED RATE	ESR TUBE (BLACK TOP) OR EDTA (LAVENDER) *ESR & CBC CAN BE TESTED ON SAME TUBE*	1.2ML WHOLE BLOOD FILL TUBE TO FILL LINE LOCATED AT BOTTOM OF WHITE LABEL SEE H ESR 0003 FOR PROCEDURE	OUTPATIENTS ONLY: INDICATION FOR ESR MUST BE PROVIDED ON THE REQUISITION AS PER MSP GUIDELINES MIX IMMEDIATELY BY INVERTING 8 TIMES, WITH EACH INVERSION THE BUBBLE IN THE TUBE MUST REACH THE TOP FOR AN ADEQUATE MIX APPLY LABEL ACROSS THE TUBE NEXT TO THE STOPPER BRING TO LAB IN A TIMELY MATTER SAMPLE SHOULD BE AT ROOM TEMP FOR TESTING STORE AT 4°C	SEND COOL	HEM
ERYTHROCYTE SEDIMENTATION RATE (PEDIATRIC 0 – 5 YRS)						

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

ESTRADIOL (ADULT >16)	ESTROGEN	SST (GOLD) OR RST (ORANGE)	0.5 ML SERUM	PATIENTS ON BIOTIN THERAPY SHOULD NOT HAVE SAMPLE DRAWN UNTIL AT LEAST 8 HOURS AFTER LAST BIOTIN ADMINISTRATION CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
ESTRIOL LEVEL ORDER HOLD REF UNTIL BUILT IN CERNER	ESTRIOL LEVEL UNCONJUGATED	SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT STORE AT 4°C STABLE FOR 14 DAYS AT 4°C OR 90 DAYS FROZEN	SEND COOL	HIC
ESTRADIOL LEVEL PEDIATRIC (0- 16 YRS)		Li HEP (PREFERRED) OR RED TOP NO SST/GEL	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH
ESTRONE		SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
ETHANOL LEVEL	ALCOHOL LEVEL ETOH LEVEL ALCOHOL ETHYL ALCOHOL C2H5OH	RED TOP OR RST (ORANGE) NO SST	0.5 ML SERUM	DO NOT USE ALCOHOL WIPE TO CLEAN VENEPUNCTURE SITE- USE IODINE-BASED ANTISEPTIC REGIONAL SAMPLES SENT TO UHNBC RED TOP – DO NOT CENTRIFUGE. SEND UNOPENED TUBE (STABLE 48 HRS) RST- SPIN AND SEND ENTIRE TUBE (DO NOT OPEN) (STABLE 4 DAYS) **TESTS CAN'T BE ADDED AS NON- ALCOHOL BASED PREP REQUIRED	SEND COOL	CHEM
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB

NH LABORATORY SERVICES TEST DIRECTORY

ETHANOL LEVEL – LEGAL (INPATIENT)	LEGAL ALCOHOL	RCMP ALCOHOL COLLECTION KIT		COLLECTION TO BE DONE BY PHYSICIAN ONLY		RCMP CRIME LAB
ETHANOL LEVEL, URINE – LEGAL LIFELABS OUTPATIENT ONLY	LEGAL ALCOHOL URINE ALCOHOL			DONE AT LIFELABS CHAIN OF CUSTODY & SUPERVISED COLLECTIONS		LIFELABS
ETHANOL LEVEL, URINE – NON-LEGAL	NON LEGAL URINE ALCOHOL	ORANGE TOP	10 MLS	STORE AT 4°C	SEND COOL	PROV TOX LAB
ETHCHLORVYNOL LEVEL (PLACIDYL)	NO LONGER AVAILABLE					
ETHOSUXIMIDE LEVEL	ZARONTIN LEVEL	RED TOP ONLY NO GEL	1 ML SERUM	DRAW SAMPLE PRIOR TO NEXT DOSE (MIN 12 HRS AFTER LAST DOSE) CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
ETHYLENE GLYCOL LEVEL	ANTI FREEZE	Li HEP (LT GREEN) OR SST (GOLD)	1 ML SERUM OR PLASMA	Approval requires physician-to- physician call between ordering provider and on-call Clinical/Medical Biochemist on- call (Call VGH switchboard and have them page) DO NOT USE ALCOHOL SWAB CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
ETHYL GLUCURONIDE URINE	NO LONGER AVAILABLE					
	LEGAL LEVEL DONE AT LIFELABS					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
EXPOSURE PROTOCOL	BBF EXPOSURE NEEDLESTICK BLOODWORK BLOOD & BODY FLUID BLOOD WORK	SST (GOLD)	1 ML SERUM	<u>INCLUDES:</u> HIV AND HEP C HEP EXPOSURE: <ul style="list-style-type: none"> HepBsAg Hep B Core Ab Total Hep B status ALL 3 TESTS DONE AT BCCDC SEND SPECIMENS WITH "MANAGEMENT OF PERCUTANEOUS OR PERMUCOSAL EXPOSURE TO BBF LAB REQUISITION" THIS NOTIFIES BCCDC TO EXPEDITE TESTING	SEND COOL	BCCDC
EXTRACTABLE NUCLEAR ANTIGEN IN PROGRESS TO HAVE TESTING DONE AT UHNBC	ENA ANTI-Ro (SSA) ANTI-La (SSB) ANTI-Sm SM ENA RNP JO1 SCL70 (SCLERODERMA) SJOGRENS ANTIBODY ANA SUBTYPES ENA 6 SCREEN from VGH includes: Sm Sm/Rnp SSA (Ro) SSB (La) Jo1 Scl70	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
EYE MUSCLE ANTIBODY	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
5-FLUCYTOSINE ORDER HOLD REF UNTIL BUILT IN CERNER	5FC LEVEL	RED TOP ONLY	2 ML SERUM	MUST INDICATE DOSAGE INTERVAL, DATE & TIME ON REQ COLLECT TROUGH ALLOW TO CLOT FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	LIFELABS
F7A (FACTOR VIIa) BLOOD PRODUCT FOR TRANSFUSION	NIASTASE			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISTION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
F8 (FACTOR VIII) BLOOD PRODUCT FOR TRANSFUSION	AHF ANTIHEMOPHILIA FACTOR			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISTION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
F9 (FACTOR IX) BLOOD PRODUCT FOR TRANSFUSION				SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISTION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FACTOR ASSAY (INCLUDES INR & APTT) ORDER INDIVIDUAL FACTOR: <ul style="list-style-type: none"> • FACTOR II • FACTOR V • FACTOR VII • FACTOR VIII • FACTOR IX • FACTOR X • FACTOR XI • FACTOR XII • FACTOR XIII 	BETHESDA ASSAY (FACTOR 8 OR 9 INHIBITOR): ORDER FACTOR VIII OR FACTOR IX BETHESDA ASSAY INCLUDED IN SCREEN THESE ARE PANELS THAT INCLUDE PT AND INR	SODIUM CITRATE (LIGHT BLUE)	2.0 ML PLASMA	ASSAY INCLUDES DETECTION OF BOTH INHIBITORY AND NON-INHIBITORY ANTIBODIES. SAMPLES REPORTED AS POSITIVE WILL BE FOLLOWED UP WITH A BETHESDA ASSAY TO CONFIRM TRUE ANTIBODY PRESENCE. BOTH RESULTS WILL BE REPORTED SEND INR & APPT RESULTS WITH SPECIMEN FILL TUBE COMPLETELY DOUBLE SPIN WITHIN 2HRS OF COLLECTION AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS
FACTOR V LEIDEN & PROTHROMBIN GENE VARIANT	THROMBOPHILIA DNA FACTOR V LEIDEN MUTATION PROTHROMBIN GENE VARIANT G20210A GENE G20210A ACTIVATED PROTEIN C RESISTANCE PROTEIN C RESISTANCE FACTOR II 20210 FACTOR V R506Q PROTHROMBIN MUTATION	7 ML EDTA (LAVENDER)	7 ML WHOLE BLOOD	VGH REPORTS BOTH TESTS NO MATTER WHICH TEST IS ORDERED FILL TUBE COMPLETELY DO NOT OPEN- DEDICATED TUBE STORE AT 4°C FOR QUESTIONS CONTACT VGH SPECIAL HEMATOLOGY : 1-604-875-4000 EXT 54393	SEND COOL	VGH
FACTOR Xa ACTIVITY	ANTI-Xa LOW MOLECULAR WEIGHT HEPARIN ACTIVITY HEPARIN ASSAY HEPARIN LEVEL ENOXAPARIN LOVENOX	SODIUM CITRATE (LIGHT BLUE)	1.5 ML PLASMA	SPECIFY THE TYPE OF HEPARIN AND DOSE TIME COLLECT 4 HOURS POST DOSE CENTRIFUGE WITHIN 1 HR OF COLLECTION DOUBLE-SPIN TO OBTAIN PLATELET POOR PLASMA FREEZE	SEND FROZEN	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FACTOR XA ACTIVITY PEDIATRIC	SEE FACTOR Xa ACTIVITY					
FATTY ACIDS, ESSENTIAL REQUIRES APPROVAL	C8 TO C26 SATURATED FATTY ACIDS POLYUNSATURATED MONOUNSATURATED TRANS FATTY ACIDS BRANCHED CHAIN FATTY ACIDS	EDTA (LAVENDER)		CONTACT CW BIOCHEMICAL GENETICS LABORATORY AT (604) 875-2307 FOR APPROVAL BY BIOCHEMICAL GENETICIST FASTING REQUIRED: <ul style="list-style-type: none"> ADULTS OVERNIGHT FAST (12HRS) INFANTS < 1 BEFORE NEXT FEED 2-4 HRS) COLLECT ON ICE DELIVER TO LAB WITHIN 30 MINS CENTRIFUGE 4°C AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	BCCH BGL WILL SEND TO KENNEDY KREIGER INSTITUTE IN BALTIMORE, MD
FATTY ACIDS, FREE		SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING SERUM FROM PATIENTS RECEIVING HEPARIN THERAPY ARE UNSUITABLE FOR ANALYSIS FASTING REQUIRED: <ul style="list-style-type: none"> ADULTS: OVERNIGHT (12 HRS) CHILDREN <1: BEFORE NEXT FEED (2-4 HRS) COLLECT ON ICE CENTRIFUGE 4°C AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	HIC
FATTY ACIDS – VERY LONG CHAIN	PHYTANIC ACID PRISTANIC ACID	LI HEPARIN (DARK GREEN)	2.0 ML PLASMA	KEEP ON ICE FASTING REQUIRED: <ul style="list-style-type: none"> ADULTS OVERNIGHT (12HRS) CHILD 1-12 YRS OVERNIGHT PREFERRED BUT MIN 4 HRS INFANTS <1 YR BEFORE NEXT FEED (2-4 HRS) CENTRIFUGE 4°C AND ALIQUOT FREEZE PLASMA	SEND FROZEN	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FECAL FAT SCREEN (RANDOM)	NO LONGER AVAILABLE					
FECAL FAT STUDY	FECAL FAT QUANTITATIVE	FECAL FAT CAN	24, 48 OR 72 HOUR COLLECTION AS ORDERED	SEE LIFELABS FECAL FAT COLLECTION INSTRUCTIONS KEEP STOOL COOL DURING COLLECTION SECURE CLIPS ON BUCKET UPON COMPLETION FREEZE ENTIRE SAMPLE MAKE NOTE OF LENGTH OF COLLECTION (24, 48 OR 72 HR) NOTE: LIFELABS WILL SHIP FREE FECAL FAT CANS: • ORDER @ 1-604-507-5126	SEND FROZEN	LIFELABS BURNABY
FENTANYL LEVEL		RED TOP	2 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT ROOM TEMP	SEND ROOM TEMP	PROV TOX LAB
FENTANYL CONFIRMATION URINE **LAB ONLY**	FENTANYL QUANTITATIVE	ORANGE TOP CONTAINER	10 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL OR FROZEN	PROV TOX LAB
FOR SCREENING ORDER DRUG SCREEN, URINE						
FETAL CELLS/ FETAL CELL STAIN/ACID ELUTION TEST	SEE KLEIHAUER-BETKE					
FETAL BLEED SCREEN	ROSETTE FBS	EDTA (LAVENDER)	5ML WHOLE BLOOD	COLLECT MIN 1 ML EDTA FROM MOM	SEND COOL	TMS
FERRITIN	FERR	SST (GOLD)	0.5 ML SERUM	FASTING IS NOT REQUIRED CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FETAL LUNG MATURITY	NO LONGER AVAILABLE					
FIBRIN DEGRADATION PRODUCTS	SEE D-DIMER					
FIBRINOGEN	FIB	SODIUM CITRATE (LIGHT BLUE)	1 ML PLASMA	FILL TUBE COMPLETELY IF TESTING DELAYED >4 HOURS: <ul style="list-style-type: none"> DOUBLE SPIN AND ALIQUOT INTO A POLYPROPYLENE TUBE FREEZE <u>STABILITY (DOUBLE SPUN & ALIQUOT):</u> <ul style="list-style-type: none"> UNSPUN WHOLE BLOOD- 4 HRS @ RT DOUBLE SPUN FROZEN- 2 WEEKS @ -20°C 	SEND PLASMA FROZEN	HEM
FIBRONECTIN, FETAL **COLLECTED BY WARD** OBTAIN FFN SWAB FROM UHNBC CHEMISTRY DEPT	FETAL FIBRONECTIN FFN	SPECIAL SWAB		DO NOT EXAMINE PATIENT VAGINALLY PRIOR TO SWAB COLLECTION OR RESULTS WILL BE INVALID REPEAT SWABS CANNOT BE DONE WITHIN 24 HRS- RESULTS ARE INVALID <u>STABILITY OF SWABS:</u> <ul style="list-style-type: none"> 8 HRS @ RT 3 DAYS @ 4°C 3 MONTHS @ -30C 	SEND ROOM TEMP	CHEM
FILARIA ANTIBODY	FILARIA SEROLOGY FILARIASIS	SST (GOLD)	2 ML SERUM	COLLECT AT LEAST 1 HR POST MEAL TO AVOID LIPEMIA CENTRIFUGE (CAN ALIQUOT IF CHANCE OF FREEZING) STORE AT 4°C	SEND COOL	BCCDC
FILARIA ANTIGEN ORDER HOLD REF UNTIL BUILT IN CERNER	FILARIA SEROLOGY FILARIASIS	SST (GOLD)	2 ML SERUM	COLLECT AT LEAST 1 HR POST MEAL TO AVOID LIPEMIA CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FINE NEEDLE ASPIRATE	SEE CYTOLOGY SEE PRESERVATIVE TABLE					
FIT TESTING COLON SCREENING PROGRAM		FIT KIT		SEE LIFELABS FIT INSTRUCTIONS STORE AT 4°C	SEND COOL	LIFELABS
FIT OTHER INDICATORS	OCCULT BLOOD	FIT KIT		SEE LIFELABS FIT INSTRUCTIONS STORE AT 4°C	SEND COOL	LIFELABS
FLUORESCENCE IN SITU HYBRIDIZATION- ADULT	FISH FISH MOLECULAR GENETICS	7ML SODIUM HEPARIN (DARK GREEN)	7 ML SODIUM HEPARIN	SEE BCCA SPECIMEN GUIDELINES USE BCCA MYELOID TESTING REQ OR BCCA LYMPHOID TESTING REQ COLLECT BEFORE NOON MONDAY TO THURSDAY ONLY MUST INDICATE TESTS REQUIRED KEEP AT ROOM TEMP SHIP SAME DAY AS COLLECTED	SEND AT ROOM TEMP	BCCA
		BONE MARROW: 2 X 15 ML MEDIA TUBE	2 X 5 ML BONE MARROW			
FLUORESCENCE IN SITU HYBRIDIZATION- PEDIATRIC	FISH FISH MOLECULAR GENETICS CMA FOLLOW UP	4.5ML SODIUM HEPARIN (DARK GREEN)	1 ML SODIUM HEPARIN WHOLE BLOOD 0.5 ML ABSOLUTE MIN FROM NEONATES	COLLECT BEFORE NOON MONDAY TO THURSDAY ONLY MUST USE POSTNATAL CONSTITUTIONAL CYTOGENETICS REQUISITION KEEP AT ROOM TEMP SHIP SAME DAY AS COLLECTED MUST BE RECEIVED WITHIN 72 HRS OF COLLECTION	SEND AT ROOM TEMP	BCCH
FK506	SEE TACROLIMUS					


NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FLOW CYTOMETRY - BCCA (INCLUDES CBC) BCCA PERFORMS FLOW FOR THE FOLLOWING DISORDERS: <ul style="list-style-type: none">LYMPHOMACHRONIC B OR T CELL LEUKEMIALYMPHO-PROLIFERATIVE DISORDERS SEE FLOW CYTOMETRY – VGH FOR OTHER DISORDERS	FLOW CELL FLOW			USE FLOW CYTOMETRY REQ AND INDICATE DISORDER FOR CELL FLOW DETERMINATION COLLECT MON–THUR BEFORE 12	SEND ROOM TEMP	BCCA
		PERIPHERAL BLOOD: SEND CBC RESULTS & 2 UNSTAINED AND UNFIXED SLIDES ALONG WITH EDTA: 2- EDTA (LAVENDER) – FLOW & CBC MINIMUM: 4ML WHOLE BLOOD (FLOW)& 1.0 ML WHOLE BLOOD (CBC)		SEND SAME DAY		
		BONE MARROW: ADD 1 ML PHOSPHATE BUFFERED SALINE TO EDTA ADD MINIMUM 2 ML FRESH BONE MARROW INTO EDTA SEND CBC RESULTS & 2 UNSTAINED/UNFIXED SLIDES AND EDTA TUBE				
		TISSUE: REFER TO LYMPHOMA PROTOCOL		SEND COOL ON ICE PACK DO NOT FREEZE		
		FINE NEEDLE ASPIRATE: MIN: 1 ML FINE NEEDLE ASPIRATE DISPENSED INTO 1.0 ML BUFFERED SALINE THEN INTO EDTA (LAVENDER)				
		BODY FLUID: MIN 10 ML BODY FLUID IN 2- 7.0 ML EDTA				
		VITREOUS FLUID FROM EYE: MIN 1 ML VITREOUS FLUID IN AN ORANGE TOP CONTAINER- DO NOT FIX SEND COOL TO BCCA SAME DAY				
FLOW CYTOMETRY – VGH (INCLUDES CBC) VGH PERFORMS FLOW ON THE FOLLOWING DISORDERS: <ul style="list-style-type: none">ACUTE LEUKEMIAPAROXYSMAL NOCTURNAL HEMO GLOBINURIA (PNH)MYELOYDYSPLASIAMYELO-PROLIFERATIVE DISORDER SEE FLOW CYTOMETRY– BCCA FOR OTHER DISORDERS	FLOW CELL FLOW	7 ML EDTA (LAVENDER)	5 ML WHOLE BLOOD (7ML EDTA)	USE FLOW CYTOMETRY REQUISITION AND INDICATE DISORDER FOR CELL FLOW DETERMINATION COLLECT MON – THUR BEFORE NOON. PERIPHERAL BLOOD: SEND CBC RESULTS & 2 WRIGHT’S STAINED SLIDES ALONG WITH 5 ml EDTA SPECIMEN FOR BONE MARROW: SEND CBC RESULTS & 2 UNSTAINED MARROW SLIDES ALONG WITH EDTA SPECIMEN	SEND ROOM TEMP SEND SAME DAY	VGH
			2 ML BONE MARROW ASPIRATE IN EDTA			

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FLT-3 GENE MUTATION	FLT3	2 x 7.0 ML EDTA (LAVENDER)	14 ML WHOLE BLOOD	COLLECT MON-THURS BEFORE NOON SEND SAME DAY AS COLLECTION MUST USE BCCA CANCER GENETICS REQUISITION	SEND AT ROOM TEMP	BCCA
FLUNITRAZEPAM LEVEL URINE	ROHYPNOL LEVEL	ORANGE TOP CONTAINER RANDOM URINE	5 ML URINE	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING STORE AT 4°C	SEND COOL	HIC
FOLATE LEVEL (RBC FOLATE, FOLIC ACID)	NO LONGER AVAILABLE TESTING BEFORE SUPPLEMENTATION IS NO LONGER CONSIDERED MEDICALLY NECESSARY FOLATE WAS DELISTED FROM THE MSP FEE SCHEDULE OCT 1, 2010					
FOLLICLE STIMULATING HORMONE LEVEL	FSH LEVEL	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
FOLLICULAR LYMPHOMA GENETIC TEST ORDER HOLD REF UNTIL TEST BUILT IN CERNER	BCL2 FISH BCL2 LEUKEMIA LYMPHOMA GENETIC TEST	NA HEPARIN (DARK GREEN)	5 ML WHOLE BLOOD	MUST SEND VGH HEMATOLOGICAL NEOPLASIA REQ STORE AT ROOM TEMP	SEND ROOM	VGH
FMR1 RELATED DISORDERS ORDER HOLD REF UNTIL TEST BUILT IN CERNER	FMR1 FMR-1 FRAGILE X SYNDROME MARTIN BELL SYNDROME	7.0 ML EDTA (LAVENDER)	1 ML EDTA WHOLE BLOOD 4 ML PREFERRED	SEE BCCH MOLECULAR GENETICS LABORATORY REQUISITION SEND SAME DAY COLLECT MONDAY TO THURSDAY – NO WEEKEND ARRIVAL SPECIAL ARRANGEMENTS FOR WEEKEND TESTING MAY BE AVAILABLE AFTER PHONE CONSULTATION WITH CYTOGENETICS AT (604) 875-2304 STORE AT ROOM TEMP	SEND ROOM TEMP SAME DAY	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
FREE ERYTHROCYTE PROTOPORPHYRIN 	PORPHYRIN FREE ERYTHROCYTE FEP ANTI-POLYMERASE	EDTA (LAVENDER)	2 ML WHOLE BLOOD	PROTECT FROM LIGHT REQUIRES HCT RESULT STORE AT 4°C	SEND WHOLE BLOOD COOL	VGH
FROZEN PLASMA BLOOD PRODUCT FOR TRANSFUSION	PLASMA			GROUP & SCREEN MAY BE REQUIRED - CONTACT TRANSFUSION MEDICINE DEPARTMENT		
FT3	SEE T3, TOTAL OR T3, FREE					
FT4	SEE T4, FREE					
FTA (FLUORESCENT TREPONEMAL ANTIBODY)	SEE SYPHILLIS					
FUNGAL BLOOD CULTURE	FUNGAL BC	2- NA HEPARIN (DARK GREEN) NO	2- 4.5 ML WHOLE BLOOD	2 – NA CITRATE ALSO ACCEPTABLE DO NOT CENTRIFUGE STORE AT ROOM TEMP	SEND ROOM TEMP	BCCDC
FUNGAL CULTURE LIFELABS- HAIR, SKIN OR NAILS (FOR BLOOD SEE FUNGAL BLOOD CULTURE)	KOH TESTING DERMATOPHYTE TESTING	ORANGE TOP CONTAINER		PLACE SKIN, HAIR OR NAILS INTO ORANGE TOP CONTAINER DO NOT SUBMIT SCALPEL BLADES STORE AT ROOM TEMP	SEND AT ROOM TEMP	LIFELABS BURNABY
FUNGAL CULTURE - BCCDC FOR HAIR, SKIN, NAILS SEE FUNGAL CULTURE LIFELABS	FUNGAL CULTURE MYCOLOGY	SPS GLASS TUBE: <ul style="list-style-type: none"> Blood SWAB: <ul style="list-style-type: none"> STERILE SITE ONLY ORANGE TOP CONTAINER:		NOT SKIN, HAIR, NAILS, STOOL, URINE OR BLOOD STORE AT ROOM TEMP	SEND AT ROOM TEMP	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

FOR BLOOD SEE FUNGAL BLOOD CULTURE		<ul style="list-style-type: none"> • 10 ML BODY FLUID • 3-5 ML BONE MARROW • 0.5 ML CSF • TISSUE/BIOPSY (NO FORMALIN) • ASPIRATE (EXUDATE, PUS, ABSCESS) 			
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
GABAPENTIN LEVEL ORDER HOLD REF UNTIL BUILT IN CERNER	NEURONTIN	RED TOP ONLY NO SST/GEL	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX
GALACTOSE-1-PHOSPHATE TEST RESTRICTED TO KNOWN GALACTOSEMIA PATIENTS	G1P GALACTOSE-1-PHOSPHATE URIDYLTRANSFERASE GALT GALACTOSEMIA	SODIUM HEPARIN (DARK GREEN)	2 ML WHOLE BLOOD	<u>FASTING REQUIRED</u> ADULTS: MIN 12 HRS CHILDREN: 3- 4 HRS BABIES: COLLECT BEFORE NEXT FEED	SEND FROZEN	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

FOR GALACTOSEMIA SCREENING, COLLECT PKU CARD AND MARK <u>GALT</u> ON CARD	MONITORING			DO NOT COLLECT AFTER RED BLOOD CELL TRANSFUSION-INVALID RESULT ***** SPECIMENS MUST REACH BCCH WITHIN 3 HRS OF COLLECTION @ ROOM TEMP-COLLECT AT BCCH CAN DO A WASHING STEP TO ENABLE RBCS TO BE FROZEN		
GAMMA GLUTAMYL TRANSFERASE	GGT	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
GAMMA HYDROXYBUTYRATE	GHB	ORANGE TOP CONTAINER	10 ML URINE	COLLECT ASAP AFTER INGESTION TESTING NOT RECOMMENDED >12HR POST STORE AT 4°C	SEND COOL	PROV TOX LAB

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

GASTRIN LEVEL		SST (GOLD) OR RED TOP	1 ML SERUM	OVERNIGHT FAST REQUIRED (10-12 HOURS): NO SMOKING, EATING, DRINKING OR CHEWING GUM PRIOR INDICATE ALL MEDICATIONS ALL ANTACID MEDICATIONS SHOULD BE DISCONTINUED FOR 24 HOURS BEFORE COLLECTION COLLECT ON ICE AND BRING IMMEDIATELY TO LAB CENTRIFUGE AT 4°C AND ALIUQUOT WITHIN 1 HR FREEZE IMMEDIATELY	SEND FROZEN	BCCA
GASTROCCULT	SEE OCCULT BLOOD, BODY FLUID					
GENTAMICIN LEVEL- TROUGH, PEAK OR RANDOM	GENT	RED TOP OR RST (ORANGE) NO SST	1 ML SERUM	TROUGH: 8 HR DOSING -COLLECT 30 MINUTES PRIOR TO NEXT DOSE DAILY DOSING – COLLECT 6 HRS PRIOR TO NEXT DOSE PEAK (IV): COLLECT 30 MINUTES AFTER END OF IV INFUSION PEAK (IM): COLLECTED 60 MINUTES AFTER INJECTION **PEAK LEVELS ARE NOT REQUIRED IN THE MAJORITY OF PATIENTS** CENTRIFUGE AND ALIUQUOT IF RED TOP STORE AT 4°C	SEND COOL	CHEM

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

GFR- GLOMERULAR FILTRATION RATE	SEE CREATININE					
GLOMERULAR BASEMENT MEMBRANE ANTIBODY	ANTI-GBM	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
GLUCOSE, BODY FLUID	BODY FLUID GLUCOSE	ORANGE TOP CONTAINER	0.5 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
GLUCOSE, CEREBROSPINAL FLUID	CSF GLUC CSF GLUCOSE	CSF TUBE	1 ML CSF			
GLUCOSE, FASTING	FASTING GLUCOSE	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	CENTRIFUGE STORE AT 4°C (POST PRANDIAL GLUCOSE NOT DONE)		
GLUCOSE, RANDOM						
GLUCOSE TOLERANCE, GESTATIONAL SCREEN	PREGNANCY TOLERANCE SCREEN 50 g GTT OGTT	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	FOR PREGNANT WOMEN 14-28 WEEKS GESTATION: <ul style="list-style-type: none"> FASTING NOT REQUIRED PATIENT IS GIVEN 50g GLUCOLA DRINK SHOULD BE CONSUMED WITHIN 5 MINS PATIENT SHOULD REMAIN IN LAB DURING ENTIRE TEST STOP TEST IF PATIENT FEELS ILL OR VOMITS <p>BLOOD IS DRAWN 1 HOUR AFTER DRINKING GLUCOLA</p> <p>CENTRIFUGE AND ALIQUOT SERUM</p> <p>STORE AT 4°C</p> <p>PRODUCT INFO: https://ca.vwr.com/store/catalog/product.jsp?catalog_number=CA11006-153 </p>	SEND COOL	CHEM
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB

NH LABORATORY SERVICES TEST DIRECTORY

GLUCOSE TOLERANCE, GESTATIONAL 2 HOUR	2HR GLUCOSE TOLERANCE 2HR GTT GLUCOSE TOLERANCE CONFIRMATION 2HR OGTT	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	FOR PREGNANT WOMEN 14- 28 WEEKS GESTATION TO CONFIRM GESTATIONAL DIABETES: <ul style="list-style-type: none"> FASTING REQUIRED PATIENT IS GIVEN 75g GLUCOLA DRINK SHOULD BE CONSUMED WITHIN 5 MINS PATIENT SHOULD REMAIN IN LAB DURING ENTIRE TEST STOP TEST IF PATIENT FEELS ILL OR VOMITS DRAW : BASELINE, 1HR & 2HR CENTRIFUGE AND ALIQUOT STORE AT 4°C PRODUCT INFO: https://ca.vwr.com/store/catalog/product.jsp?catalog_number=CA11006-153	SEND COOL	CHEM
GLUCOSE TOLERANCE 2 HOUR		PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	FOR NON-PREGNANT PATIENTS TO CONFIRM DIABETES: <ul style="list-style-type: none"> DO NOT DO TOLERANCE TEST IF PATIENT ALREADY DIABETIC FASTING REQUIRED PATIENT IS GIVEN 75g (OR 1.75g/kg FOR CHILDREN UNDER 12) GLUCOLA DRINK SHOULD BE CONSUMED WITHIN 5 MINS PATIENT SHOULD REMAIN IN LAB DURING ENTIRE TEST STOP TEST IF PATIENT FEELS ILL OR VOMITS DRAW : BASELINE & 2HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

GLUCOSE TOLERANCE, 5 HOUR		PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM	FOR NON-PREGNANT PATIENTS TO CONFIRM HYPOGLYCEMIA. DO NOT DO TOLERANCE TEST IF PATIENT ALREADY DIAGNOSED WITH HYPOGLYCEMIA: <ul style="list-style-type: none"> FASTING REQUIRED PATIENT IS GIVEN 75g (OR 1.75g/kg FOR CHILDREN UNDER 12) GLUCOLA DRINK SHOULD BE CONSUMED WITHIN 5 MINS PATIENT SHOULD REMAIN IN LAB DURING ENTIRE TEST STOP TEST IF PATIENT FEELS ILL OR VOMITS DRAW: BASELINE, 1HR, 2HR, 3HR, 4HR, 5HR CENTRIFUGE AND ALIQUOT STORE AT 4°C https://ca.vwr.com/store/catalog/product.jsp?catalog_number=CA11006-153	SEND COOL	CHEM
GLUCOSE-6-PHOSPHATE DEHYDROGENASE QUANTITATIVE SCREEN SHOULD BE PERFORMED FIRST ORDER HOLD REF UNTIL BUILT IN CERNER	G6PD ASSAY	EDTA (LAVENDER)	1 ML WHOLE BLOOD	HEMATOPATHOLOGIST APPROVAL REQUIRED G6PD SCREEN SHOULD BE PERFORMED FIRST TESTING SHOULD NOT BE PERFORMED AFTER A RECENT RED BLOOD CELL TRANSFUSION OR HEMOLYTIC CRISIS HEMOGLOBIN RESULT REQUIRED WITH SPECIMEN COLLECT ON ICE DO NOT FREEZE STORE AT 4°C	SEND COOL	BCCH
GLUCOSE-6-PHOSPHATE DEHYDROGENASE QUALITATIVE	G6PD SCREEN	EDTA (LAVENDER)	3 ML WHOLE BLOOD	TESTING SHOULD NOT BE PERFORMED AFTER A RECENT RED BLOOD CELL TRANSFUSION OR HEMOLYTIC CRISIS COLLECT ON ICE DO NOT FREEZE STORE AT 4°C	SEND COOL	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
GLUTAMATE DECARBOXYLASE 65 ANTIBODY NO LONGER MSP BILLABLE	GAD 65 GAD 65 ANTIBODY	SST (GOLD) OR RED TOP	1 ML SERUM	MUST USE MITOGEN AUTOANTIBODY REQUISITION CENTRIFUGE AND ALIQUOT IMMEDIATELY FREEZE THAWED SPECIMENS ARE UNSUITABLE FOR ANALYSIS REPEATED FREEZE/THAWS UNACCEPTABLE	SEND FROZEN	MADL
GLUTETHIMIDE LEVEL	NO LONGER AVAILABLE					
GRAM STAIN		SEE SPECIFIC CULTURE TYPE		A GRAM STAIN WILL BE ROUTINELY PERFORMED AND REPORTED AS PART OF MOST SPECIMEN CULTURES REQUESTS FOR GRAM STAINS WILL ONLY BE PERFORMED IF APPROPRIATE		MICRO
GRANULOCYTE ANTIBODY	NO LONGER AVAILABLE					
GROUP & CROSSMATCH UHNBC ONLY- ORDER GROUP AND CROSSMATCH AUTO	CROSSMATCH TYPE & CROSSMATCH	2 x 7.0 ML EDTA (LAVENDER)		ADULT: COLLECT MIN 1-7ML EDTA CHILD: COLLECT MIN 2ML EDTA NEONATE: COLLECT MIN 0.5ML EDTA* (DO ANTIBODY SCREEN ON MATERNAL SAMPLE) *COLLECT MIN 1ML EDTA IF ANTIBODY SCREEN IS DONE ON NEONATE SAMPLE BBID REQUIRED WHEN TRANSFUSION OF RED CELLS IS INDICATED	SEND COOL	TMS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
GROUP & SCREEN	G&S GROUP & ANTIBODY SCREEN ABO/D	2 x 7 ML EDTA (LAVENDER)		ADULT: COLLECT MIN 1-7ML EDTA CHILD: COLLECT MIN 2ML EDTA NEONATE: COLLECT MIN 0.5ML EDTA* (DO ANTIBODY SCREEN ON MATERNAL SAMPLE) *COLLECT MIN 1ML EDTA IF ANTIBODY SCREEN IS DONE ON NEONATE SAMPLE BBID REQUIRED WHEN TRANSFUSION OF RED CELLS IS INDICATED	SEND COOL	TMS
UHNBC ONLY- ORDER GROUP AND SCREEN AUTO						
GROWTH HORMONE	GH LEVEL SOMATOTROPIN SOMATOTROPHIC HORMONE	SST (GOLD) OR RED TOP	1 ML SERUM 0.5 ML FOR NEONATES	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	ST PAULS
GROWTH HORMONE, PEDIATRIC	SEE GROWTH HORMONE					
GROWTH HORMONE STIMULATION	INSULIN HYPOGLYCEMIA STIMULATION	SST (GOLD)	1 ML SERUM	PATIENT IS FASTING AND RESTING 10 – 16 HRS PATIENT GIVEN 0.10 u/kg INSULIN DRAW GLUCOSE AND GROWTH HORMONE AT: 0, 30, 60, 90 MINS	SEND COOL	ST PAULS
	L-DOPA STIMULATION			PATIENT IS FASTING AND RESTING 10 – 16 HRS PATIENT GIVEN 500mg L-dopa DRAW GROWTH HORMONE AT: 0, 30,60,90,120,180 MINS ***** CENTRIFUGE AND ALIQUOT STORE AT 4°C		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
GROWTH HORMONE STIMULATION	GROWTH HORMONE STIMULATION TEST- ARGININE	RED TOP	1 ML SERUM	BASELINE LEVEL TAKEN PATIENT GIVEN EITHER ARGININE OR GLUCAGON ARGININE – COLLECT @ 0 (BASELINE), 30, 60, 90 MINS	SEND FROZEN	BCCH
	GROWTH HORMONE STIMULATION TEST- GLUCAGON			GLUCAGON – COLLECT @ 0 (BASELINE), 30, 60, 90, 120, 150, 180 MINS ***** CENTRIFUGE AND ALIQUOT FREEZE		
GROWTH HORMONE GLUCOSE SUPPRESSION TEST	GROWTH HORMONE WITH GLUCOSE LOAD	SST (GOLD)	1 ML SERUM	PATIENT IS FASTING AND RESTING 10 – 16 HRS. DRAW FASTING GLUCOSE AND GROWTH HORMONE PATIENT GIVEN 75g GLUCOLA DRINK DRAW GROWTH HORMONE AT: 30, 60, 90 & 120 MINS. CENTRIFUGE AND ALIQUOT STORE AT 4°C SEND FASTING GLUCOSE RESULTS WITH SPECIMEN	SEND COOL	ST PAULS
GROWTH HORMONE SUPPRESSION, PEDIATRIC	SEE GROWTH HORMONE GLUCOSE SUPPRESSION TEST					
GTT	SEE GLUCOSE TOLERANCE TEST					

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
H PYLORI	SEE HELICOBACTER PYLORI					
HANTAVIRUS ANTIBODY	HANTAVIRUS IgG & IgM	SST (GOLD)	1 ML SERUM	SEE BCCDC ZONOTICS REQ CENTRIFUGE DO NOT ALIQUOT OR OPEN STORE AT 4°C	SEND COOL	BCCDC
HAPTOGLOBIN		SST (GOLD)	1 ML SERUM	AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
HDL	SEE HIGH DENISTY LIPOPROTEIN					
HEAVY METAL SCREEN - ARSENIC - LEAD - MERCURY - CHROMIUM	SEE INDIVIDUAL TESTS					
HEINZ BODY STAIN		EDTA (LAVENDER)	2 ML WHOLE BLOOD	STORE AT ROOM TEMP	SEND AT ROOM TEMP	HEM
HELICOBACTER PYLORI BREATH TEST	SEE HELICOBACTER PYLORI STOOL ANTIGEN TEST			NO LONGER ORDERING IN NH AS PER NOV. 2021 MEMO.		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HELICOBACTER PYLORI ANTIBODY	H PYLORI H PYLORI SEROLOGY	SST (GOLD)	3 ML SERUM	SEE BCCDC SEROLOGY SCREENING REQ COLLECT MIN 1 HR POST MEAL ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
HELICOBACTER PYLORI ANTIGEN STOOL TEST ORDER HOLD REF UNTIL RE-ROUTED	H. PYLORI STOOL Ag	STERILE CONTAINER	5g FORMED STOOL - WATERY DIARRHEAL STOOLS NOT ACCEPTED	SEE LIFELABS H. PYLORI STOOL ANTIGEN PATIENT INSTRUCTIONS ***ENSURE PATIENT IS AWARE OF MEDICATION REQUIREMENTS*** STORE COOL DURING COLLECTION DEDICATED SAMPLE MUST INCLUDE PATIENTS PHN FOR BILLING PURPOSES STORE AT 4°C	SEND COOL	LIFELABS
HEMOCHROMATOSIS SEE http://www.genebc.ca/ SEE HEMOCHROMATOSIS ORDERING ALGORITHM SEE BC OUTPATIENT REQ	HEMOCHROMATOSIS SIBLING PARENT C282Y/C282Y	EDTA (LAVENDER)	7 ML EDTA WHOLE BLOOD	COLLECT MON-THURS ONLY STORE AT ROOM TEMPERATURE SEND WHOLE BLOOD AT ROOM TEMP WITHIN 72 HOURS	SEND ROOM TEMP	BCCH MOLECULAR GENETICS LAB
	HEMOCHROMATOSIS CONFIRM DIAGNOSIS	EDTA (LAVENDER) AND SST (GOLD)	7 ML EDTA WHOLE BLOOD 1 ML SERUM	ALLOW SST TO CLOT UPRIGHT FOR 30 MINS CENTRIFUGE SST AND ALIQUOT STORE SST AT 4°C STORE EDTA AT ROOM TEMP	SEND COOL AND ROOM TEMP	
HEMOGLOBIN	SEE COMPLETE BLOOD COUNT (CBC)					

NH LABORATORY SERVICES TEST DIRECTORY

HEMOGLOBIN A₁C	HB A1C HGB A1C GLYCOLYLATED HEMOGLOBIN	EDTA (LAVENDER)	3 ML WHOLE BLOOD	STABLE FOR 1 WEEK @ RT STABLE FOR 4 WEEKS @ 4°C STORE AT 4°C	SEND COOL	CHEM
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HEMOGLOBIN A2	SEE HEMOGLOBIN ELECTROPHORESIS					
HEMOGLOBIN INVESTIGATION	HGB EP HGB F HGB A2 HGB S BETA THALASSEMIA THALASSEMIA SCREEN H INCLUSION BODIES HGB ELECTROPHORESIS	EDTA (LAVENDER)	1 ML WHOLE BLOOD	GIVE SAMPLE TO HEMATOLOGY DEPT. CBC RESULTS AND STAINED PERIPHERAL SLIDES MUST BE SENT ALONG WITH EDTA SPECIMEN TO BCCH PERIPHERAL SLIDES MUST BE MADE WITHIN 1 HR OF COLLECTION ***** PROCEDURE: <ul style="list-style-type: none"> RUN CBC & PRINT RESULTS PREPARE 2 WRIGHT'S STAINED SLIDES BRING EDTA SAMPLE, SLIDES & CBC RESULTS TO THE SEND OUT BENCH NO FERRITIN COLLECTION REQUIRED STORE AT 4°C	SEND COOL	BCCH
HEMOGLOBIN S SCREEN	SICKLE CELL SCREEN SICKLE CELL DISEASE SICKLE CELL ANEMIA SICKLEDEX SICKLE CELL SOLUBILITY TEST	EDTA (LAVENDER)	1 ML WHOLE BLOOD	STORE AT ROOM TEMP SEND WHOLE BLOOD PREVENT FREEZING	SEND AT ROOM TEMP	BCCH
HEMOLYTIC DISEASE OF THE NEWBORN	SEE MATERNAL/ INFANT INVESTIGATION -HDN					
HEMOSIDERIN, URINE	TEST DISCONTINUED AT NH LABS REQUIRES CONSULT WITH HEMATOPATHOLOGIST AT ST PAULS HOSPITAL (ORDER HEMOSIDERINE URINE REFERRAL)					

NH LABORATORY SERVICES TEST DIRECTORY

HEPATITIS ACUTE	ORDER HEP ACUTE					
HEPATITIS CHRONIC (CARRIER)	ORDER HEP CHRONIC					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HEPATITIS A ANTIBODY IgM	HEP A Ab IgM HEP ACUTE	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	MICRO
HEPATITIS A ANTIBODY IgG	HEP A Ab TOTAL HEP A IMMUNE STATUS (POST HEP A VACCINE) HEP A IgG	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
HEP B IMMUNE GLOBULIN BLOOD PRODUCT FOR TRANSFUSION	HBIG			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUESTION. SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
HEP B VACCINE BLOOD PRODUCT FOR TRANSFUSION	HVAX					
HEP B MARKERS	ORDER: HBsAg, HBsAb, & HEP B CORE AB TOTAL					
HEPATITIS B CORE ANTIBODY IgM	HEP B CORE Ab IgM	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

HEPATITIS B CORE ANTIBODY TOTAL	HEP B CORE Ab TOTAL ANTI HEP Bc ANTI HEP B CORE ANTI- HBc	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	MICRO
HEPATITIS B CORE ANTIGEN (HBcAg)	TEST DOES NOT EXIST					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HEPATITIS B DNA QUANTITATIVE (PCR)	HEP B DNA PCR HEP B VIRAL LOAD	7.0 ML EDTA (LAVENDER)	3 ML PLASMA	CENTRIFUGE 15 MINUTES AT ROOM TEMP AT 1600 RCF ASEPTICALLY REMOVE PLASMA FROM THE RED CELLS WITHIN 24 HOURS OF COLLECTION AND PLACE IN STERILE CRYOVIAL STORE AT 4°C IF SENDING IN <6 DAYS, OTHERWISE FREEZE	SEND COOL IF <6 DAYS SEND FROZEN ON DRY ICE IF >6 DAYS TDG CAT B	ST PAULS
HEPATITIS B ENVELOPE ANTIBODY	HEP B ENVELOPE Ab	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
HEPATITIS B ENVELOPE ANTIGEN	HEP B ENVELOPE Ag	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
HEPATITIS B SURFACE ANTIBODY	HBsAb HEP Bs Ab HEP B IMMUNIZATION STATUS (POST HEP B VACCINE) ANTI-HEP Bs ANTI – HBS HEP B TITRE	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

HEPATITIS B SURFACE ANTIGEN	HBsAg HEP Bs Ag HBV PRENATAL HEP B	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	MICRO
HEPATITIS C GENOTYPING	HEP C GENOTYPING HCV GENOTYPING	7 ML EDTA (LAVENDER)	3 ML WHOLE BLOOD PEDS: MIN 3 ML WHOLE BLOOD	SEE BCCDC VIROLOGY REQUISITION INDICATE IF PATIENT IS ON INTERFERON **DO NOT OPEN TUBE AND DO NOT SPIN** – MUST BE A DEDICATED TUBE STORE AT 4°C (STABLE 7 DAYS) DO NOT COLLECT FRI-SUN	SEND COOL TDG CAT B	BCCDC
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HEPATITIS C PCR QUALITATIVE (FOR DIAGNOSIS) ** ONLY DONE WHEN HEP C SEROLOGY IS INCONCLUSIVE **	QUALITATIVE HCV RNA	7.0 ML EDTA (LAVENDER)	3 ML WHOLE BLOOD PEDS: MIN 3 ML WHOLE BLOOD	SEE BCCDC SEROLOGY SCREENING REQUISITION AND INDICATE HEP C PCR NEONATES: MOM MUST BE HEP C + **DO NOT OPEN TUBE AND DO NOT SPIN** – DEDICATED TUBE STORE AT 4°C (STABLE 7 DAYS)	SEND COOL TDG CAT B	BCCDC
HEPATITIS C ANTIBODY	HEP C Ab ANTI HCV HCV	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C IF NO CENTRIFUGE AVAILABLE, STABLE FOR 72 HRS UNSPUN SAMPLES FOR SCREENING DO NOT NEED TO BE SENT TDG CATEGORY B TRANSPORT AS TDG CATEGORY B ONLY IF PERONS AND SAMPLES SUSPICIOUS OR COMFIRMED TO BE HEP C + According to BCCDC: patients who have a positive antibody test along with a negative RNA test have had an infection that has been cleared. He or she is not infected now and samples do not need to be sent TDG	SEND COOL TDG CAT B	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

HEPATITIS C PCR QUANTITATIVE (ON TREATMENT)	QUANTITATIVE HCV RNA HEP C VIRAL LOAD	7.0 ML EDTA (LAVENDER)	3 ML WHOLE BLOOD PEDS: MIN 3 ML WHOLE BLOOD	USE BCCDC SEROLOGY SCREENING REQUISITION INDICATE IF PATIENT IS ON INTERFERON PATIENT MUST BE HEP C + **DO NOT OPEN TUBE AND DO NOT SPIN** – MUST BE A DEDICATED TUBE STORE AT 4°C STABLE AT 4°C FOR 7 days	SEND COOL TDG CAT B	BCCDC
HEPATITIS DELTA ANTIBODY	HEP DELTA Ab	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HEPATITIS E ANTIBODY	HEP E Ab	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
HEROIN	SEE URINE DRUG SCREEN					
HERPES SIMPLEX VIRUS 1 AND 2 NAT ORDER HOLD REF UNTIL BUILT IN CERNER	HSV PCR	STERILE CSF TUBE	500µL	SWABS, SCRAPINGS OR FLUIDS STORE AT 4°C AFTER COLLECTION BCCDC DOES PCR ON ALL SPECIMEN TYPES: BLOOD, CSF, VESICLE, TISSUE, SKIN, AND EYE *****BLOOD AND SKIN FOR NEONATES <28 DAYS ONLY *****	SEND COOL	BCCDC
	HSV 1	RED TOP	1 ML SERUM			
	HSV 2	VIRAL SWAB • VESICLE • SKIN • EYE				
		TISSUE				
HERPESVIRUS ANTIBODY IgG	HSV 1 AND 2 IgG	SST (GOLD)	1 ML SERUM	ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C DO NOT FREEZE	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

HEXOSAMINIDASE NOT ABLE TO TEST ON PREGNANT FEMALES OR PATIENTS ON ORAL CONTRACEPTIVES	HEX A TAY SACHS	RED TOP	2 ML SERUM	SEE TAY SACHS SCREENING FORM CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH
HIGH DENSITY LIPOPROTEIN	HDL	SST / RST / PST OR RED TOP	1 ML SERUM OR PLASMA	CENTRIFUGE STORE 4° C	SEND COOL	CHEM
HISTONE ANTIBODY	SEE NUCLEAR ANTIBODY SCREEN					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HISTOPLASMA RISK GROUP 3	ANTIBODY	SST (GOLD) RED TOP FOR PEDIATRICS ACCEPTABLE		MUST USE U OF A CULTURE AND SEROLOGY REQUISITION CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL OR FROZEN TDG CAT B	U of A
	ANTIGEN	SST (GOLD)	2 ML			
		CSF	1 ML	MUST USE U OF A CULTURE AND SEROLOGY REQUISITION		
		URINE	0.5 ML	FREEZE		
HOMOCYSTEINE LEVEL		EDTA (LAVENDER) OR SST (GOLD)	1 ML PLASMA OR SERUM	PATIENT MUST BE FASTING COLLECT ON ICE AND BRING TO LAB IMMEDIATELY CENTRIFUGE AT 4°C AND ALIQUOT STAT STORE AT 4°C	SEND COOL	VGH
HOMOVANILLATE URINE RANDOM REDIATRIC ORDER HOLD REF UNTIL BUILT IN CERNER	HOMOVANILLIC ACID HVA RANDOM URINE	ORANGE TOP CONTAINER	5 ML URINE	STORE 4°C	SEND COOL	VGH
HOMOVANILLATE URINE 24 HOUR	HVA QUANTITATIVE HOMOVANILLIC ACID	24 HR URINE BOTTLE WITH 15ML 6N HCL PRESERVATIVE (RANDOM SPECIMENS DONE ON CHILDREN ONLY)	100 ML URINE	ASPIRIN, DISULFIRAM, LEVODOPA, RESERPINE AND PYRIDOXINE INTERFERE WITH TEST AND SHOULD BE DISCONTINUED AT LEAST 3 DAYS PRIOR TO COLLECTION LEVODOPA MUST BE DISCONTINUED 2 WEEKS PRIOR TO COLLECTION FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ADJUST FINAL pH TO 2-4	SEND COOL	VGH
HPV (HUMAN PAPILLOMAVIRUS)	INCLUDED IN PAP SMEAR CURRENTLY NO HPV TEST FOR MALES					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HUMAN IMMUNODEFICIENCY VIRUS (HIV) GENOTYPE **PATIENT MUST BE HIV POSITIVE**	HIV GENOTYPE ANTI-RETROVIRAL RESISTANCE	7 ML EDTA (LAVENDER)	3 ML PLASMA <u>PEDS:</u> MIN 3 ML WHOLE BLOOD	<p>PATIENT MUST BE HIV POSITIVE WITH A PREVIOUS HIV VIRAL LOAD PERFORMED. NOTE ON REQUISITION THE DATE OF THE MOST RECENT HIV VIRAL LOAD AND FAX TO BC CENTRE OF EXCELLENCE (604) 806-9044</p> <p>IF HIV VIRAL LOAD NEVER DONE, O R D E R , COLLECT AND SEND SAMPLE FOR VIRAL LOAD TESTING ALONG WITH HIV GENOTYPE REQUISITION</p> <p>COLLECT MON-THURS ONLY BEFORE NOON TO ENSURE SAMPLE IS DELIVERED WITHIN 72 HOURS</p> <p>CENTRIFUGE AT ROOM TEMP AT 1600 RCF FOR 10 MINS</p> <p>ASEPTICALLY REMOVE PLASMA FROM RED CELLS WITHIN 4 HRS OF COLLECTION AND ALIQUOT INTO POLYSTYRENE TUBE</p> <p>STORE AT 4°C</p>	SEND COOL MUST ARRIVE WITHIN 72 HRS TDG CAT B	ST PAULS
HUMAN IMMUNODEFICIENCY VIRUS (HIV) INVESTIGATION OF UNKNOWN OR HIGH RISK MOTHERS	HIV SCREEN, MOTHER HIV PCR	7.0 ML EDTA (LAVENDER) WHOLE BLOOD ONLY	3 ML WHOLE BLOOD	<p>DO NOT SPIN</p> <p>SPECIMENS MUST ARRIVE AT PHSA WITHIN 4 DAYS OF COLLECTION- DO NOT DELAY COLLECTION OR SHIPMENT OF SPECIMENS</p> <p>MUST SEND COPY OF BCCDC SEROLOGY REQ</p> <p>ENSURE "HIV PCR" IS INDICATED IN OTHER TESTS AND "WOMAN AT HIGH RISK OR UNKNOWN HIV STATUS" IS INDICATED IN REASON FOR TEST</p> <p>STORE AT 4°C</p> <p>SAMPLES FOR SCREENING DO NOT NEED TO BE SENT TDG CATEGORY B- ONLY IF PERSONS AND SAMPLES ARE SUSPICIOUS OR CONFIRMED TO BE HIV POS</p>	SEND COOL	BCCDC
HUMAN IMMUNODEFICIENCY VIRUS 1 NAT ORDER HOLD REF UNTIL BUILT IN CERNER	HIV 1 NAT HIV PCR HIV RNA PCR	7 ML EDTA (LAVENDER)	3 ML WHOLE BLOOD <2 YRS 1 ML	MIX WELL STORE AT 4°C TRANSPORT ASAP- SAMPLE SHOULD REACH BCCDC WITHIN 4 DAYS	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HUMAN IMMUNODEFICIENCY VIRUS (HIV) INVESTIGATION INFANT	HIV SCREEN, INFANT HIV PCR	3 ML EDTA (LAVENDER) WHOLE BLOOD ONLY	1 ML WHOLE BLOOD	DO NOT SPIN SPECIMENS NEED TO ARRIVE AT BCCDC WITHIN 4 DAYS OF COLLECTION- DO NOT DELAY COLLECTION OR SHIPMENT OF SPECIMENS MUST SEND COPY OF BCCDC SEROLOGY REQ WITH "HIV PCR" INDICATED IN OTHER TESTS AND "INFANT OF KNOWN HIV POSITIVE MOTHER" OR "INFANT OF MOTHER WITH HIV INFECTION NOT RULED OUT" IS INDICATED IN REASON FOR TEST STORE AT 4°C SAMPLES FOR SCREENING DO NOT NEED TO BE SENT TDG CATEGORY B- ONLY IF PERSONS AND SAMPLES ARE SUSPICIOUS OR CONFIRMED TO BE HIV POS	SEND COOL	BCCDC
HUMAN IMMUNODEFICIENCY VIRUS (HIV) SEROLOGY FOR PATIENTS NOT PREVIOUSLY DIAGNOSED (GENERAL SCREENING OR FOR BBF EXPOSURE- CHECK BOX ON OUTPATIENT REQUISITION)	HIV HIV SCREEN HIV 1 AND 2 ANTIBODY HIV 4 TH GEN HIV Ag/Ab HIV COMBO	SST (GOLD)	1 ML SERUM	NON-NOMINAL REPORTING AVAILABLE- MUST INDICATE ON REQUISITION ALLOW TO CLOT UPRIGHT FOR 1 HOUR CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
HUMAN IMMUNODEFICIENCY VIRUS (HIV) VIRAL LOAD TESTING	HIV VIRAL LOAD HIV THERAPY MONITORING	7 ML EDTA (LAVENDER)	2 ML PLASMA	PATIENT MUST BE HIV POSITIVE ON ANTIRETROVIRAL THERAPY OR WILL BE COMMENCING ANTIRETROVIRAL THERAPY COLLECT ON PATIENTS >1YR OLD ONLY CENTRIFUGE AT ROOM TEMPERATURE FOR 10 MINS AT 1300 RCF ASEPTICALLY REMOVE PLASMA FROM RED CELLS WITHIN 24 HOURS OF COLLECTION AND ALIQUOT INTO STERILE CRYOVIAL FREEZE PLASMA	SEND FROZEN TDG CAT B	ST PAULS
NEWBORN TESTING: SEE HIV INVESTIGATION, INFANT						
HIGH-RISK MOM: SEE HIV INVESTIGATION OF UNKNOWN OR HIGH RISK MOTHERS						

NH LABORATORY SERVICES TEST DIRECTORY

HUMAN IMMUNODEFICIENCY VIRUS (HIV) NAT ORDER HOLD REF UNTIL BUILT IN CERNER	HIV 1 PCR HIV RNA HIV RNA PCR	7 ML EDTA (LAVENDER) PEDS <2 YRS 3ML EDTA (LAVENDER)	3 ML WHOLE BLOOD PEDS<2 YEARS 1 ML WHOLE BLOOD	MIXWELL TRANSPORT ASAP DO NOT DELAY COLLECTION OR SHIPPING SAMPLE MUST REACH BCCDC WITHIN 4 DAYS OF COLLECTION STORE AT 4°C	SEND COOL	BCCDC
HUMAN LEUKOCYTE ANTIGEN (HLA) ANTIBODY INVESTIGATION *ADULT & PEDIATRIC*	CYTOTOXIC ANTIBODY SCREEN HLA PANEL HLA ANTIBODY SCREEN PANEL REACTIVE ANTIBODY PRA LYMPHOCYTE CROSSMATCH	SEE VGH HLA REQ FOR TESTS AND APPROPRIATE TUBES		MONTHLY ON PATIENTS WAITING ON THE TRANSPLANT LIST (THESE PATIENTS HAVE ALREADY HAD HLA TYPING (TISSUE TYPING) DONE) MUST USE VGH HISTOCOMPATIBILITY OUTPATIENT REQ DO NOT CENTRIFUGE STORE AT ROOM TEMP <u>CAN ONLY BE COLLECTED SUN TO NOON ON THURSDAY</u>	SEND ROOM TEMP	VGH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HUMAN LEUKOCYTE ANTIGEN B27	HLA B27 GENETIC MARKER FOR ANKYLOSING SPONDYLITIS	ACD – B (YELLOW)	7 ML WHOLE BLOOD	FILL TUBE COMPLETELY STORE AT ROOM TEMP	SEND ROOM TEMP	VGH
HUMAN LEUKOCYTE ANTIGEN B5701	HLA B5701 ABACAVIR HYPERSENSITIVITY	EDTA (LAVENDER)	2 ML WHOLE BLOOD	USE BC CENTER FOR EXCELLENCE REQ DO NOT CENTRIFUGE STORE AT 4°C DO NOT SHIP FRIDAY OR SATURDAY	SEND COOL TDG CAT B	ST PAULS BC CENTER FOR EXCELLENCE IN HIV/AIDS
HUMAN LEUKOCYTE ANTIGEN CLASS I	SEE HLA TYPING					

NH LABORATORY SERVICES TEST DIRECTORY

HUMAN LEUKOCYTE ANTIGEN (HLA) DQ2, DQ8	HLA DQ2/DQ8 HLA TYPING FOR CELIAC DISEASE	2 x ACD – B (YELLOW)	2 x 7 ML WHOLE BLOOD	SEND ASAP-SAMPLE STABLE FOR 48 HRS ONLY DIAGNOSIS SHOULD BE “QUERY CELIAC DISEASE” FILL TUBE COMPLETELY STORE AT ROOM TEMP	SEND ROOM TEMP	VGH
HUMAN LEUKOCYTE ANTIGEN (HLA) DRB1 1501: DQB1 0602	SEE HLA TYPING					
HUMAN LEUKOCYTE ANTIGEN (HLA) TYPING FOR DISEASE RELATED HLA TYPING ORDER THE TEST BY SPECIFIC HLA LOCI	TISSUE TYPING HLA CLASS I TYPING HLA CLASS I (ABC) TYPING HLA TYPING FOR PLATELET SUPPORT	<u>ADULTS:</u> 2 x 6 ML ACD-B <u>PEDS:</u> 1 x 6 ML ACD-B	WHOLE BLOOD	ORDERING PHYSICIAN MUST CONSULT VGH IMMUNOLOGY DEPT (604) 875-4393 MUST USE VGH HISTOCOMPATIBILITY OUTPATIENT REQ DONE ONCE ONLY ON PATIENTS BEING PLACED ON THE WAITING LIST FOR TRANSPLANT DIAGNOSIS (REASON FOR TESTING) IS REQUIRED FILL TUBE COMPLETELY STORE AT ROOM TEMP	SEND ROOM TEMP	VGH
HLA TYPING FOR ORGAN DONATION SEE PACIFIC ORGAN RETRIEVAL TEAM (PORT)						

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
HUMAN LEUKOCYTE ANTIGEN (HLA) TYPING CLASS II	SEE HLA TYPING					
HUMIRA ORDER HOLD REF UNTIL RE-ROUTED	ADALIMUMAB ADALIMUMAB AB HUMIRA AB	SST (GOLD)	1 ML SERUM	COLLECT JUST PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT STORE FROZEN	SEND FROZEN ON DRY ICE	DYNACARE

NH LABORATORY SERVICES TEST DIRECTORY

HUMAN T-LYMPHOTROPIC VIRUS ANTIBODY ORDER HOLD REF UNTIL BUILT IN CERNER	HTLV Ab HTLV 1 & 2 Ab HTLV I & II Ab HTLV I/II SEROLOGY ***** HTLV 1 ASSOCIATED WITH ADULT LYMPHOMA/LEUKEMIA (ATLL)	SST (GOLD)	1 ML SERUM	SEE BCCDC SEROLOGY REQ ALLOW TO CLOT UPRIGHT FOR 1 HR CENTRIFUGE STORE AT 4°C DO NOT FREEZE (CAN ALIQUOT IF RISK OF BEING FROZEN)	SEND COOL	BCCDC
HYDROXYCORTICOIDS	NO LONGER AVAILABLE CONSIDER ORDERING DHEAS					
5-HYDROXYINDOLEACETIC ACID 24 HOUR URINE	5-HIAA 24 HR URINE HIAA 24 HR URINE SEROTONIN 24 HR URINE	24 HOUR URINE CONTAINER WITH 15 ML 6N HCL	10 ML ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ALIQUOT STORE AT 4°C DURING ENTIRE COLLECTION	SEND COOL	VGH
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
17- HYDROXY-CORTICOSTEROIDS 17- KETOSTEROIDS 17 – KETOGENIC STEROIDS	NO LONGER AVAILABLE CONSIDER ORDERING DHEAS AND CORTISOL FOR DISORDERS OF ADRENAL STEROID METABOLISM					
17-HYDROXYPROGESTERONE ORDER HOLD REF UNTIL RE-ROUTED	ALPHA HYDROXY-PROGESTERONE 17 OHP 17 OH PROGESTERONE 17-KETOSTEROIDS 17-KETOGENIC STEROIDS	RED TOP	1 ML SERUM	ALLOW TO CLOT UPRIGHT FOR AT LEAST ONE HOUR NO ISOTOPES ADMINISTERED 24 HRS PRIOR TO COLLECTION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

I						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
IMIPRAMINE LEVEL	TOFRANIL IMIPRAMINE AND METABOLITES (DESIPRAMINE)	RED TOP NO SST/GEL	2 ML SERUM	DRAW IMMEDIATELY PRIOR TO NEXT DOSE (MIN 12 HR POST) INDICATE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT WITHIN 2 HR OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB
IMMUNE SERUM GLOBULIN BLOOD PRODUCT FOR TRANSFUSION	ISG			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION. SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
IMMUNOFIXATION	ORDERED ONLY BY PATHOLOGIST IF INDICATED BASED ON ELECTROPHORESIS RESULTS			NOT ORDERABLE BY LAB STAFF		
IMMUNOFIXATION URINE						
IMMUNOGLOBULINS • IgA • IgG • IgM	ORDER INDIVIDUALLY ALSO KNOWN AS QI (QUANTITATIVE IMMUNOGLOBULINS)					
IMMUNOGLOBULIN PANEL- IgA IgG IgM	QUANTITATIVE IMMUNOGLOBULINS	SST (GOLD) OR RST (ORANGE)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	UHNBC CHEM
IMMUNOGLOBULIN PANEL- IgA IgG IgM ORDER HOLD REF UNTIL BUILT IN CERNER		Li HEP MICROTAINER	0.2 ML PLASMA	CENTRIFUGE AND AIQUOT STORE AT 4°C STABLE 7 DAYS		BCCDC
IMMUNOGLOBULIN A	IgA	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT SERUM STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
IMMUNOGLOBULIN A PEDIATRIC (0- 16 YRS)	IgA	PST (LT GREEN) OR LI HEPARIN (DARK GREEN) OR RED TOP	0.2 ML PLASMA OR SERUM	CENTRIFUGE AND ALIQUOT IF TRANSPORTING THE SAME DAY AS COLLECTON STORE AT 4°C OTHERWISE FREEZE SAMPLE	SEND COOL SAME DAY SEND FROZEN ON DRY ICE IF NOT SAME DAY	BCCH
IMMUNOGLOBULIN D	IgD	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
IMMUNOGLOBULIN E	IgE QUANTITATIVE	RED TOP (PREFERRED) OR	0.5 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT IF TRANSPORTING THE SAME DAY AS COLLECTON, STORE AT 4°C IF NOT TRANSPORTING THE SAME DAY AS COLLECTION, FREEZE SAMPLE	SEND COOL SAME DAY SEND FROZEN ON DRY ICE IF NOT SAME DAY	BCCH
	FOR ALLERGY SCREENING ORDER RAST	LI HEPARIN (DARK GREEN)				
IMMUNOGLOBULIN F-1 (IgF – 1)	SEE INSULIN - LIKE GROWTH FACTOR					
IMMUNOGLOBULIN G	IgG	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL SAME DAY	CHEM
IMMUNOGLOBULIN G PEDIATRIC (0-16 YRS)	IgG PED	PST (LT GREEN) OR LI HEP (DARK GREEN) (PREFERRED) OR RED TOP	0.5 ML PLASMA OR SERUM	CENTRIFUGE AND ALIQUOT IF TRANSPORTING THE SAME DAY AS COLLECTON, STORE AT 4°C OTHERWISE FREEZE SAMPLE	SEND COOL SAME DAY SEND FROZEN ON DRY ICE IF NOT SAME DAY	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
IMMUNOGLOBULIN G SUBCLASSES	IgG SUBCLASSES <u>INCLUDES:</u> IgG1, IgG2, IgG3, IgG4	SST (GOLD) OR RED TOP	1 ML SERUM	COPY OF ORIGINAL REQUISITION REQUIRED CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
IMMUNOGLOBULIN M	IgM	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
IMMUNOGLOBULIN M PEDIATRIC	IgM PED	PST (LT GREEN) OR LI HEPARIN (DARK GREEN) OR RED TOP	0.2 ML PLASMA OR SERUM	CENTRIFUGE AND ALIQUOT IF TRANSPORTING THE SAME DAY AS COLLECTON, STORE AT 4°C OTHERWISE FREEZE SAMPLE	SEND COOL SAME DAY SEND FROZEN ON DRY ICE IF NOT SAME DAY	BCCH
IMMUNOGLOBULIN LIGHT CHAINS, FREE	SERUM FREE LIGHT CHAINS KAPPA LAMBDA	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
IMMUNOLOGY CELL SURFACE MARKER	NO LONGER AVAILABLE					
CD4/CD8 RATIO PANEL INCLUDES: <ul style="list-style-type: none">• CD4• CD8• HELPER SUPPRESSOR RATIO• CBC W/DIFF	IMMUNO-PHENOTYPING HUMAN IMMUNODEFICIENCY VIRUS (HIV) PATIENTS T & B CELLS HELPER/SUPPRESSOR RATIO	ACD SOLN A AND EDTA (LAVENDER) FOR CBC	1 ML ACD A WHOLE BLOOD AND 1 ML EDTA	CBC MUST BE DONE WITHIN 6 HRS OF COLLECTION SEND RESULTS WITH CD4/CD8 SPECIMEN DO NOT SPIN STORE AT ROOM TEMP	SEND ROOM TDG CAT B	ST PAULS
IMMUNOREACTIVE TRYPSIN	SEE TRYPSIN, IMMUNOREACTIVE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
INDIA INK	NO LONGER AVAILABLE					
	ORDER CRYPTOCOCCAL ANTIGEN					
INFLIXIMAB LEVEL WILL REFLEX TOTAL ANTIBODIES IF INDICATED AT ST PAUL'S	REMICADE LEVEL	RED TOP OR SST (GOLD)	2 ML SERUM	SEE PHSA OUTPATIENT REQ MUST ACCOMPANY SAMPLE SEE INFLIXIMAB MEDICAL BULLETIN COLLECT TROUGH- IMMEDIATELY PRIOR TO NEXT INFUSION CENTRIFUGE AND ALIQUOT FREEZE TO SATISFY MSP: ORDERED/SIGNED REQ BY GASTROENTEROLOGIST OR INTERNIST	SEND FROZEN ON DRY ICE	ST PAULS
INFLUENZA IgG/IgM ANTIBODY	NO LONGER AVAILABLE					
INFLUENZA A/B/RSV NAAT FOR OUTPATIENT OR SPECIFIC RESPIRATORY PATHOGEN TESTING, ORDER VIRAL CULTURE	FLU A/B NAAT FLU AB/RSV NAAT	NASOPHARYN GEAL SWAB IN UTM (RED OR BLUE TOP) OR ORANGE TOP CONTAINER (NASOPHARYN GEAL	1ML NPW	INPATIENT AND PEDIATRIC OUTPATIENTS <u>ONLY</u> SEND TO LAB ASAP OR IF TESTING WILL BE DELAYED STORE AT 4°C TESTING AVAILABLE 7 DAYS A WEEK DURING MICRO DEPARTMENT HOURS	SEND COOL	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
INHIBIN A TUMOR MARKER- <u>NOT</u> FOR MATERNAL SCREENING		RED TOP PREFERRED OR SST (GOLD)	1ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
INR	INTERNATIONAL NORMALIZED RATIO	SODIUM CITRATE (LIGHT BLUE) 4.5 ML SIZE 2.7 ML SIZE 1.8 ML SIZE* *SEE HEMATOLOGY FOR 1.8 ML SIZE TUBE FOR PEDIATRIC COLLECTIONS	4.5 ML WHOLE BLOOD OR 2.7 ML WHOLE BLOOD OR 1.8 ML WHOLE BLOOD	FILL TUBE COMPLETELY (EXCEPT 1.8 ML SIZE) STABLE UNSPUN FOR 24 HRS AT ROOM TEMPERATURE STABLE SPUN FOR 4 HRS AT 4°C ***** CENTRIFUGE AND ANALYZE ASAP (WITHIN 30 MINS)- MUST ANALYZE IMMEDIATELY AFTER CENTRIFUGATION DOUBLE SPIN & FREEZE PLASMA AFTER CENTRIFUGATION REGIONAL LABS: SEND DOUBLE SPUN FROZEN PLASMA IN PLASTIC TUBES IF > 24 HRS TRANSPORT TIME SPECIMENS RECEIVED THAWED WILL BE REJECTED	SEND WHOLE BLOOD UNSPUN OR SEND FROZEN PLASMA	HEM
INSULIN ANTIBODY	IAA	SST (GOLD) OR RED TOP	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	HIC
INSULIN LEVEL TOTAL		RED TOP (PREFERRED) OR EDTA (LAVENDER)	1 ML SERUM OR PLASMA	PATIENT MUST BE FASTING AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
INSULIN- LIKE GROWTH FACTOR-1 ORDER HOLD REF UNTIL BUILT IN CERNER	IGF – 1 SOMATOMEDIN – C	SST (GOLD) OR RED TOP	0.5 ML	SEE PHSA IGF-1 TESTING BULLETIN SEND BOTH ADULT AND PED SPECIMENS TO ST PAULS CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
INSULIN LIKE GROWTH FACTOR BINDING PROTEIN 3	IGFBP3 SOMATOMEDIN C BINDING PROTEIN	SST (GOLD)	2 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
INTERFERON ANTIBODY CAN ONLY BE ORDERED BY A NEUROLOGIST	INTERFERON BETA NEUTRALIZING ANTIBODY	2 x SST (GOLD)	5 ML SERUM	PATIENT MUST HAVE MULTIPLE SCLEROSIS CENTRIFUGE AND ALIQUOT FREEZE SERUM	SEND FROZEN	UBC HOSPITAL
INTERFERON GAMMA RELEASE ANTIBODY	SEE TB IGRA					
INTRINSIC FACTOR ANTIBODY	SEE PARIETAL CELL ANTIBODY SCREEN					
IODINE		NAVY BLUE (K2 EDTA)	2 ML K2 PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT PLASMA AS SOON AS POSSIBLE AFTER COLLECTION INTO POLYPROPYLENE TUBE STORE AT 4°C	SEND COOL	HIC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
IODINE, URINE		ORANGE TOPPED CONTAINER RANDOM URINE OR 24 HR URINE COLLECTION	15 ML URINE	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING INDICATED RANDOM OR 24 URINE SPECIMEN AVOID MINERAL SUPPLEMENTS FOR 5 DAYS PRIOR TO COLLECTION 24 HOUR SPECIMEN REQUIRES DATE/TIME OF COLLECTION AND 24 HR VOLUME STORE AT 4°C	SEND COOL	HIC
IRON /TIBC/ %SATURATION	IRON STUDIES IRON SATURATION FERRIN SATURATION FETIBC	PST (LIGHT GREEN) OR SST (GOLD)	0.5 ML SERUM OR PLASMA	LEVELS ARE DEPENDANT ON CIRCADIAN CYCLES FASTING IS PREFERRED BUT NOT MANDATORY- RENAL PATIENTS DO NOT NEED TO BE FASTING COLLECT FASTING AND BEFORE 10AM TO ENSURE CONSISTANCY AVOID HEMOLYSIS ***** CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
IRON LEVEL	FE LEVEL	PST (LIGHT GREEN) OR SST (GOLD)	0.5 ML SERUM OR PLASMA	LEVELS ARE DEPENDANT ON CIRCADIAN CYCLES FASTING IS PREFERRED BUT NOT MANDATORY- RENAL PATIENTS DO NOT NEED TO BE FASTING COLLECT FASTING AND BEFORE 10AM TO ENSURE CONSISTANCY AVOID HEMOLYSIS ***** CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
IRON LEVEL, 24 HOUR URINE ORDER HOLD REF UNTIL RE-ROUTED		24 HR URINE CONTAINER NO PRESERVATIVES	10 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ALIQUOT STORE AT 4°C	SEND COOL	DYNACARE
ISLET CELL ANTIBODY ORDER HOLD REF UNTIL RE-ROUTED	PANCREATIC ISLET CELL ANTIBODY	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	DYNACARE
ISOPROPANOL LEVEL APPROVAL REQUIRED- CONTACT VGH CLINICAL/MEDICAL BIOCHEMIST ON-CALL (SWITCHBOARD WILL PAGE 604-875-4111)		SST (GOLD)	1 ML SERUM	PATIENT MUST HAVE INCREASED OSMOLAR GAP USE BETADINE PREP TO CLEAN VENEPUNCTURE SITE- NO ALCOHOL DELIVER IMMEDIATELY TO LAB CENTRIFUGE AND ALIQUOT IMMEDIATELY STORE AT 4°C	SEND COOL	VGH

NH LABORATORY SERVICES TEST DIRECTORY

J						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
JANUS KINASE 2 MUTATION	JAK 2 MUTATION	EDTA (LAVENDER)	2 x 7 ML WHOLE BLOOD	USE BCCA CANCER GENETICS REQUISITION STORE AT ROOM TEMP SEND WHOLE BLOOD WITHIN 48 HRS	SEND ROOM TEMP	BCCA
JC VIRUS	SEE POLYOMAVIRUS VIRAL LOAD					

NH LABORATORY SERVICES TEST DIRECTORY

K

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
KARYOTYPING	SEE CYTOGENETICS					
KETONE BODIES QUALITATIVE	NO LONGER AVAILABLE					
KLEIHAUER-BETKE		EDTA (LAVENDER)	3 ML WHOLE BLOOD	SAMPLE MUST BE COLLECTED FROM MOTHER STORE AT 4°C	SEND COOL	TMS
KOH	SEE FUNGAL CULTURE					

NH LABORATORY SERVICES TEST DIRECTORY

L						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LACOSAMIDE	VIMPAT	RED TOP NO SST/GEL	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE FOR SUSTAINED-RELEASE FORMULAS ONLY: DRAW A MIN OF 12 HRS POST DOSE CENTIFUGE AND ALIQUOT WITHIN 2 HRS STORE AT 4°C	SEND COOL	PROV TOX LAB
LACTATE	LACTIC ACID L- LACTATE (FOR D-LACTATE SEND TO HIC)	GREY TOP (SODIUM FLUORIDE)	1 ML WHOLE BLOOD	COLLECT ON ICE AND BRING IMMEDIATELY FROM LAB TOURNIQUET USE SHOULD BE AVOIDED (IF POSSIBLE) CENTRIFUGE AT 4°C WITHIN 15 MINUTES OF COLLECTION AND ALIQUOT STORE AT 4°C.	SEND COOL	CHEM
LACTATE, BODY FLUID		ORANGE TOP CONTAINER	0.5 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT ANALYZE ASAP	SEND COOL	CHEM
LACTATE, CEREBROSPINAL FLUID	CSF LACTATE	CSF TUBE	1 ML CSF	CENTRIFUGE AND ALIQUOT CSF SUPERNATANT ANALYZE ASAP	SEND COOL	CHEM
LACTATE DEHYDROGENASE	LDH	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML PLASMA OR SERUM	AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LACTATE DEHYDROGENASE, BODY FLUID	LDH BODY FLUID LD - BODYFLUID	ORANGE TOP CONTAINER	0.5 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
LACTATE DEHYDROGENASE ISOENZYMES ORDER HOLD REF UNTIL RE-ROUTED	LDH ISOENZYMES	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT ROOM TEMP	SEND ROOM TEMP	DYNACARE
LACTOSE TOLERANCE	LTT LACTASE	SST (GOLD)	0.5 ML SERUM	PATIENT MUST BE FASTING DRAW BASELINE FASTING SAMPLE GIVE PATIENT 50 G OF LACTEST (breath test) (2 PKG) IN 250 ML WATER FOR CHILDREN, MAKE UP SOLUTION AS PER ADULT THEN REFER TO WEIGHT CHART TO DETERMINE DOSAGE BASED ON WEIGHT COLLECT SPECIMENS AT 30, 60, 120 MINS POST LACTOSE INGESTION CENTRIFUGE AND ALIQUOT ASAP STORE AT 4°C		CHEM
LAMELLAR BODY COUNT	NO LONGER AVAILABLE					
LAMOTRIGINE LEVEL	LAMICTAL	RED TOP NO SST/GEL	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE FOR SUSTAINED-RELEASE FORMULAS ONLY: DRAW A MIN OF 12 HRS POST DOSE RECORD DOSE DATE & TIME CENTRIFUGE AND ALIQUOT WITHIN 2 HRS STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LAP SCORE	NO LONGER AVAILABLE					
	REPLACED BY BCR/ABL					
LASIX STIMULATION INCLUDES: <ul style="list-style-type: none"> 24 HR URINE <ul style="list-style-type: none"> Na⁺ K⁺ BASELINE RENIN 5 HR RENIN 	LASIX STIMULATED RENIN TEST FOR HYPERTENSION	24 HOUR URINE CONTAINER AND PRE-CHILLED EDTA (LAVENDER)	1 ML WHOLE BLOOD AND 50 ML URINE ALIQUOT	INSTRUCTIONS: <ul style="list-style-type: none"> TO BE BOOKED THROUGH AMBC HAVE PATIENT COLLECT 24 URINE FOR Na⁺ and K⁺ THE DAY BEFORE TEST COLLECTION ENDS THE MORNING OF THE TEST DRAW BASELINE RENIN IN PRE- CHILLED EDTA PLACE ON ICE ADMINISTER LASIX PATIENT SHOULD AMBULATE AS MUCH AS POSSIBLE DRAW RENIN 5 HR POST LASIX ADMINISTRATION IN PRE- CHILLED EDTA PLACE ON ICE <p>*****</p> <p>BRING RENIN SAMPLE TO LAB IMMEDIATELY.</p> <p>CENTRIFUGE AT 4°C & ALIQUOT</p>	SEND URINE COOL AND SEND PLASMA FROZEN	CHEM & ST PAULS
LEAD LEVEL	Pb LEVEL	LITHIUM HEPARIN (DARK GREEN)	OPTIMAL: 4 ML WHOLE BLOOD MIN: 1ML WHOLE BLOOD	FOLLOW BCCH TRACE ELEMENT COLLECTION INSTRUCTIONS MIX MINIMUM OF 16 TIMES STORE UPRIGHT AT 4°C SHIP UPRIGHT	SEND COOL ON ICE	BCCH
LEAD LEVEL, 24 HR URINE CONSULT AND APPROVAL WITH BCCH LAB PHYSICIAN REQUIRED	24 HR LEAD	URINE VOIDING CONTAINER (VWR CA15705-385) 24 HR URINE CONTAINER (VWR CA60872-566)	20-50 ML URINE ALIQUOT	ADJUST FINAL URINE pH 2-4 IF USING STERILE ORANGETOP ALIQUOT CONTAINER. DO NOT ADJUST pH IF USING VWR CA732040-132 URINE SAMPLE TRANSPORT CONTAINER STORE AT 4°C	SEND COOL	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LEFLUNOMIDE LEVEL	LEFLUNOMIDE METABOLITE TERIFLUNOMIDE	RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	CALGARY LAB SERVICES
LEGIONELLA ANTIBODY	LEGIONELLA SEROLOGY LEGIONELLA ANTIBODY DETECTION	SST (GOLD)	1 ML SERUM	CONSULT REQUIRED: DR. MUHAMMAD MORSHED 604-707-2622 OR MEDICAL MICROBIOLOGIST ON-CALL 604-661-7033 SEE BCCDC ZOONOTICS REQUISITION ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
	PREFERRED TEST FOR ACUTE INFECTION: LEGIONELLA URINE ANTIGEN					
LEGIONELLA CULTURE	LEGIONELLA PNEUMOPHILIA LEGIONNAIRE'S DISEASE	URINE	ORANGE TOP CONTAINER	SEE BCCDC BACTERIA & MYCOLOGY REQ STORE AT 4°C	SEND COOL	BCCDC
		FLUID: • PLEURAL • PERICARDIAL • OTHER FLD				
		LUNG TISSUE				
		BRONCHIAL WASHINGS				
		SPUTUM- SALIVA IS UNACCEPTABLE				
		TRACHEAL ASPIRATE				
LEGIONELLA URINE ANTIGEN PREFERRED FOR ACUTE INFECTION		ORANGE TOP CONTAINER	10 ML RANDOM URINE	SEE BCCDC ZOONOTICS REQUISITION STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LEPTOSPIRA ANTIBODY	LEPTOSPIROSIS	SST (GOLD)	1 ML SERUM	ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
LEVETIRACETAM LEVEL (TROUGH)	KEPPRA LEVEL	RED TOP NO SST	1 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB
LIDOCAINE LEVEL	ANESTACON LEVEL XYLOCAINE LEVEL	RED TOP NO SST	2 ML SERUM	STEADY STATE IS USUALLY OBTAINED 30-90 MINUTES FOLLOWING THE BEGINNING OF INFUSION IF A LOADING DOSE IS GIVEN OR 5-10 HOURS IF LOADING DOSE NOT GIVEN CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
LIPASE LEVEL		PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
LIPASE LEVEL, BODY FLUID	BF LIPASE	ORANGE TOP CONTAINER	0.5 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
LIPID PANEL	<u>INCLUDES:</u> <ul style="list-style-type: none"> LDL CHOL TRIG HDL 	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML PLASMA OR SERUM	FASTING NO LONGER REQUIRED UNLESS SPECIFICALLY REQUESTED BY A PHYSICIAN CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LIPOPROTEIN (a)	LPa LP ASSAY LP (a)	SST (GOLD) OR RED TOP	1 ML SERUM	ASSAY MAY HELP TO DETERMINE GENETIC RISK OF CARDIOVASCULAR DISEASE CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS
LIPOPROTEIN ELECTROPHORESIS	LIPOPROTEIN PATTERN	SST (GOLD) OR RED TOP	1 ML SERUM	CONSULT WITH MEDICAL BIOCHEMIST REQUIRED PATIENT MUST BE FASTING 12-14 HRS PATIENT MUST AVOID ALCOHOL FOR 24 HRS COLLECT ON ICE (KEEP COOL) CENTRIFUGE AND ALIQUOT DO NOT FREEZE STORE AT 4°C	SEND COOL	ST PAULS
LIPOPROTEIN – VERY LOW DENSITY (VLDL)	NO LONGER AVAILABLE					
LITHIUM LEVEL	ESKALITH LEVEL LI+ CARBOLITH LEVEL DURALITH LEVEL	RED TOP OR RST (ORANGE) NO SST	1 ML SERUM	COLLECT 8-12 HOURS AFTER LAST DOSE DOSAGE SHOULD BE STABLE AFTER 96 HRS CENTRIFUGE (ALIQUOT IF RED TOP) STORE AT 4°C	SEND COOL	CHEM
LIVER KIDNEY MICROSOMAL ANTIBODY	LKM1 ANTIBODIES ANTI-LKM1 KLM	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LOW DENSITY LIPOPROTEIN	LDL	SST (GOLD)	0.5 ML SERUM	FASTING NO LONGER REQUIRED UNLESS SPECIFICALLY REQUESTED BY A PHYSICIAN LDL IS A CALCULATED VALUE FROM CHOLESTEROL, HDL AND TRIGLYCERIDE RESULTS CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
LUPUS ANTICOAGULANT	DILUTE RUSSELL VIPER VENOM TEST DRVVT LUPUS INHIBITOR LUPUS ANTIBODY	LIGHT BLUE (SODIUM CITRATE)	1 ML PLASMA	DOUBLE-SPIN TO OBTAIN PLATELET POOR PLASMA FREEZE PLASMA DO NOT COLLECT ON PATIENTS RECEIVING HEPARIN, LMWH, DIRECT THROMBIN OR Xa INHIBITORS INDICATE IF PATIENT IS ON WARFARIN	SEND FROZEN	ST PAULS
LUTEINIZING HORMONE	LH	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
LYME ANTIBODY	LYME DISEASE SEROLOGY	SST (GOLD)	1 ML SERUM	SEE BCCDC ZOO NOTICS REQ ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
LYMPHOCYTE CROSSMATCH	SEE HUMAN LEUKOCYTE ANTIGEN ANTIBODY INVESTIGATION					
LYMPHOGRANULOMA VENEREUM	REFLEXED WITH POSITIVE RECTAL CHLAMYDIA RESULT ONLY					MICRO

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
LYMPHOMA PANEL	BCL2 BCL- 2 B- CLONALITY T- CLONALITY	2 x 7 ML EDTA (LAVENDER)	14 ML WHOLE BLOOD	MUST USE BCCA CANCER GENETICS LYMPHOID REQUISITION COLLECT MON-THURS BEFORE NOON SEND SAME DAY AS COLLECTION	SEND AT ROOM TEMP	BCCA
LYMPHOMA PROTOCOL ORDER HOLD REF UNTIL BUILT	LYMPH NODE, FRESH	10% NEUTRAL BUFFERED FORMALIN-FIXED TISSUE		FIXED SPECIMEN MUST SENT TO HISTOLOGY MUST BE ACCOMPANIED BY A NH SURGICAL PATHOLOGY REQUISITION	SEND COOL	HISTO
		ORANGE TOPPED CONTAINER-FRESH TISSUE		COMPLETED FLOW CYTOMETRY REQUISITION MUST ACCOMPANY THE SPECIMEN (COMPLETED BY SURGEON) FRESH TISSUE SUBMERGED IN SALINE SPECIMEN SENT DIRECTLY TO TESTING FACILITY CONTACT BCCA PATHOLOGY (AS INDICATED ON REQUISITION) FOR ANY ADDITIONAL QUESTIONS		BCCA
LYSOSOMAL ENZYME TESTING BLOOD SPOT: <ul style="list-style-type: none"> • ALPHA-GALACTOSIDASE (FABRY) • ALPHA-GLUCOSIDASE (POMPE) • ALPHA-IDURONIDASE (MUCOPOLYSACCHARIDOSIS TYPE I) • BETA-GALACTOCEREBROSIDASE (KRABBE) • BETA-GLUCOSIDASE (GAUCHER) • SPHINGOMYELINASE (NIEMANN PICK A/B) 	SEE EACH INDIVIDUAL ENZYME					

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MACROPROLACTIN HOLD REF PROLACTIN PERFORMED FIRST- IF ELEVATED WILL REFLEX MACROPROLACTIN		SST (GOLD)	1 ML SERUM	NOT A ROUTINE TEST- FOR INVESTIGATION OF PERSISTENT ELEVATED PROLACTIN COLLECT AT LEAST 2 HRS AFTER WAKING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
MAGNESIUM LEVEL	MG MG LEVEL	PST (LT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML PLASMA OR SERUM	AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT ACIDIFY URINE TO PH 1 STORE AT 4°C	SEND COOL	CHEM
MAGNESIUM LEVEL, 24 HOUR URINE	24 HR URINE MG	24 HOUR URINE CONTAINER	0.5 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ADJUST FINAL pH TO <1 WITH CONCENTRATED HCL STORE AT 4°C	SEND COOL	CHEM
MAGNESIUM LEVEL, URINE	RANDOM URINE MG	ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
MALARIA CONFIRM-BCCDC (INCLUDES CBC/DIFF & MALARIA CONFIRM PROV LAB)		EDTA (LAVENDER)	1 ML WHOLE BLOOD	SEE BCCDC PARASITOLOGY REQ COLLECT EDTA AND BRING TO HEMATOLOGY IMMEDIATELY- SLIDES MUST BE MADE WITHIN 1 HOUR MAKE 6 THICK AND 6 THIN BLOOD SMEARS: <ul style="list-style-type: none"> REFER 3 STAINED THIN SMEARS AND 3 UNSTAINED THICK SMEARS TO THE HSDA REFERRAL FACILITY (OMIT IF DIRECTLY REFERRING SMEARS TO BCCDC) REFER 2 STAINED & 1 UNSTAINED THIN SMEAR, AND 3 UNSTAINED THICK SMEARS TO BCCDC INCLUDE COPY OF CBC STORE AT ROOM TEMP	SEND ROOM TEMP	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MALARIA SMEAR (PRELIMINARY SCREEN WITHIN NH)				COLLECT EDTA AND BRING TO HEMATOLOGY IMMEDIATELY SLIDES MUST BE MADE WITHIN 1 HOUR OF COLLECTION MAKE 6 THICK AND 6 THIN BLOOD SMEARS (SITES SENDING DIRECTLY TO BBCDC ONLY REQUIRE 5 THIN SMEARS)	SEND ROOM TEMP	UHNBC HEM
MANGANESE LEVEL, SERUM	SERUM Mn	NAVY NO ADDITIVE BD 368380 OR RED TOP MICROTAINER BD 3655963 NO ADDITIVES	1 ML SERUM	BCCH PATHOLOGIST APPROVAL REQUIRED UNLESS ORDERED FOR TPM MONITORING NO HEMOLYSIS- WILL BE REJECTED SEE BCCH BLOOD COLLECTION FOR TRACE ELEMENTS CENTRIFUGE AND ALIQUOT INTO POLYPROPYLENE TUBE AND CAP IMMEDIATELY STORE AT 4°C (STABLE 7 DAYS)	SEND COOL	BCCH
MANGANESE LEVEL, WHOLE BLOOD ORDER HOLD REF UNTIL BUILT IN CERNER	WHOLE BLOOD Mn	K2 EDTA (NAVY)-CONTAMINANT FREE NO GEL	4 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING AVOID HEMOLYSIS CENTRIFUGE WITHIN 30 MINS AND ALIQUOT INTO METAL -FREE POLYPROPYLENE TUBE STORE AT 4°C	SEND COOL	HIC
MANGANESE, 24 HR URINE	Mn 24 HR URINE	24-HR URINE CONTAINER METAL FREE	15 ML URINE	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING AVOID MINERAL SUPPLEMENTS FOR 5 DAYS PRIOR TO COLLECTION COLLECT IN METAL FREE CONTAINER INCLUDE COLLECTION DATE AND 24 HR VOLUME STORE AT 4°C	SEND COOL	HIC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MANGANESE, URINE	Mn URINE RANDOM	ORANGE TOPPED CONTAINER METAL FREE	15ML URINE	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING AVOID MINERAL SUPPLEMENTS FOR 5 DAYS PRIOR TO COLLECTION COLLECT IN METAL FREE CONTAINER STORE AT 4°C	SEND COOL	HIC
MANUAL DIFFERENTIAL	SEE CBC W/DIFF					
MATERNAL INFANT INVESTIGATION – HDN NEWBORN JAUNDICE	HEMOLYTIC DISEASE OF THE NEWBORN (HDN)	EDTA (LAVENDER)	NEONATE 0.5 ML WHOLE BLOOD MOM: 3 ML WHOLE BLOOD	NEONATE: USE CORD BLOOD* *COLLECT MIN 0.5ML EDTA IF CORD BLOOD IS NOT AVAILABLE *(TRANSFUSION OR HEMATOLOGY MAY ALREADY HAVE AN EDTA SPECIMEN) IF MATERNAL SAMPLE IS REQUIRED: COLLECT 1-7ML EDTA PREFERABLY	SEND COOL	TMS
MATERNAL INFANT INVESTIGATION – RHIG ELIGIBILITY	MAT/INF ROSETTE TEST	2 x 7 ML EDTA (LAVENDER)	MOM: 3 ML WHOLE BLOOD NEONATE 0.5 ML WHOLE BLOOD	ROUTINELY DONE ON ALL RH NEG MOMS BBID BAND IS <u>NOT</u> REQUIRED MOTHER: COLLECT MIN 1 x 7 ML EDTA NEONATE: USE CORD BLOOD* *COLLECT MIN 0.5ML EDTA IF CORD BLOOD IS NOT AVAILABLE – CAPILLARY COLLECTION IS SUFFICIENT *TRANSFUSION OR HEMATOLOGY MAY ALREADY HAVE AN EDTA SPECIMEN	SEND COOL	TMS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MEASLES ANTIBODY	MEASLES SEROLOGY ACUTE	SST (GOLD)	1 ML SERUM	ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
MEASLES ANTIBODY IgM	MEASLES SEROLOGY IMMUNITY					
MEGLITINIDE SCREEN	SEE SULFONYLUREA SCREEN					
MERCAPTOPURINE METABOLITES ORDER HOLD REF UNTIL BUILT IN CERNER NOT THE SAME AS TMPT PHENOTYPING	6MP THIOPURINE METABOLITES AZATHIOPRINE (AZA) IMURAN LEVEL 6-TG (THIOGUANINE)	EDTA (LAVENDER)	3 ML WHOLE BLOOD	INDICATE LAST DOSE DATE & TIME DO NOT SPIN STORE 4°C (STABLE 8 DAYS)	SEND COOL	VICTORIA GENERAL
METHYLMALONIC ACID	MMA METHYLMALONATE	LI HEPARIN (DARK GREEN)	2 ML PLASMA	SEE BCCH BGL REQ CENTRIFUGE AND ALIQUOT WITHIN 6 HRS OF COLLECTION FREEZE *PATIENT CONSENT MUST BE SIGNED/SUBMITTED WITH SAMPLE OR FAXED TO BCCH BGL 604-875-3434	SEND FROZEN ON DRY ICE	BCCH
METHYLMALONIC ACID, URINE	SEE ORGANIC ACIDS SCREEN					
MERCURY LEVEL		LITHIUM HEPARIN (DARK GREEN)	3 ML WHOLE BLOOD	FOLLOW BCCH TRACE ELEMENT COLLECTION INSTRUCTIONS MIX WELL STORE TUBE UPRIGHT AT 4°C	SEND COOL	BCCH
		PEDIATRIC-LT GREEN MICROTAINER	0.5 ML PLASMA	TRANSPORT UPRIGHT		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MERCURY LEVEL, URINE	RANDOM URINE MERCURY	ORANGE TOP CONTAINER	OPTIMAL: 10 ML MIN: 5 ML	COLLECT MIDSTREAM URINE DIRECTLY INTO STERILE URINE CONTAINER OR HOLLISTER BAG POUR OFF ALIQUOT STORE AT 4°C	SEND COOL	BCCH
MERCURY LEVEL, 24 HOUR URINE	24 HR URINE MERCURY	24 HR ACID WASH URINE CONTAINER WITH 15 ML 6N HCL FOLLOW BCCH ACID WASH INSTRUCTIONS FOR 24 HR URINE CONTAINER	100 ML URINE ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ADJUST FINAL URINE pH 2-4 STORE AT 4°C	SEND COOL	BCCH
METANEPHRINES, 24 HOUR URINE	METANEPHRINES NORMETANEPHRINE	24 HR URINE CONTAINER	150 ML URINE	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INCLUDE 24 HOUR URINE VOLUME AND URINE CREATININE RESULT KEEP URINE REFRIGERATED DURING COLLECTION DO NOT DELAY PROCESSING ALIQUOT INTO TO 12 X 75ML TUBES (FILL TO 2/3 FULL) AND FREEZE IMMEDIATELY ALTERNATIVELY ALIQUOT INTO 2 ORANGE TOP STERILE CONTAINERS (APPROX 50-75 ML IN EACH) THAWED/PARTIALLY THAWED SAMPLES WILL BE REJECTED IF 24 HR URINE CATECHOLAMINES ORDERED CONCURRENTLY ONLY ONE SAMPLE OF 2 ALIQUOTS IS REQUIRED	SEND FROZEN	VGH

NH LABORATORY SERVICES TEST DIRECTORY

METANEPHRINES, PLASMA	<u>INCLUDES:</u> <ul style="list-style-type: none"> METANEPHRINE NORMETANEPHRINE 3-METHOXYTYRAMINE	7 ML EDTA (LAVENDER) OR 2X 3 ML TO ENSURE MIN PLASMA VOLUME IS MET	2.5 ML PLASMA	FASTING REQUIRED ABSTAIN FROM SMOKING TOBACCO FOR AT LEAST 4 HOURS PRIOR TO COLLECTION (WATER OK) PATIENT SHOULD BE SUPINE FOR 20 MINS BEFORE AND DURING COLLECTION TO MINIMIZE FALSE POSITIVES POSTURE AT TIME OF COLLECTION MUST BE INDICATED ON REQUISITION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	CALGARY LAB SERVICES
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
METHADONE LEVEL	METHADONE AND METABOLITE	6ML NA HEP (DARK GREEN) NO GEL/SST	1 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE OR 1 HR AFTER DOSE CENTRIFUGE AND ALIQUOT INCLUDE LAST DOSE DATE & TIME STORE AT 4°C	SEND COOL	DYNACARE
FOR SCREENING ORDER DRUG SCREEN, URINE						
METHADONE LEVEL, PEDIATRIC	SEE METHADONE LEVEL					
METHADONE TROUGH	NO LONGER AVAILABLE					
METHADONE PEAK						
METHADONE, URINE QUANTITATIVE ***LAB ONLY***	METHADONE CONFIRMATION	ORANGE TOP CONTAINER	50 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

				CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C		
FOR SCREENING ORDER DRUG SCREEN, URINE						
METHANOL LEVEL	METHYL ALCOHOL	PST (LT GREEN) OR SST (GOLD)	2 ML SERUM OR PLASMA	REQUIRES ORDERING PHYSICIAN TO GET APPROVAL FROM THE VGH BIOCHEMIST ON CALL 604-875-4111 EXT 68203 DO NOT USE ALCOHOL WIPE TO CLEAN VENEPUNCTURE SITE - USE IODINE PREP CENTRIFUGE AND ALIQUOT STORE AT 4°C NOTIFY VGH THAT A SPECIMEN IS BEING SENT 604-875-4111 EXT 68203	SEND COOL	VGH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
METHEMOGLOBIN		LI HEPARIN (DARK GREEN)	5 ML WHOLE BLOOD	COLLECT ON ICE ANALYZE BLOOD WITHIN 1 HOUR OF COLLECTION		CHEM
METHOTREXATE LEVEL	MTX	RED TOP OR PST (LIGHT GREEN Li HEPARIN)	2 ML SERUM OR PLASMA	COLLECT AS PER DOSING PROTOCOL NOTE LAST DOSE DATE, TIME (INCLUDING INFUSION START/STOP), DOSAGE AND FREQUENCY	SEND FROZEN ON DRY ICE	BCCA
		CSF	1 ML FLUID	CENTRIFUGE AND ALIQUOT FREEZE		
METHYLENEDIOXY METHAMPHETAMINE- MDMA	FOR SCREENING, ORDER URINE DRUG SCREEN					

NH LABORATORY SERVICES TEST DIRECTORY

METHYLMALONIC ACID LEVEL FOR NON-MONITORING OF METHYLMALONIC ACIDURIA, ORDER URINE ORGANIC ACIDS FIRST	METHYLMALONATE MMA	Li/Na HEP (DARK GREEN) OR EDTA (LAVENDER)	1 ML PLASMA	OOP/OOC APPROVAL REQUIRED PROVIDER TO CONSULT WITH BCCH BOCHEMICAL GENETICIST @ 604-875-2307 PRIOR TO ORDERING FASTING NOT REQUIRED COLLECT ON ICE AND KEEP COLD CENTRIFUGE 4°C AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN ON DRY ICE	BCCH (BGL) FORWARDS TO KENNEDY KREIGER INSTITUTE
MICROALBUMIN EXCRETION, 24 HOUR URINE	24 HR URINE MICROALBUMIN UMALBQ	24 HR URINE CONTAINER	10 ML URINE ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS RECORD URINE VOLUME NO STRENUOUS EXERCISE ON DAY PRIOR TO TEST DO NOT FREEZE STORE AT 4°C	SEND COOL	CHEM
MICROALBUMIN RANDOM	MICROALBUMIN/ CREATININE RATIO ACR	STERILE ORANGE TOP CONTAINER	10 ML URINE ALIQUOT	COLLECT RANDOM URINE	SEND COOL	CHEM
MICROARRAY ANALYSIS- CONSTITUTIONAL STUDIES	CYTOGENETIC CONSTITUTIONAL STUDIES GENOMIC TESTING	4 ML Na HEP (DK GREEN) AND 2 x 4 ML EDTA (LAVENDER)	4 ML TUBES	MUST USE RCH CONSTITUTIONAL STUDIES REQ STORE AT ROOM TEMP- STABLE FOR 3 DAYS SEND ASAP	SEND ROOM TEMP	RCH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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MICROARRAY ANALYSIS - PEDIATRIC	MICROARRAY ANALYSIS BCCH CHROMOSOMAL MICROARRAY CMA	EDTA (LAVENDER)	1 ML WHOLE BLOOD	MUST USE BCCH POSTNATAL CONSTITUTIONAL CYTOGENETICS REQUISITION CMA PRETEST PATIENT INFO SHOULD BE DISCUSSED WITH PARENT AND/OR GUARDIAN PRIOR TO ORDERING BCCH ONLY REQUIRES EDTA SAMPLE FOR MICROARRAY SINCE FISH ANALYSIS SHOULD HAVE BEEN PREVIOUSLY DONE ON SODIUM HEPARIN SAMPLE STABLE FOR 5 DAYS STORE AT 4°C	SEND ROOM TEMP	BCCH
MICROSCOPIC EXAMINATION CYTOLOGY STAIN	BRUSHING	SEE BCCA DIAGNOSTIC CYTOLOGY WEBSITE FOR COLLECTION INSTRUCTION		SEE BCCA DIAGNOSTIC CYTOLOGY SAMPLE ACCEPTANCE REJECTION POLICY MUST USE BCCA DIAGNOSTIC CYTOLOGY REQUISITION STORE AT ROOM TEMP SEND TO BCCA ASAP FIX AND REFRIGERATE IF >24HRS	ROOM TEMP ASAP	BCCA
	TISSUE				OR SEND COOL IF >24 HRS	
	WASH					
MICROSOMAL ANTIBODY	SEE THYROID MICROSOMAL ANTIBODY					
MITOCHONDRIAL ANTIBODY	AMA MITOCHONDRIAL CELL	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
MONONUCLEOSIS SCREEN	MONO MONOSPOT HETEROPHILE ANTIBODY	EDTA (LAVENDER) OR SST (GOLD) Clearview Mono™ Test system	1 ML SERUM OR WHOLE BLOOD	AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT SERUM WHOLE BLOOD MUST BE TESTED WITHIN 48 HRS STORE AT 4°C (CAN FREEZE SERUM IF NOT TESTING WITHIN 72 HRS)	SEND COOL	HEM
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB

NH LABORATORY SERVICES TEST DIRECTORY

MRSA SCREEN	MRSA CULTURE	STARSWAB II	N/A	ROLL TIP OF SWAB IN THE ANTERIOR NARES SAMPLE BOTH NARES WITH THE SAME SWAB SEE MRSA COLLECTION INSTRUCTIONS	SEND ROOM TEMP	MICRO
MUCIN CLOT, BODY FLUID	NO LONGER AVAILABLE					
MUCOPOLYSACCHARIDE URINE	GAGS GLYCOSAMINOGLYCAN URINE MUCO POLYSACCHARIDE	ORANGE TOP CONTAINER	10 ML URINE MORNING SPECIMEN OPTIMAL	BRING URINE TO LAB ASAP TRANSFER TO URINE SEND OUT CONTAINER AND FREEZE IMMEDIATELY	SEND FROZEN	BCCH
MULLERIAN HORMONE, ANTIBODY	AMH ANTI-MULLERIAN HORMONE MULLERIAN INHIBITORY SUBSTANCE	SST (GOLD)	3.5 ML OPTIMAL MIN: 1 ML SERUM	SELF PAY ALLOW TO CLOT UPRIGHT FOR 30 MINS CENTRIFUGE AND ALIQUOT ASAP STORE AT 4°C	SEND COOL	LIFELABS
MUMPS ANTIBODY IgG	IMMUNITY	SST (GOLD)	3 ML SERUM	CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
MUMPS ANTIBODY	MUMPS AB IgG AND IgM ACUTE INFECTION					
MUSCLE SPECIFIC RECEPTOR TYROSINE KINASE ANTIBODY ONLY PERFORMED IF ACETYLCHOLINE RECEPTOR ANTIBODY IS NEGATIVE	MuSK ANTIBODY	2 x SST (GOLD) OR RED TOP RECOMMENDED TO COLLECT 2 TUBES	2 ML SERUM POOLED	WILL NOT BE PROCESSED UNLESS ORDERED BY A NERUOLOGIST OR OPHTHALMOLOGIST USE UBC NEUROIMMUNOLOGY REQ CENTRIFUGE at 4°C AND ALIQUOT (POOL SERUM FROM BOTH TUBES IF REQUIRED) STORE AT 4°C	SEND COOL	UBC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MYCOBACTERIA CULTURE ***LEAKING SAMPLES WILL NOT BE PROCESSED*** USE BCCDC MYCOBACTERIOLOGY/TB REQ	AFB CULTURE TB CULTURE	Na HEPARIN (DARK GREEN)	5 ML WHOLE BLOOD	DO NOT USE EDTA STORE AT ROOM TEMP	SEND ROOM TEMP TDG CAT B	BCCDC
		ORANGE TOP CONTAINER	5 ML BRONCH WASHING	STORE AT 4°C	SEND COOL TGD CAT B	
		CSF TUBE	3 ML CSF	DO NOT CENTRIFUGE STORE AT 4°C		
		ORANGE TOP CONTAINER	5 ML SPUTUM NO SALIVA	COLLECT 3 SEPARATE SPECIMENS MIN 1 HOUR APART- ONE IN THE MORNING PRIOR TO EATING OR DRINKING COLLECTION CAN BE 8 HOURS APART OR DAILY FOR 3 DAYS INDICATE IF INDUCED SPUTUM STORE AT 4°C		
			20 ML URINE (NOT PROCESSED IF <20 ML)	COLLECT 3 FIRST MORNING CLEAN CATCH MIDSTREAM URINES ON CONSECUTIVE DAYS NO 24 HOUR URINE SAMPLES STORE AT 4°C		
			TISSUE	COLLECT SAMPLES ASEPTICALLY KEEP MOIST- ADD A FEW DROPS OF STERILE SALINE OR WATER DO NOT ADD FIXATIVES OR PRESERVATIVES STORE AT 4°C		
MYCOPHENOLIC ACID LEVEL	MYCOPHENOLATE LEVEL CELLCEPT LEVEL MOFETIL LEVEL	EDTA (LAVENDER)	1 ML PLASMA	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE RECORD LAST DOSE DATE & TIME CENTRIFUGE AT 4°C AND ALIQUOT FREEZE	SEND FROZEN	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
MYCOPLASMA PNEUMONIAE NAT ORDER HOLD REF UNTIL BUILT IN CERNER	MYCOPLASMA PNEUMONIA PCR	SPUTUM	ORANGE TOP STERILE CONTAINER	SEE BCCDC VIROLOGY REQ	SEND COOL	BCCDC
		NASOPHARYNGEAL WASHING (NPW)	0.5 ML MIN			
		BRONCHOALVEOLAR LAVAGE (BAL)				
		PLEURAL FLUID				
		CSF	0.3 ML MIN			
MYOGLOBIN SCREEN		ORANGE TOP CONTAINER AND RST/SST	10 ML URINE AND 1 ML SERUM	REPLACES URINE MYOGLOBIN INCLUDES URINE MYOGLOBIN SCREEN AND SERUM CREATINE KINASE (CK)	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
N METHYL D ASPARTATE RECEPTOR ANTIBODY ORDER HOLD REF UNTIL BUILT IN CERNER NO LONGER MSP BILLABLE	NMDA ANTIBODY NMDA NR1	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	MADL
NABS AND BABS	SEE INTERFERON ANTIBODY					
NEISSERIA MENINGITIS BY PCR	NEISSERIA MENINGITIS NAT MENINGO PCR MENINGOCOCCAL PCR MENINGITIDIS PCR	EDTA (LAVENDER) CSF TUBE	OPTIMAL: 2.0 ML MIN: 1.0 ML OPTIMAL: 0.5 ML MIN: 0.3 ML	DO NOT CENTRIFUGE WHOLE BLOOD OR CSF HANDLE AS STAT SPECIMEN IF A PHYSICIAN REQUESTS SAMPLE TO BE SENT STAT TO BCCH CONTACT THE MICROBIOLOGY DEPT @ 1-604-875-2345 EXT 7460 STORE AT 4°C	SEND COOL	BCCH
NETILMICIN LEVEL	NO LONGER AVAILABLE					
NEUTROPHIL CYTOPLASMIC ANTIBODY	ANCA ANTI- MYELO PEROXIDASE ANTIBODY ANTI-PROTEINASE 3	SST (GOLD)	1 ML SERUM	STAT TESTING REQUIRES APPROVAL FROM DR M NIMMO 604-875-4111 EXT 63961 CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
NICOTINE LEVEL	NO LONGER AVAILABLE					
	SEE COTININE LVL					

NH LABORATORY SERVICES TEST DIRECTORY

NON INVASIVE PRENATAL TESTING	NIPT HARMONY TEST	HARMONY KIT	AS PER KIT INSTRUCTIONS	FOR NIPT ENHANCEMENT PILOT PROJECT: ENSURE TEST IS PROVINCIALY FUNDED. COLLECT AND SHIP TO HUB SITE AS PER PROJECT INSTRUCTIONS FOR OTHER SITES: CHECK IF PROVINCIALY FUNDED OR SELF- PAY. CONTACT DYNACARE PRIOR TO TESTING 1-888-988-1888 USE DYNACARE HARMONY REQ STORE AT ROOM TEMP	SEND ROOM TEMP	DYNACARE
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
NORTRIPTYLINE LEVEL	AVENTYL SENSOVAL PAMELOR NORPRESS ALLEGON NORITREN NORTILEN	RED TOP NO GEL	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE (12 HR MIN FROM LAST DOSE) INDICATE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB
NT-PRO BRAIN NATRIURETIC PEPTIDE	NT-BNP PRO-BNP B-TYPE NATRIURETIC PEPTIDE BRAIN NATRIURETIC PEPTIDE NT-PRO BRAIN NATRIURETIC PEPTIDE	PST (LIGHT GREEN) OR SST (GOLD)	0.5 ML SERUM OR PLASMA	BNP ORDERABLE ONCE EVERY 15 DAYS IF PREVIOUS RESULT WAS HIGH CENTRIFUGE AND ALIQUOT SAMPLES SHOULD BE AT AMBIENT TEMPERATURE (20-25°C) BEFORE TESTING ONLY PERFORM AUTO DILUTIONS OF 1:2	SEND COOL IF <3 DAYS OR SEND FROZEN IF > 3 DAYS	CHEM
NUCLEAR ANTIBODY EIA SCREEN ***PROVINCIAL GUIDELINE RECOMMENDS ONE TEST PER LIFETIME, HOWEVER, MSP LIMITS TO 1 TEST PER YEAR*** POSITIVE TEST WILL REFLEX ENA & DNA Ab TESTING	ANA EIA SCREEN ANTI NUCLEAR ANTIBODY ELISA	SST (GOLD)	1 ML SERUM	AVOID HEMOLYSIS & LIPEMIA CENTRIFUGE AND ALIQUOT SERUM WITHIN 1 HR (SERUM CANNOT SIT ON SST) FREEZE	SEND FROZEN	UHNBC HEM

NH LABORATORY SERVICES TEST DIRECTORY

NUCLEAR ANTIBODY IFA SCREEN ORDER HOLD REF UNTIL BUILT	ANA IFA ANTI NUCLEAR ANTIBODY INDIRECT FLUORESCENT ANTIBODY	RED TOP	1 ML	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	UHNBC HEM
NUCLEOPHOSMIN ORDER MYELOID PANEL FOR THE APPROPRIATE TUMOUR TYPE	NPM1 (EXONS 9-11)	BONE MARROW ASPIRATE IN EDTA	0.5 ML BM	SEE BCCA MYELOID PANEL FOR MORE TEST INFO MUST USE BCCA CANCER GENETICS REQUISITION COLLECT MON-THURS BEFORE NOON SEND SAME DAY AS COLLECTION	SEND AT ROOM TEMP	BCCA
<div style="font-size: 2em; font-weight: bold; margin-top: 20px;">O</div>						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
OCCULT BLOOD, BODY FLUID NO LONGER AVAILABLE AT NH LABS	GASTROCCULT	ORANGE TOP CONTAINER	1 ML FLUID	ORDER COMMENT RESULTED AS "TEST NO LONGER PERFORMED IN NH" IF INSISTANT, AVAILABLE AT BCCH SPECIMEN STABLE 5 DAYS STORE FLUID AT 4°C		
OCCULT BLOOD, STOOL	NO LONGER AVAILABLE					
OLANZAPINE LEVEL	ZYPREXA LEVEL	RED TOP NO GEL/SST	1 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE OR POST DOSE >75% OF THE DOSING INTERVAL CENTRIFUGE WITHIN 2 HOURS OF COLLECTION AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
OLIGOCLONAL BANDING INCLUDES: <ul style="list-style-type: none"> CSF IgG ALBUMIN INDEX CSF IgG FRACTION CSF IgG SYNTHESIS INDEX 	CSF BANDING	CSF TUBE AND	2 ML CSF	PREFERABLY DRAW SERUM SAME DAY AS CSF	SEND COOL	VGH
		SST (GOLD)	1.0 ML SERUM	CAN USE SERUM +/- 7 DAYS FROM CSF COLLECTION SEND SERUM TO SPH FOR ALB AND IgG		ST PAUL'S

NH LABORATORY SERVICES TEST DIRECTORY

OLIGOSACCHARIDES SCREEN, URINE QUALITATIVE		ORANGE TOP CONTAINER	2 ML URINE	CONCENTRATED FIRST MORNING SAMPLE PREFERRED FREEZE	SEND FROZEN	BCCH
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
OPIATE , URINE QUANTITATIVE ***LAB ONLY***	OPIATE CONFRIMATION HYDROMORPHONE (DILAUDID) CODEINE MORPHINE	ORANGE TOP CONTAINER	50 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR SCREENING ORDER DRUG SCREEN, URINE	HYDROCODONE (VICODIN) PERCODAN					
ORAL BIOPSY		MICHEL'S MEDIA (ZEUS MEDIA) OR FORMALIN		SEND DIRECTLY TO VGH ATTN: UBC – ORAL PATHOLOGY LAB JBM 318 ATTACH COPY OF SURGICAL PATHOLOGY REQ STORE AT BROOM TEMP	SEND ROOM TEMP	VGH

NH LABORATORY SERVICES TEST DIRECTORY

<p>ORGANIC ACIDS SCREEN, URINE</p> <p>NONVOLATILE AND VOLATILE</p> <p>NOT FOR DIAGNOSING B12 DEFICIENCY IN ADULTS</p>	<p>SEE eLab HANDBOOK FOR TEST INFO</p> <p><u>Test Includes:</u></p> <ul style="list-style-type: none"> • N-ACETYL ASPARTIC ACID • ADIPIC ACID • BRANCHED CHAIN KETOACIDS • DICARBOXYLIC ACID • METHYLMALONIC ACID • GLUTARIC ACID • HEXAONYL GLYCINE • PYROGLUTAMIC ACID • ISOVALERIC ACID • LACTIC ACID • METHYLCITRIC ACID • METHYLMALORIC ACID • PROPRIONIC ACID • SEBACIC ACID • SUBERIC ACID • SUCCINYL ACETOACETATE • SUCCINYL ACETONE • VALPROATE METABOLITES 	<p>ORANGE TOP CONTAINER</p> <p>NO PRESERVATIVES</p>	<p>5 ML URINE</p>	<p>FIRST MORNING URINE PREFERRED</p> <p>IF SPECIFIC ORGANIC ACID REQUESTED, ADD INTO ORDER COMMENT AND SEND COPY OF REQUISITION</p> <p>IF METHYLMALONIC ACID SPECIFICALLY REQUESTED, WILL ONLY BE DONE ON PATIENTS 19 YRS AND UNDER OR WITH KNOWN METHYLMALONIC ACIDURIA</p> <p>FREEZE URINE SAME DAY AS COLLECTION</p> <p>URINE CAN BE ADDED TO FROZEN URINE THROUGHOUT COLLECTION</p>	<p>SEND FROZEN</p>	<p>BCCH</p>
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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
<p>ORGANISM FOR IDENTIFICATION</p> <p>**MICROBIOLOGY ORDER ONLY**</p>				<p>SEND OUT BENCH: DO NOT ORDER A HOLD REFERRED OUT</p> <p>INSTEAD, ADD AN ORDER COMMENT UNDER THE ACC# STATING "SWAB SENT FOR ORGANISM ID TO _____ (SITE) ON _ (DATE)</p> <p>THERE WILL BE NO PACKING LIST</p> <p>FOR UHNBC- SEND COPY OF YOUR SITE REQUISITION</p> <p>FOR BCCDC- FILL IN ISOLATES SUBMITTED FOR IDENTIFICATION ON REVERSE SIDE OF BCCDC BACTERIOLOGY REQUISITION</p>	<p>SEND AT ROOM TEMP</p>	<p>MICRO OR BCCDC</p>

NH LABORATORY SERVICES TEST DIRECTORY

OSMOLALITY	OSMO SERUM OSMO	SST (GOLD) OR RED TOP OR RST (ORANGE)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
OSMOLALITY BODY, FLUID	FLUID OSMO	ORANGE TOP CONTAINER	1 ML FLUID			
OSMOLALITY, URINE	URINE OSMO		1 ML URINE			
OSMOLALITY, 24 URINE		24 HR URINE CONTAINER				
OSMOLAR GAP (CALC)	OSMO GAP	RED TOP FOR ETOH SST (GOLD) FOR OTHERS AS REQUIRED	1 ML SERUM	SODIUM, POTASSIUM, UREA, GLUCOSE AND ETHANOL RESULTS ARE REQUIRED FOR CALCULATED OSMOLALITY DO NOT USE ALCOHOL TO WIPE VENEPUNCTURE SITE ***** CENTRIFUGE & ALIQUOT IMMEDIATELY STORE AT 4°C	SEND COOL	CHEM

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
OSMOTIC FRAGILITY	SEE RBC MEMBRANE FLOW ANALYSIS					
OUTBREAK **LAB ORDER ONLY**	ONLY USED WHEN REQUESTED BY INFECTION CONTROL STAFF	VIRAL SWAB OR ORANGE TOP CONTAINER OR NPW MUCOUS TRAP	1 ML SPUTUM NPW STOOL	COLLECT AND STORE AS PER SPECIFIC ORGANISM CAUSING OUTBREAK FOR GASTROINTESTINAL OUTBREAK, USE BCCDC OUTBREAK REQUESTION FOR RESPIRATORY OUTBREAK, USE BCCDC INFLUENZA LIKE ILLNESS OUTBREAK FORM ADD OUTBREAK # IN ORDER COMMENT	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

OVA & PARASITES	O&P	STOOL CONTAINER w. SAF PRESERVATIVE	2 mg STOOL	FOLLOW O&P INSTRUCTIONS STORE AT ROOM TEMP	SEND ROOM TEMP	BCCDC
OXALATE LEVEL		SODIUM HEPARIN	1ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING COLLECT FASTING (>12 HRS) AVOID VITAMIN C SUPPLEMENTS FOR 24 HRS COLLECT ON ICE CENTRIFUGE 4°C WITHIN 1 HR AND ALIQUOT <ul style="list-style-type: none"> ADJUST pH to 1 – 3.5 WITH APPROX 10 µL 12N HCL PER 1ML PLASMA FREEZE MUST BE RECEIVED WITHIN 14 DAYS OF COLLECTION	SEND FROZEN	MAYO
OXALATE, 24 HOUR URINE	24 HR URINE OXALATE	24 HOUR URINE CONTAINER WITH 15 ML 6N HCL	100 ML URINE ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ADJUST FINAL pH TO <2 RECORD TOTAL URINE VOL STORE AT 4°C THROUGH ENTIRE COLLECTION	SEND COOL	VGH

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
OXYCODONE, URINE QUANTITATIVE ***LAB ONLY***	OXYCODONE CONFIRMATION	ORANGE TOP CONTAINER	50 ML URINE	ALL DRUG SCREEN URINES KEPT FOR 6 WEEKS DRUG SCREEN CAN BE USED TO SEND FOR CONFIRMATION CALL LAB TO HAVE SAMPLE SENT FOR CONFIRMATION CENTRIFUGE AND ALIQUOT URINE SUPERNATANT STORE AT 4°C	SEND COOL	PROV TOX LAB
FOR SCREENING ORDER DRUG SCREEN, URINE						

NH LABORATORY SERVICES TEST DIRECTORY

OXYGEN CONTENT ***RESP ONLY***	O2 CONTENT	HEPARINIZED SYRINGE	1 ML WHOLE BLOOD	COLLECT AND KEEP ON ICE DELIVER IMMEDIATELY TO RESPIRATORY DEPT	SEND ON ICE	UHNBC RESP DEPT
OXYGEN SATURATION, MIXED VENOUS ***RESP ONLY***	BLOOD GAS MIXED VENOUS O2 SAT MIXED VENOUS	HEPARINIZED SYRINGE	1 ML WHOLE BLOOD	COLLECT AND KEEP ON ICE DELIVER IMMEDIATELY TO RESPIRATORY DEPT	SEND ON ICE	UHNBC RESP DEPT
OXYHEMOGLOBIN		LITHIUM HEPARIN (DARK GREEN)	1 ML WHOLE BLOOD	COLLECT AND KEEP ON ICE DELIVER IMMEDIATELY TO LAB DO NOT CENTRIFUGE	SEND ON ICE	CHEM

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PACIFIC ORGAN RETRIEVAL TEAM KIT	P.O.R.T. NON-LIVE ORGAN DONOR BLOODWORK	EDTA (LAVENDER) & SST (GOLD) & ACD-B (LIGHT YELLOW)	3 x 3 ML EDTA & 5 x 6 ML SST & 12 x 7 ML ACD-B	USE PORT KIT LOCATED IN ICU FOLLOW ORGAN DONATION CPS AND PORT INFORMATION SEND SPECIMENS BY AIR AS SOON AS POSSIBLE	SEND COOL	VGH
PAP SMEAR		SLIDE		COLLECTED AND PREPARED BY PHYSICIAN OR WARD FIX SLIDES WITH CYTOSPRAY SENT TO LAB IN BLUE SLIDE CASE WRAPPED IN THE REQ GYNECOLOGICAL REQUISITION MUST BE FILLED OUT COMPLETELY	SEND AT ROOM TEMP	BCCA

NH LABORATORY SERVICES TEST DIRECTORY

PAP TUMOUR MARKER	ACID PHOSPHATASE TUMOUR MARKER	SST (GOLD)	1 ML SERUM	USE BCCA TUMOR MARKER REQUISITION CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCA
PARAINFLUENZA ANTIBODY IgG/IgM	NO LONGER AVAILABLE					
PARASITE IDENTIFICATION BCCDC	WORM, PROGLOTTID FLUKE ID	ORANGE TOP CONTAINER		SEE BCCDC PARASITOLOGY REQ SUBMIT UNPRESERVED IN 0.85% NaCl IF TRANSIT TIME >3 DAYS SUBMIT IN 5% FORMALIN OR 70% ALCOHOL STORE AT 4°C	SEND COOL	BCCDC

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PARATHYROID HORMONE, INTACT	iPTH PTH	EDTA (LAVENDER) ON ICE	1 ML PLASMA SPECIMENS NOT COLLECTED ON ICE WILL BE REJECTED	FASTING NOT REQUIRED PATIENT SHOULD AVOID STRENUOUS EXERCISE IMMEDIATELY BEFORE VENEPUNCTURE ***** HALF-LIFE OF PTH IS 3-5 MINS COLLECT SAMPLE ON ICE AND BRING TO LAB IMMEDIATELY CENTRIFUGE AT 4°C AND ALIQUOT WITHIN 30 MINS ONCE CENTRIFUGED, PLASMA STABLE FOR: <ul style="list-style-type: none"> • 2 DAYS @ RT • 3 DAYS @ 4°C • 6 MONTHS @ -30C 	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

PARATHYROID HORMONE, INTRAOPERATIVE **CONSULT CHEMISTRY DEPT PRIOR TO SCHEDULING INTRAOPERATIVE PTH**	SELECT: <ul style="list-style-type: none"> BASELINE 1 BASELINE 2 POST 1 - 10 	EDTA (LAVENDER) ON ICE	1 ML PLASMA SPECIMENS NOT COLLECTED ON ICE WILL BE REJECTED	HALF-LIFE OF PTH IS 3-5 MINS COLLECT SAMPLE ON ICE AND BRING TO LAB IMMEDIATELY CENTRIFUGE AT 4°C AND ALIQUOT WITHIN 30 MINS OF COLLECTION	SEND COOL	CHEM
PARATHYROID HORMONE RELATED PEPTIDE ORDER HOLD REF UNTIL RE-ROUTED- CAN SEND TO HIC IN INTERIM (OOP APPROVAL REQUIRED) BUT MUST SPECIFY N (EDTA) OR C (Na HEP) TERMINAL- SEE HIC DIRECTORY FOR INFO	PTH RELATED PEPTIDE PTH-rP PTH RELATED PROTEIN	EDTA (LAVENDER) PRE-CHILLED	1 ML PLASMA	COLECT IN PRE-CHILLED EDTA AND DELIVER STAT TO LAB ***MUST BE PROCESSED AND IN THE FREEZER WITHIN 15 MINS OF COLLECTION*** CENTRIFUGE AT 4°C AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN ON DRY ICE	DYNACARE
PARIETAL CELL ANTIBODY SCREEN	INTRINSIC FACTOR ANTIBODY	SST (GOLD)	1 ML SERUM	PATIENT MUST NOT HAVE HAD B12 INJECTION WITHIN 24HRS OF COLLECTION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PAROXETINE LEVEL	PAXIL LEVEL	RED TOP NO GEL	4 ML SERUM	CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

PARTIAL THROMBOPLASTIN TIME	APTT PTT	NA CITRATE (LIGHT BLUE)	4.5 ML WHOLE BLOOD **2.7 ML TUBES ONLY FOR DIFFICULT COLLECTIONS* * PEDS: 1.8 ML WHOLE BLOOD- USE SPECIAL COAG TUBE FOUND IN HEM	TUBE MUST BE COMPLETELY FILLED (EXCEPT SPECIAL COAG TUBE) FOR LINE DRAWS: FOLLOW DISCARD GUIDELINES – SEE F BCP 0012 S1 ***** HEPARINIZED AND NON-HEPARINIZED PATIENTS: <ul style="list-style-type: none"> • UNOPENED WHOLE BLOOD SPECIMEN STABLE AT ROOM TEMP • CENTRIFUGE • TEST WITHIN 4HRS ***** FREEZE PLASMA IN POLYPROPYLENE TUBE IF SPECIMEN CANNOT REACH TESTING SITE WITHIN 4 HRS ADD ON PTT NOT ACCEPTABLE 4 HRS AFTER COLLECTION REGIONAL LABS: <ul style="list-style-type: none"> • SEND MIN 1 ML PLASMA FROZEN THAWED SPECIMENS CANNOT BE PROCESSED	SEND ROOM TEMP IF <1 HR POST COLLECTION SEND FROZEN PLASMA IF >4 HRS POST COLLECTION	HEM
PARVOVIRUS B19 ANTIBODY	ACUTE INFECTION	SST (GOLD)	3 ML SERUM	ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
PARVOVIRUS B19 ANTIBODY IgG	IMMUNITY					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PATERNITY TESTING	AVAILABLE THROUGH PRIVATE COMPANIES ONLY					
PERTUSSIS	SEE BORDETELLA PERTUSSIS					

NH LABORATORY SERVICES TEST DIRECTORY

PET DIALYSATE	PERITONEAL EQUILIBRATION TEST <u>INCLUDES:</u> <ul style="list-style-type: none"> • GLUCOSE • CREATININE • UREA 	ORANGE TOP CONTAINER	5 ML FLUID	COLLECTED BY PERITONEAL DIALYSIS RECORD IN "DWELL TIME BF" FIELD IN DOE: <ul style="list-style-type: none"> • 0 HR DWELL • 2 HR DWELL • 4 HR DWELL • 24 HR DWELL • OVERNIGHT DWELL RECORD TOTAL VOL IN ORDER COMMENT	SEND ROOM TEMP	CHEM
PET SERUM	PERITONEAL EQUILIBRATION TEST <u>INCLUDES:</u> <ul style="list-style-type: none"> • GLUCOSE • CREATININE • GFR • UREA • ALBUMIN 	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
pH , VENOUS	SEE BLOOD GAS, VENOUS					
pH, BODY FLUID	BODY FLUID pH URINE pH (ORDER URINALYSIS) STOOL pH FECAL pH	HEPARINIZED SYRINGE	1 ML FLUID	COLLECT ON ICE TRANSPORT IMMEDIATELY TO LAB FOR TESTING TESTING SHOULD BE DONE WITHIN 30 MINS OF COLLECTION	BRING TO LAB ASAP	CHEM
		ORANGE TOP CONTAINER	1 ML STOOL	pH PAPER USED TO TEST FOR pH ON STOOL IF COLOR OF SPECIMEN AFFECTS RESULTS, ADD AN ORDER COMMENT *STOOL – FREEZE IF NOT TESTED WITHIN 1 HR OF COLLECTION		
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PHENCYCLIDINE , URINE QUANTITATIVE	NO LONGER AVAILABLE CAN BE DONE AT LIFELABS FOR LEGAL PURPOSES ONLY					

NH LABORATORY SERVICES TEST DIRECTORY


PHENOBARBITAL LEVEL	PHENOBARB	RED TOP NO GEL	2 ML SERUM	DO NOT COLLECT IN SST TUBE DOSAGE SHOULD BE STABLE FOR 18 DAYS BEFORE SAMPLING DRAW JUST BEFORE NEXT DOSE CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
PHENYLALANINE	NO LONGER AVAILABLE AS SEPARATE ORDER					
	SEE AMINO ACID SCREEN -PLASMA					
PHENYTOIN LEVEL FREE	FREE PHENYTOIN LEVEL	RED TOP OR SST (GOLD)	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	VGH
PHENYTOIN LEVEL TOTAL	DILANTIN DIPHEYL HYDANTOIN	RED TOP OR RST(ORANGE)	1 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE DO NOT COLLECT SST TUBE CENTRIFUGE (ALIQUOT IF RED TOP)	SEND COOL	CHEM
PHILADELPHIA CHROMOSOME	ORDER BCR-ABL1					
ARBOVIRUS ANTIBODY	PHLEBOVIRUS ANTIBODY FLAVIVIRUS DENGUE VIRUS YELLOW FEVER	SST (GOLD)	2 ML SERUM	MUST USE BCCDC ZOOONOTIC DISEASE REQUISITION TO INDICATE SPECIFIC VIRAL SEROLOGY SEE eLAB HANDBOOK FOR OTHER VIRUSES THAT MAY BE INCLUDED AND CONSULTATION INSTRUCTIONS IF REQUIRED COLLECT MIN 1 HR AFTER MEAL TO PREVENT LIPEMIA ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE STORE AT 4°C	SEND COOL TDG CAT B	BCCDC
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB

NH LABORATORY SERVICES TEST DIRECTORY

PHOSPHATIDYLSERINE ANTIBODY NO LONGER MSP BILLABLE	IgG IgM PROTHROMBIN COMPLEX	RED TOP OR SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	MADL
PHOSPHOLIPID ANTIBODY	SEE LUPUS ANTICOAGULANT					
PHOSPHORUS LEVEL	PO4 INORGANIC PHOSPHATE	PST (LT GREEN) OR SST (GOLD) OR RED TOP	1 ML PLASMA OR SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
PHOSPHORUS LEVEL, 24 HOUR URINE	24 HR URINE PO4	24 HOUR URINE CONTAINER	10 ML URINE ALIQUOT	FOLLOW 24HR URINE COLLECTION INSTRUCTIONS RECORD VOL IN ORDER COMMENT CENTRIFUGE AND ALIQUOT SUPERNATANT ADJUST FINAL pH TO <3 WITH 6N HCl STORE AT 4°C	SEND COOL	CHEM
PHOSPHORUS LEVEL, URINE	URINE PO4	ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
PINWORM	SEE ENTEROBIUS VERMICULARIS					

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
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NH LABORATORY SERVICES TEST DIRECTORY

<p>PKU</p> 	<p>PHENYLKETONURIA GUTHERIE TEST NEWBORN SCREEN NEONATAL SCREEN</p>	<p>PKU CARD</p>	<p><u>OPTIMAL:</u> 4 CIRCLES <u>MIN:</u> 3 CIRCLES</p>	<p>FOR COMPLETE COLLECTION INSTRUCTIONS & TO ORDER PKU CARDS, SEE BCCH BLOOD SPOT CARD COLLECTION INSTRUCTIONS</p> <p>DO NOT TOUCH THE FILTER PAPER CIRCLE AREAS WITH HANDS, LOTIONS, DISINFECTANTS, ETC. THIS MAY CONTAMINATE TEST</p> <p>WIPE AWAY FIRST DROP OF BLOOD FROM PUNCTURE SITE</p> <p>GENTLY TOUCH FILTER PAPER AGAINST A LARGE DROP OF BLOOD, ENOUGH TO FILL THE CIRCLE AREA</p> <p>FILL ALL CIRCLES WITH BLOOD DO NOT LAYER SUCCESSIVE DROPS OF BLOOD OR APPLY BLOOD MORE THAN ONCE IN THE SAME CIRCLE</p> <p>ALLOW THE FILTER PAPER TO DRY FOR AT LEAST 3 HOURS IN A HORIZONTAL POSITION, PREFERABLY ON A RACK</p> <p>KEEP PROTECTED FROM LIGHT</p> <p>DO NOT LET CARD COME INTO CONTACT WITH ANY SURFACES, DIRECT HEAT OR SUNLIGHT</p> <p>DO NOT REFRIGERATE</p> <p>STORE AT ROOM TEMP</p>	<p>SEND AT ROOM TEMP</p>	<p>BCCH</p>
<p>PLASMINOGEN</p>		<p>Na CITRATE (LIGHT BLUE)</p>	<p>1.8 ML PLASMA</p>	<p>DELIVER TO LAB WITHIN 30 MINS OF COLLECTION</p> <p>CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION</p> <p>FREEZE- SPECIMEN MUST REMAIN FROZEN</p> <p>APROTININ THERAPY CAN CAUSE FALSE LOW RESULTS</p> <p>IF HCT >55 ANTICOAGULANT MUST BE ADJUSTED</p>	<p>SEND FROZEN ON DRY ICE</p>	<p>BCCH</p>

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PLATELET ANTIBODY FOR NAIT/PTP TEST NO LONGER DONE FOR IDIOPATHIC (AUTOMIMMUNE) THROMBOCYTOPENIA (ITP)	PLATELET ANTIBODIES	4 x 7.0 ML EDTA (LAVENDER) & RED TOP TUBE	4 x 7 ML WHOLE BLOOD & 7 ML CLOT	REQUIRES PATHOLOGIST APPROVAL ORDERING PHYSICIAN AND PHLEBOTOMIST MUST COMPLETE PLATELET IMMUNOLOGY REQUISITION DO NOT OPEN EDTA SAMPLES STORE AT 4°C SEND UNSPUN EDTA AND RED TOP TUBES TO CANADIAN BLOOD SERVICES, VANCOUVER SERUM MUST BE SEPARATED FROM CLOT AND FROZEN IF ARRIVAL TO LAB WILL EXCEED 48 HRS	SEND COOL	CBS VAN WILL SEND TO WINNIPEG
PLATELET FACTOR 4 HEPARIN INDUCED ANTIBODY	HEPARIN INDUCED THROMBOCYTOPENIA ANTIBODY HIT SCREEN HIT ELISA HEPARIN PF4 ANTIBODY HIT – SRA (SEROTONIN RELEASE ASSAY)	Na CITRATE (LIGHT BLUE) FULL DRAW	1 ML PLASMA	WARD MUST FILL OUT ST PAUL'S 4T SCORE WORKSHEET CENTRIFUGE AND ALIQUOT FREEZE CONFIRMATORY TESTING BY ELISA WILL BE ADDED IF INDICATED	SEND FROZEN ON DRY ICE	ST PAULS
PLATELET COUNT	SEE COMPLETE BLOOD COUNT (CBC)					
PLATELETS BLOOD PRODUCT FOR TRANSFUSION	PLATELET CONCENTRATE			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
PROMYELOCYTIC LEUKEMIA/RETINOIC ACID RECEPTOR ALPHA	PML-RARA	3 x 7.0 ML EDTA (LAVENDER)	20 ML WHOLE BLOOD	MUST USE BCCA CANCER GENETICS MYELOID REQUISITION SAMPLE MUST REACH BCCA WITHIN 48 HOURS OF COLLECTION AVOID LATE FRIDAY AND WEEKEND ARRIVAL STORE AT ROOM TEMP	SEND AT ROOM TEMP	BCCA

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PNEUMOCYSTIS JIROVECI PNEUMONIA IDENTIFICATION (Giemsa Stain)	NO LONGER AVAILABLE					
PNEUMOCYSTIS JIROVECI NAAT	PJP NAT	STERILE C & S CONTAINER	600µL MIN BRONCHOSCOPY (BAL) SPUTUM OR ETT NOT ACCEPTED	REQUIRES APPROVAL BY THE MEDICAL MICROBIOLOGIST Please submit specimen, detailing the patient's immunocompromised status, clinical symptoms, radiographic findings, and treatment (if any) STORE AT 4°C	SEND COOL	ST PAULS
PNH (PAROXYSMAL NOCTURNAL HEMOGLOBINURIA)	SEE FLOW CYTOMETRY (VGH)					
POLIOVIRUS ANTIBODY IgG	SEE ENTEROVIRUS NAT					
POLIOVIRUS ANTIBODY IgM						
POLYOMAVIRUS VIRAL LOAD ORDER BK VIRUS UNTIL BUILT IN CERNER	BK VIRUS POLYOMAVIRUS (JC/BK) VIRAL LOAD	7 ML EDTA (LAVENDER)	MIN: 7 ML WHOLE BLOOD TO YIELD 2 ML PLASMA	ABSOLUTE MINIMUM OF 2 ML PLASMA REQUIRED CENTRIFUGE SPECIMEN 10 MINS RT @ 1600 RCF ASEPTICALLY REMOVE PLASMA FROM RED CELLS WITHIN 6 HRS OF COLLECTION ALIUOT INTO STERILE CRYOVIAL FREEZE PLASMA	SEND FROZEN TDG CAT B	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PORPHOBILINOGEN, RANDOM URINE 	PBG	ORANGE TOP CONTAINER	10 ML URINE	COLLECT RANDOM URINE, FIRST MORNING SPECIMEN PREFERRED FREEZE URINE AND KEEP PROTECTED FROM LIGHT	SEND FROZEN	VGH
PORPHOBILINOGEN, 24 HOUR URINE 	24 HR URINE PBG	24 HR URINE CONTAINER	10 ML ALIQUOT	KEEP REFRIGERATED IF pH <8.0 ADJUST WITH Na ₂ CO ₃ (SODIUM CARBONATE ~5g) IF PH >8.0 NO ADJUSTMENT NEEDED (pH 8-10 REQUIRED). FREEZE 24 HR URINE AND KEEP PROTECTED FROM LIGHT		
PORPHYRIN, QUANTITATIVE 	PLASMA PORPHYRIN	EDTA (LAVENDER)	0.5 ML PLASMA	DO URINE PORHYRIN SCREEN FIRST - QUANTITATION ONLY DONE IF URINE PORPHYRIN POSITIVE AVOID HEMOLYSIS CENTRIFUGE AND ALIQUOT STORE AT 4°C AND KEEP PROTECTED FROM LIGHT	SEND COOL	
PORPHYRIN, STOOL 	STOOL PORPHYRIN	ORANGE TOP CONTAINER	5 g STOOL	FREEZE STOOL AND KEEP PROTECTED FROM LIGHT	SEND FROZEN	
PORPHYRIN, URINE SCREEN 	RANDOM PORPHYRIN		10 ML URINE	FRESH FIRST MORNING SPECIMEN PREFERRED FREEZE URINE AND KEEP PROTECTED FROM LIGHT		
PORPHYRIN, 24 HOUR URINE 	24 HOUR URINE PORPHYRINS COPRO-PORPHYRIN QUANTITATIVE PORPHYRIN		24 HR URINE CONTAINER	2 x 10 ML ALIQUOTS		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PORPHYRIN – FREE	SEE FREE ERYTHROCYTE PROTOPORPHYRIN					
POTASSIUM LEVEL	K+ K LEVEL SERUM POTASSIUM	PST (LIGHT GREEN) OR SST (GOLD) OR RED TOP	0.5 ML PLASMA OR SERUM	COLLECT PST FOR STAT/ASAP COLLECTIONS AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
POTASSIUM LEVEL, 24 HOUR URINE	24 HOUR URINE POTASSIUM LEVEL	24 HOUR URINE CONTAINER	1 ML URINE ALIQUOT	INDICATE 24 HOUR URINE VOLUME STORE ALIQUOT AT 4°C		
POTASSIUM LEVEL, BODY FLUID	BF POTASSIUM BF K+	ORANGE TOP CONTAINER	0.5 ML FLUID	STORE AT 4°C		
POTASSIUM LEVEL, URINE	K LEVEL URINE URINE POTASSIUM LEVEL					
PRADER-WILLI SYNDROME	SEE DNA ANALYSIS					
PREALBUMIN	TRANSTHYRETIN	RED TOP OR LI HEPARIN (DARK GREEN)	0.5 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL IF SAME	BCCH
PRIMIDONE LEVEL INCLUDES PHENOBARBITOL (ACTIVE METABOLITE)	MYSOLINE	RED TOP NO SST/GEL	2 ML SERUM	CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PROCAINAMIDE LEVEL TESTED ON THURSDAYS ONLY (VARIES WITH STAT HOLIDAYS)	PRONESTYL	RED TOP	2 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
PROCALCITONIN		SST (GOLD) OR PST (LIGHT GREEN)	1 ML SERUM OR PLASMA	CENTRIFUGE AND ALIQUOT FREEZE <u>STABILITY:</u> <ul style="list-style-type: none"> 48 HRS @ 2-8 °C 1 MONTH @ -20°C 	SEND FROZEN	RCH
PROGESTERONE LEVEL		SST (GOLD) OR RED TOP	1 ML SERUM	IF PATIENT RECEIVING THERAPY WITH BIOTIN (I.E. >5MG/DAY), NO SAMPLE SHOULD BE TAKEN UNTIL AT LEAST 8 HOURS AFTER LAST BIOTIN ADMINISTRATION CENTRIFUGE AND ALIQUOT SAMPLE SHOULD BE AT ROOM TEMP FOR ANALYSIS STORE AT 4°C	SEND COOL	UHNBC CHEM
PROINSULIN		SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING COLLECT FASTING SPECIMEN ON ICE (OVERNIGHT FAST) ALLOW BLOOD TO FULLY CLOT CENTRIFUGE IMMEDIATELY AT 4°C AND ALIQUOT FREEZE ASAP	SEND FROZEN	HIC
PROLACTIN LEVEL	LUTEOTROPIC HORMONE LEVEL	RST/SST OR RED TOP	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C STABILITY: <ul style="list-style-type: none"> 14 DAYS IF ALIQUOTED AND REFRIGERATED RST (UNALIQUOTED) 5 DAYS SST (UNALIQUOTED) 7 DAYS 	SEND COOL	UHNBC CHEM
PROLACTIN 15 MIN						
PROLACTIN 30 MIN						

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PROSTATIC ACID PHOSPHATASE	NO LONGER AVAILABLE					
PROSTATE SPECIFIC ANTIGEN	PSA		1 ML SERUM	<p>TEST IS MSP BILLABLE IF REQUISITION IS MARKED "NOT FOR SCREENING"</p> <p>TEST IS SELF PAY IF "FOR SCREENING"</p> <p>COLLECT PAYMENT PRIOR TO COLLECTION OF SPECIMEN IF SCREENING IS INDICATED (FEE CODE 90710)</p> <p>CENTRIFUGE AND ALIQUOT</p> <p>STORE AT 4°C</p>	SEND COOL	CHEM
PROSTATE SPECIFIC ANTIGEN FREE	PSA FREE FREE PSA	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN FROZEN SERUM CAN BE SENT ON AN ICE PACK MON-THURS	BCCA
PROSTATE SPECIFIC ANTIGEN RATIO	PSA RATIO PSA FREE VS TOTAL RATIO PSA (FREE/TOTAL) RATIO % FREE PSA	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCA
PROSTATE SPECIFIC ANTIGEN TUMOUR MARKER	PSA TUMOUR MARKER	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCA

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PROTEIN, BODY FLUID	BODY FLUID PROTEIN	ORANGE TOP CONTAINER	1 ML FLUID	CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
PROTEIN, CEREBROSPINAL FLUID	CSF PROTEIN	CSF TUBE	0.5 ML CSF			
PROTEIN, TOTAL	SERUM PROTEIN TOTAL	SST (GOLD) NO PST	0.1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C		
PROTEIN, URINE	URINE PROTEIN	ORANGE TOP CONTAINER	1 ML URINE	CENTRIFUGE STORE AT 4°C		
PROTEIN, 24 HOUR URINE	24 HR URINE PROTEIN	24 HOUR URINE CONTAINER	1 ML URINE ALIQUOT	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INDICATE TOTAL URINE VOLUME CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C		
PROTEIN/ALBUMIN/GLOBULIN	GLOBULIN	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE STORE AT 4°C		
PROTEIN/CREATININE RATIO URINE	UPROT:UCRE RATIO	ORANGE TOP CONTAINER	10 ML URINE			
PROTEIN ELECTROPHORESIS	SEE ELECTROPHORESIS, SERUM OR URINE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PROTEIN C	PROTEIN C ACTIVITY	2 x Na CITRATE (LIGHT BLUE)	3 ML PLASMA	FILL TUBE COMPLETELY PATIENT MUST BE OFF COUMADIN FOR 1 WEEK HEPARIN DOES NOT AFFECT RESULT CENTRIFUGE WITHIN 2 HRS OF COLLECTION DOUBLE SPIN AND ALIQUOT IN POLYPROPYLENE TUBE FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
PROTEIN S	PROTEIN S ACTIVITY					
PROTHROMBIN GENE VARIANT G20210A (PT GENE VARIANT)	SEE FACTOR V LEIDEN					
PROTHROMBIN TIME	SEE INR					
PROTOPORPHYRIN – RBC	SEE PORPHYRIN – FREE					
PSEUDOCHELINESTERASE	SEE CHOLINESTERASE					
PSEUDOMONAS AERUGINOSA ANTIBODY	NO LONGER AVAILABLE					
PSITTACOSIS SEROLOGY	NO LONGER AVAILABLE					
PSEUDOCHELINESTERASE	SEE CHOLINESTERASE					
PTH	SEE PARATHYROID HORMONE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
PURINES AND PYRIMIDINES URINE	<u>INCLUDES:</u> <ul style="list-style-type: none"> • CREATINE • GAA • GUANIDINOACETATE • GMAT • AGAT • ADENINE • HYPOXANTHINE • XANTHINE • DEOXYADENOSINE • DEOXYINOSINE • DEOXYGUANOSINE • ADENOSINE • INOSINE • GUANOSINE • SUCCINYLADEINOSINE • THYMINE • NCB-ALA • DEOXYURIDINE • GUANINE 	ORANGE TOP CONTAINER	OPTIMAL: 10 ML MIN: 2 ML	COLLECT FIRST MORNING URINE SAMPLE FREEZE URINE	SEND FROZEN	BCCH
PYRUVATE	COLLECTION MUST BE DONE AT BCCH PRIOR CONSULTATION WITH BIOCHEMICAL GENETICIST IS REQUIRED					
PYRUVATE KINASE SCREEN	2-3 DPG	EDTA (LAVENDER)	OPTIMAL: 3 ML WHOLE BLOOD MIN: 1 ML WHOLE BLOOD	COLLECT MON-THURS ONLY COLLECT NORMAL CONTROL AND SEND WITH PATIENT SAMPLE STORE AT 4°C BCCH MUST RECEIVE SAMPLE WITHIN 48 HRS OF COLLECTION	SEND COOL	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
QUAD SCREEN	SEE BIOCHEMICAL MARKER PRENATAL SCREEN					
QUETIAPINE LEVEL	SEROQUEL LEVEL	RED TOP NO SST/GEL	1 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE INDICATE LAST DOSE DATE AND TIME CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB
QUINIDINE LEVEL ORDER HOLD REF UNTIL RE-ROUTED IN CERNER	CARDIOQUIN LEVEL	RED TOP NO GEL	1 ML SERUM	INDICATE LAST DOSE DATE AND TIME SAMPLE TIME SHOULD BE JUST BEFORE NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	DYNACARE

NH LABORATORY SERVICES TEST DIRECTORY

R

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
RA	SEE RHEUMATOID FACTOR					
RABIES ANTIBODY **NOT FOR DIAGNOSIS**	RABIES SEROLOGY	SST (GOLD)	2 ML SERUM	COLLECT ≥1 HR POST MEAL TO AVOID LIPEMIA ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
RED BLOOD CELL MEMBRANE FLOW ANALYSIS	RBC MEMBRANE FLOW ANALYSIS OSMOTIC FRAGILITY (OF) EOSIN 5 MALEMIDE BINDING (E5M) HEREDITARY SPHEROCYTOSIS (HS) EMA EMA FLOW IMMUNOLOGY BAND 3 PROTEIN	3 ML EDTA (LAVENDER)	2 ML WHOLE BLOOD	USE BCCH OUTPATIENT REQ ORDERING INSTRUCTIONS: Contact the Immunology Lab at (604) 875-2345 local 7491 to pre-book test Mon– Thurs SPECIMEN MUST BE RECEIVED AND PROCESSED WITHIN 48 HRS INCLUDE PERIPHERAL SMEAR MUST INDICATE ON REQ DISORDER BEING INVESTIGATED STORE AT 4°C	SEND COOL	BCCH
RED BLOOD CELL MORPHOLOGY	SEE COMPLETE BLOOD COUNT (CBC)					
RED CELL FOLATE	NO LONGER AVAILABLE RED CELL FOLATE DELISTED FROM MSP FEE SCHEDULE OCT 2010					
REDUCED HEMOGLOBIN		LI HEPARIN (DARK GREEN)	1 ML WHOLE BLOOD	COLLECT ON ICE AND DELIVER IMMEDIATELY TO LAB DO NOT CENTRIFUGE	SEND COOL	CHEM

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
REDUCING SUBSTANCE, STOOL	NO LONGER AVAILABLE					
REDUCING SUBSTANCE, URINE	NO LONGER AVAILABLE					
RENIN ACTIVITY RANDOM	RENIN RANDOM	PRE- CHILLED EDTA (LAVENDER) VERY IMPORTANT TO COLLECT WITH PRE- CHILLED TUBES RENIN IS VERY LABILE AND TEST WILL BE REJECTED IF NOT COLLECTED ON PRE- CHILLED TUBES	1 ML PLASMA PEDIATRIC: 0.5ML PLASMA	ORDER RANDOM WHEN RENIN ORDERED INDIVIDUALLY ON REQUISITION PATIENT CAN BE IN ANY POSITION: SEATED, STANDING, AMBULATORY OR SUPINE LAB INSTRUCTIONS: COLLECT IN PRE-CHILLED EDTA ON ICE CENTRIFUGE AT 4°C WITHIN 15 MINS FREEZE PLASMA IMMEDIATELY	SEND FROZEN ON DRY ICE	ST PAULS
RENIN SUPINE SUPINE COLLECTIONS ARE GENERALLY UNNECESSARY FOR SCREENING PURPOSES IN MOBILE AND UNHOSPITALIZED PATIENTS (OUTPATIENTS)- ORDER RENIN ACTIVITY RANDOM REQUISITION MUST SPECIFY "A/R RATIO" IN ORDER TO DO SUPINE & UPRIGHT COLLECTION ON OUTPATIENTS- OTHERWISE COLLECT RENIN ACTIVITY RANDOM ONLY NOTE: INPATIENTS USUALLY ALWAYS REQUIRE SUPINE & UPRIGHT		PRE- CHILLED EDTA (LAVENDER) VERY IMPORTANT TO COLLECT WITH PRE- CHILLED TUBES RENIN IS VERY LABILE AND TEST WILL BE REJECTED IF NOT COLLECTED ON PRE- CHILLED TUBES	1 ML PLASMA	SUPINE: COLLECT SUPINE BEFORE 10:00 A.M AND AFTER LYING PRONE FOR A MINIMUM OF 1 HR LAB INSTRUCTIONS: <ul style="list-style-type: none"> COLLECT IN PRE-CHILLED EDTA ON ICE CENTRIFUGE AT 4°C WITHIN 15 MINS FREEZE IMMEDIATELY 	SEND FROZEN	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
RENIN UPRIGHT	RENIN AMBULATORY	PRE- CHILLED EDTA (LAVENDER) VERY IMPORTANT TO COLLECT WITH PRE- CHILLED TUBES RENIN IS VERY LABILE AND TEST WILL BE REJECTED IF NOT COLLECTED ON PRE- CHILLED TUBES	1 ML PLASMA	UPRIGHT: COLLECT BLOOD 2 HRS AFTER AMBULATION OR UPRIGHT POSTURE (STANDING OR SITTING)- ESSENTIALLY COLLECT IN ANY STATE AS LONG AS THEY HAVEN'T BEEN LYING DOWN IN THE PAST 2 HRS LAB INSTRUCTIONS: <ul style="list-style-type: none"> COLLECT IN CHILLED EDTA KEEP ON ICE CENTRIFUGE AT 4°C WITHIN 15 MINS ALICUOT FREEZE PLASMA IMMEDIATELY 	SEND FROZEN	ST PAULS
RESPIRATORY PATHOGEN NAAT		VIRAL UTM (NO APTIMA) SWAB		REFER TO THE LATEST COVID INFO ON OurNH FOR COLLECTION REQUIREMENTS: COVID-19 STORE AT 4°C	SEND COOL TDG CAT B	UHNBC
		LOWER RESP				
		SALINE GARGLE				
RESPIRATORY PATHOGEN NAT BCCDC		VIRAL UTM (NO APTIMA) SWAB		REFER TO eLAB HANDBOOK FOR SPECIMEN TYPES AND SPECIFIC COLLECTION REQUIREMENTS STORE AT 4°C	SEND COOL	BCCDC
		LOWER RESP				
RESPIRATORY SYNCYTIAL VIRUS	RSV RSV ANTIGEN RSV NAAT*	NASOPHARYNGEAL SWAB IN UTM (RED OR BLUE TOP)	1 ML NPW	SAMPLES ACCEPTED ON INPATIENTS AND PEDIATRIC OUTPATIENTS ONLY SEND SPECIMENS TO THE LAB ASAP TESTING AVAILABLE 7 DAYS A WEEK DURING MICRO DEPARTMENT HOURS *RSV TESTING AT UHNBC IS PERFORMED AS PART OF A COMBINED NAAT INFLUENZA AB/RSV PANEL	SEND COOL	MICRO
FOR OTHER VIRUSES ORDER VIRAL CULTURE		NASOPHARYNGEAL WASH (ORANGE TOP CONTAINER)				

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
RETICULOCYTE COUNT		EDTA (LAVENDER)	2 ML WHOLE BLOOD	CBC MUST BE ORDERED WITH RETICULOCYTE COUNT STORE AT 4°C STABLE FOR 6 DAYS	SEND COOL	HEM
RHEUMATOID FACTOR QUANTITATIVE	RA RF	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C STABLE FOR 7 DAYS	SEND COOL	CHEM
RH IMMUNE GLOBULIN BLOOD PRODUCT FOR TRANSFUSION	RHIG WINRHO RHOGAM	2 x 7 ML EDTA (LAVENDER)	2 x 7 ML WHOLE BLOOD	COLLECT MIN 1 x 7ML EDTA* *SAMPLE IS NOT REQUIRED WHEN CANADIAN BLOOD SERVICE PRENATAL REPORT IS AVAILABLE – CONTACT TRANSFUSION MEDICINE DEPARTMENT		
RICKETTSIA RICKETTSII ANTIBODY	ROCKY MOUNTAIN SPOTTED FEVER RMSF	SST (GOLD)	2 ML SERUM	ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
RICKETTSIA ANTIBODY NOT FOR RICKETTSIA RICKETTSII OR ENDEMIC RICKETTSIA TYPHI	RICKETTSIA SPP: <ul style="list-style-type: none"> • PROWAZEKII • TYPHI (MOOSERI) • SIBERICA • CONORII • AUSTRALIS • AFRICAE 	SST (GOLD)	2 ML SERUM	MUST SPECIFY SPECIES ON BCCDC ZOOTICS REQ ALLOW TO CLOT AT ROOM TEMP CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
RISPERIDONE LEVEL	RISPERIDAL	RED TOP	1 ML SERUM	DO NOT COLLECT SST TUBE CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
RISTOCETIN COFACTOR	SEE VON WILLEBRAND PANEL					
Ro ANTIBODY	SEE EXTRACTABLE NUCLEAR ANTIGEN					
ROHYPNOL LEVEL	SEE FLUNITRAZEPAM LEVEL URINE					
ROUTINE URINALYSIS	SEE URINALYSIS					
ROTAVIRUS ANTIBODY	SEE VIRAL CULTURE					
RSV ANTIBODY IgG/ IgM	NO LONGER AVAILABLE					
RUBELLA ANTIBODY	RUBELLA AB IgG & IgM GERMAN MEASLES	SST (GOLD)	1 ML SERUM	COLLECT ≥ 1 HR POST MEAL ALLOW TO CLOT UPRIGHT AT ROOM TEMP FOR 1 HR CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
RUBELLA ANTIBODY IgG	GERMAN MEASLES RUBELLA VACCINE RUBELLA IMMUNE STATUS					
RUSSEL'S VIPER VENOM	SEE DILUTE RUSSEL'S VIPER VENOM TEST					

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SACCHAROMYCES CEREVISIAE ANTIBODY	ASCA	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
SALICYLATE LEVEL	ACETYLSALICYLIC ACID ASA ASPIRIN LEVEL	RED TOP OR RST (ORANGE)	1 ML SERUM	DO NOT COLLECT SST TUBE FOR THERAPEUTIC MONITORING, COLLECT JUST BEFORE NEXT DOSE FOR OVERDOSE, SPECIMENS SHOULD BE COLLECTED AS SOON AS POSSIBLE AND WITHIN 6 HRS AFTER INGESTION CENTRIFUGE (ALIQUOT IF RED TOP) STORE AT 4°C	SEND COOL	CHEM
SALINE INFUSION		EDTA (LAVENDER) FOR RENIN & ALDOSTERONE SST (GOLD) FOR CORTISOL & ELECTROLYTES		BOOKED THROUGH AMBC OR IV THERAPY <u>INSTRUCTIONS:</u> <ul style="list-style-type: none"> PATIENT LAYS SUPINE FOR MIN. 1HR (STRICT BED REST) AFTER 1HR DRAW SUPINE <ul style="list-style-type: none"> RENIN ALDOSTERONE CORTISOL ELECTROLYTES PATIENT TO REMAIN UPRIGHT (STANDING/WALKING OR SITTING UPRIGHT) FOR 2 HRS AFTER 2 HRS DRAW AMBULATORY RENIN & ALDOSTERONE PATIENT RETURNS TO BED WHERE IV NORMAL SALINE 500ML/HR X 4 HRS GIVEN RANDOM RENIN AND ALDOSTERONE DRAWN 4 HRS AFTER SALINE STARTED POST SALINE ALDOSTERONE MUST BE DRAWN NO MATTER WHAT IS ORDERED (RENIN IS OPTIONAL) 		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SQUAMOUS CELL CARCINOMA ANTIGEN	SCC TUMOUR MARKER	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCAA
SARCOPTES SCABIEI	SCABIES SCABIES IDENTIFICATION	STERILE CONTAINER		CARE PROVIDER TO COLLECT SKIN SCRAPINGS AT END OF TRACKS	SEND ROOM TEMP	BCCDC
SCHILLINGS TEST	NO LONGER AVAILABLE					
	ALTERNATIVE TESTING IS PARIETAL CELL ANTIBODY ALONG WITH B12 LEVELS					
SCHISTOSOMA URINE	NO LONGER AVAILABLE					
SCHISTOSOMIA SEROLOGY	SCHISTOSOMIASIS SEROLOGY BILHARZIASIS	SST (GOLD)	2 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
SCLERODERMA PROFILE ORDER HOLD REF UNTIL BUILT IN CERNER NO LONGER MSP BILLABLE	SYSTEMIC SCLEROSIS	SST (GOLD) OR RED TOP OR EDTA (LAVENDER)	1 ML SERUM OR PLASMA	MUST USE MITOGEN AUTOANTIBODY REQUISITION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	MADL
SEDIMENTATION RATE	SEE ERYTHROCYTE SEDIMENTATION RATE					
SELENIUM LEVEL	SELEPEN LEVEL	NAVY CLOT (NO ADDITIVE)	1 ML SERUM	SEE BCCDC COLLECTION OF BLOOD FOR TRACE ELEMENTS CENTRIFUGE AND ALIQUOT INTO SERILE POLYPROPYLENE TUBE USING A STERILE PIPETTE FREEZE	SEND FROZEN ON DRY ICE	BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SEMEN MORPHOLOGY ***LAB ONLY***		ORANGE TOP CONTAINER		PATIENT TO ABSTAIN FROM SEXUAL ACTIVITY FOR 3 DAYS PRIOR TO COLLECTION PATIENT MUST FOLLOW SEMEN ANALYSIS COLLECTION INSTRUCTIONS SPECIMEN TO BE BROUGHT TO OUTPATIENT DESK WITHIN 30 MINS OF COLLECTION BRING TO HEMATOLOGY WITHIN 30 MINS OF COLLECTION PHONE HEMATOLOGY DEPT IF SPECIMEN CAN'T BE DELIVERED TO HEMATOLOGY IMMEDIATELY DO NOT REFRIGERATE ***** SEE SLIDES FOR SEMEN MORPHOLOGY- KRUGER CRITERIA FOR PROCESS	SEND ROOM TEMP	LIFELABS
SEMEN ANALYSIS, POST VASECTOMY	POST VAS SEMEN ANALYSIS	ORANGE TOP CONTAINER		FOLLOW SEMEN ANALYSIS COLLECTION INSTRUCTIONS PATIENT TO ABSTAIN FROM SEXUAL ACTIVITY FOR 3 DAYS PRIOR TO COLLECTION SPECIMEN TO BE BROUGHT TO OUTPATIENT DESK WITHIN 30 MINS OF COLLECTION DO NOT REFRIGERATE PLEASE CONTACT YOUR LOCAL LAB FOR AVAILABILITY OF TESTING/TIMES ETC.	IN HOUSE ONLY	HEM
SERUM FREE LIGHT CHAINS	SEE IMMUNOGLOBULIN LIGHT CHAINS, FREE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SEX HORMONE BINDING GLOBULIN	SEE TESTOSTERONE BIOAVAILABILITY					
SGOT	SEE ASPARTATE AMINOTRANSFERASE					
SGPT	SEE ALANINE AMINOTRANSFERASE					
SIPS 1 & 2	SEE BIOCHEMICAL MARKER PRENATAL SCREEN					
SIROLIMUS LEVEL	RAPAMYCIN	EDTA (LAVENDER)	1 ML WHOLE BLOOD	STORE AT ROOM TEMP STABLE @ RT FOR 7 DAYS SEND WHOLE BLOOD	SEND AT ROOM TEMP	VGH
SKIN BIOPSY, ALOPECIA		10% NEUTRAL BUFFERED FORMALIN		SEND DIRECTLY TO VGH ATTN: DERMATOPATHOLOGY ATTACH COPY OF SURGICAL PATHOLOGY REQUISITION STORE AT ROOM TEMP	SEND AT ROOM TEMP	VGH
SKIN BIOPSY, IMMUNOFLUORESCENCE		ZEUS FLUID (MICHEL'S TRANSPORT MEDIUM)	20X THE VOLUME OF THE TISSUE SAMPLE	ZEUS FLUID FOR IMMUNOFLUORESCENCE SEND DIRECTLY TO VGH ATTN: DERMATOPATHOLOGY ATTACH COPY OF ORIGINAL SURGICAL PATHOLOGY REQ STORE AT ROOM TEMP FORWARD ANY ADDITIONAL FORMALIN FIXED SAMPLES TO VGH- DO NOT SUBMIT TO HISTOLOGY	SEND AT ROOM TEMP	VGH
		10% NEUTRAL BUFFERED FORMALIN *OPTIONAL*				

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SMOOTH MUSCLE ANTIBODY SCREEN	ASMA	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	VGH
SODIUM LEVEL	NA +	PST (LT GREEN) OR SST (GOLD)	0.5 ML PLASMA OR SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
SODIUM LEVEL, 24 HOUR URINE	24 HR URINE SODIUM	24 HOUR URINE CONTAINER	1 ML URINE ALIQUOT	NO PRESERVATIVE REQUIRED INDICATE TOTAL URINE VOL STORE AT 4°C		
SODIUM LEVEL, BODY FLUID	BODY FLUID SODIUM	ORANGE TOP CONTAINER	1 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C		
SODIUM LEVEL, URINE	RANDOM URINE SODIUM		1 ML URINE			
SODIUM/POTASSIUM	E2 NA/K LEVEL LYTES	PST (LT GREEN) OR SST (GOLD)	0.5 ML SERUM	LYTES ORDERED ON OUTPATIENTS CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
SOMATOMEDIN C	SEE INSULIN-LIKE GROWTH FACTOR					
SPECIFIC GRAVITY, URINE	SEE URINALYSIS					
SPECIFIC GRAVITY, BODY FLUID	NO LONGER AVAILABLE					
SPERM ANTIBODY HOLD REF UNTIL RE-ROUTED		SST (GOLD)	1 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	HIC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SPHINGOMYELINASE BLOOD SPOT ORDER HOLD REF UNTIL TEST BUILT	NIEMANN PICK A/B	WHATMAN 903 BLOOD SPOT CARD	OPTIMAL: 4 SPOTS MIN: 2 SPOTS 100 uL /SPOT MAX SPOTS MUST BE SOAKED THROUGH TO THE BACK OF CARD	BGL Requisition 1. Fill out patient demographics on the card & write test name on bottom 3. Collect blood using syringe, Na/Li Hep tube or finger poke. 4. Let bloodspot card dry on flat surface at room temperature for 3-4 hours. Do not stack wet bloodspot cards. Do not expose to heat or direct sunlight. 5. Once dry, place bloodspot card in sealed plastic bag with a sachet of desiccant (if available). 6. Store in 4°C fridge until shipping.	SEND ROOM TEMP	BCCH (BGL)
STEM CELL ASSAY (INCLUDES CBC) FOR SERUM EPO SEE ERYTHROPOIETIN LEVEL	STEM CELL CULTURE HEMATOPOIETIC STEM CELL CULTURE ERYTHROID COLONY GROWTH EPO INDEPENDENT GROWTH COLONY	BLOOD: 4 – Na HEPARIN (DARK GREEN) BONE MARROW: 1 x 20 ML STEM CELL CULTURE TUBES (OBTAINED DIRECTLY FROM STEM CELL ASSAY LAB)	4 x 4.5ML WHOLE BLOOD TUBES 1-3 ML BONE MARROW	SEE STEM CELL ASSAY REQUISITION AND INSTRUCTIONS COLLECT MON – THURS BEFORE NOON STORE AT 4°C SEND CBC RESULTS SEND WHOLE BLOOD/ BONE MARROW SAME DAY AS COLLECTION ADVISE STEM CELL ASSAY LAB @ 1-604-675-8000 LOCAL 7746 WHEN SPECIMEN HAS BEEN SENT & PROVIDE THEM WITH WAYBILL NUMBER	SEND COOL	STEM CELL ASSAY LAB @ TERRY FOX LAB
STOOL LEUKOCYTE	NO LONGER AVAILABLE					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
STREPTOLYSIN O ANTIBODY *** ANTI-DNase B MAY BE REFLEXED DEPENDING ON ASOT RESULT***	STREPTOCOCCAL INFECTIONS SEROLOGY ASOT ANTI-STREPTOLYSIN O STREPTOZYME	SST (GOLD)	2 ML SERUM	NO LONGER PERFORMED IN NH SEND SCREEN/TITRES TO BCCDC SEE BCCDC ZONOTICS AND EMERGING PATHOGENS REQUISITION CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
STREP. PYOGENES ANTIBODY	NO LONGER AVAILABLE					
	SEE STREPTOLYSIN O ANTIBODY					
STRONGYLOIDES SEROLOGY	STRONGYLOIDIASIS STRONGYLOIDES STERCORALIS	SST (GOLD)	2 ML SERUM	USE BCCDC ZONOTICS DISEASE REQUISITION CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
SULFATIDE URINE RANDOM		ORANGE TOP CONTAINER	5 ML	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING DO NOT CENTRIFUGE (SEDIMENT NEEDED) FREEZE	SEND FROZEN	HIC
SULFOCYSTEINE URINE RANDOM	S- SULFOCYSTEINE	ORANGE TOP CONTAINER	5 ML	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING DO NOT CENTRIFUGE (SEDIMENT NEEDED) FREEZE	SEND FROZEN	HIC
SULFONYLUREA, URINE ORDER HOLD REF UNTIL CERNER UPDATED		STERILE URINE CONTAINER	10 ML	REFRIGERATE IMMEDIATELY STORE AT 4°C	SEND ON ICE PACK	PROVTOX

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
SYPHILIS SEROLOGY	TREPONEMA PALLIDUM	SST (GOLD)	1 ML SERUM	CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
	RPR (RAPID PLASMA REAGIN) BEJEL VDRL STS TPPA FTA-ABS	CSF TUBE	0.5 ML CSF	STORE AT 4°C		
SYPHILIS SEROLOGY PERINATAL	POSTPARTUM RPR TPPA FTA	SST (GOLD)	1 ML SERUM	SCREEN ONLY- CONFIRMATORY TESTING WILL BE REFLEXED AUTOMATICALLY AT BCCDC CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
SWEAT CHLORIDE TEST	CYSTIC FIBROSIS TEST			SUBMIT REQUISITION TO UHNBC CHEMISTRY DEPT CHEMISTRY DEPT WILL BOOK PATIENT CHEMISTRY DEPT COLLECTS AND TESTS SWEAT SAMPLE		CHEM

NH LABORATORY SERVICES TEST DIRECTORY

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TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TACROLIMUS LEVEL	FK506 FK 506	EDTA (LAVENDER)	1 ML WHOLE BLOOD	DRAW JUST PRIOR TO NEXT DOSE OR 9-12 HRS POST DOSE RECORD LAST DOSE DATE & TIME STORE AT 4°C STABLE FOR 7 DAYS VGH DOES NOT RUN STAT TACROLIMUS ON WEEKENDS EXCEPT WITH VGH PATHOLOGIST APPROVAL	SEND COOL	VGH
TB CULTURE	SEE MYCOBACTERIA CULTURE					
T CELL CLONALITY GENETIC TEST ORDER HOLD REF UNTIL TEST BUILT IN CERNER	T CELL CLONALITY T-CLONALITY	EDTA (LAVENDER)		MUST SEND BCCA GENETICS LABORATORY LYMPHOID TESTING REQUISITION SEND WHOLE BLOOD STORE AT ROOM TEMP	SEND AT ROOM TEMP	BCCA
TESTOSTERONE, BIOAVAILABLE	BIO TESTOSTERONE FREE TESTOSTERONE SEX HORMONE BINDING GLOBULIN	PST (LT GREEN) OR SST (GOLD)	2 ML SERUM	<u>VGH REPORTS:</u> 1. BIOAVAILABLE TESTOSTERONE 2. TOTAL TESTOSTERONE 3. SEX HORMONE BINDING GLOBULIN (SHBG) 4. CALCULATED FREE 5. TESTOSTERONE INDEX (FTI) ***** TESTOSTERONE DISPLAYS A CIRCADIAN RHYTHM- OPTIMAL COLLECTION IS BEFORE 10AM (NOT REQUIRED) CENTRIFUGE AND ALIQUOT STORE AT 4°C FREEZE IF TRANSIT TIME LONGER THAN 48HRS	SEND COOL <48HRS OR SEND FROZEN >48 HRS	VGH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TESTOSTERONE LEVEL, FREE	SEE BIOAVAILABLE TESTOSTERONE					
TESTOSTERONE LEVEL, TOTAL		SST (GOLD) OR RED TOP	2 ML SERUM	PATIENT RECEIVING BIOTIN THERAPY (>5 MG/DAY) SHOULD HAVE SAMPLE DRAWN AT LEAST 8 HOURS AFTER LAST BIOTIN ADMINISTRATION COLLECT BEFORE 11AM OR WITHIN 3 HRS OF WAKING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
TESTOSTERONE, TUMOUR MARKER		SST (GOLD)	1 ML SERUM	MUST USE BCCA TUMOR MARKER REQUISITION CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCA
CLOSTRIDIUM TETANI TOXIN ANTIBODY	TETANUS ANTIBODY CLOSTRIDIUM TETANI SEROLOGY	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C ***MUST BE ≤ 16 YRS OF AGE OR ORGAN TRANSPLANT PATIENT- ROUTINE IMMUNE STATUS TESTING IS DISCONTINUED***	SEND COOL	BCCDC
TETANUS IMMUNOGLOBULIN BLOOD PRODUCT FOR TRANSFUSION	TIG TETANUS IG			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION. SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
TETRAHYDRO CANNABINOL SCREEN	SEE DRUG SCREEN, URINE					
THALASSEMIA SCREEN	SEE HEMOLGLOBIN ELECTROPHORESIS					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
THEOPHYLLINE LEVEL	AMINOPHYLLINE ELIXOPHYLLIN	RED TOP OR RST (ORANGE) NO SST	1 ML SERUM	FOR MAINTENANCE THERAPY, DOSE STABLE FOR 48 HRS INDICATE LAST DOSE DATE AND TIME <u>ADULTS DRAW:</u> <ul style="list-style-type: none"> 2 HRS AFTER INGESTION OR 4 HRS AFTER SUSTAINED RELEASE PRODUCT <u>NEWBORNS DRAW:</u> <ul style="list-style-type: none"> TROUGH – DRAW PRIOR TO NEXT DOSE OR PEAK – DRAW 30 MINUTES AFTER END OF INFUSION CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
THIOPURINE METHYLTRANSFERASE GENOTYPING	TPMT GENOTYPE TPMT RBC ENZYME ACTIVITY	EDTA (LAVENDER)	3 ML WHOLE BLOOD	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING DO NOT SPIN STORE 4°C (STABLE 7 DAYS) DO NOT FREEZE	SEND COOL	HIC
THIOPURINE METHYLTRANSFERASE PHENOTYPING ORDER HOLD REF UNTIL BUILT IN CERNER	TPMT PHENOTYPING TPMT RBC ENZYME ACTIVITY	EDTA (LAVENDER)	6 ML WHOLE BLOOD 1 ML MIN WHOLE BLOOD	NOT PERFORMED ON PATIENTS WHO HAVE RECEIVED BLOOD TRANSFUSION IN LAST MONTH. PATIENTS SHOULD ABSTAIN ≥48 HRS FROM: <ul style="list-style-type: none"> SULFASALAZINE (AZULFIDINE) MESALAMINE (ASACOL) OLSALAZINE (DIPENTUM) COPY OF REQUISITION REQUIRED DO NOT CENTRIFUGE STORE AT 4°C	SEND COOL	SURREY MEMORIAL HOSPITAL
IF PATIENT ON TREATMENT, SEE THIOPURINE METABOLITES						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB

NH LABORATORY SERVICES TEST DIRECTORY

TISSEEL	FIBRIN SEALANT			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION. SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
BLOOD PRODUCT FOR TRANSFUSION						
THROMBIN III ANTIBODY ASSAY (INCLUDES INR & PTT)	ANTI-THROMBIN III ATT III AT 3	Na CITRATE (LIGHT BLUE) FULL DRAW	3 ML PLASMA	PATIENT MUST BE OFF HEPARIN FOR 1 WEEK PRIOR TO TESTING EXCEPT IF PATIENT START ON HEPARIN <48 HRS COUMADIN/WARFARIN DOES NOT AFFECT RESULTS FILL TUBE COMPLETELY DOUBLE-SPIN TO OBTAIN PLATELET POOR PLASMA WITHIN 2 HRS AND ALIQUOT INTO POLYPROPYLENE TUBE FREEZE SEND RESULTS OF INR & PTT WITH SPECIMEN	SEND FROZEN	ST PAULS
THROMBIN TIME		LIGHT BLUE (SODIUM CITRATE)	1 ML PLASMA	FILL TUBE COMPLETELY ANALYZE IMMEDIATELY IF TESTING DELAYED, DOUBLE SPIN AND ALIQUOT • STABLE 2 HOURS @ RT • 2 WEEKS @ -20°C	SEND FROZEN	HEM
THROMBOPHILIA SCREEN INCLUDES: • FACTOR V LEIDEN • PT GENE VARIANT • PROTEIN C • PROTEIN S • ANTITHROMBIN III	SEE INDIVIDUAL TESTS FOR COLLECTION INSTRUCTIONS					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
THYROGLOBULIN ***ST PAULS PERFORMS BOTH THYROGLOBULIN AND THYROGLOBULIN ANTIBODY ***	THYROXINE BINDING GLOBULIN THYROGLOBULIN ANTIBODY	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS
THYROID STIMULATING HORMONE	TSH	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
THYROID STIMULATING HORMONE RECEPTOR ANTIBODY	TSH ANTIBODY RECEPTOR TRAB ANTI-TSH RECEPTOR TSI HTSI LATS (LONG ACTING STIMULATING Ab) THYROID STIMULATING IMMUNOGLOBULINS THYROTROPIN RECEPTOR ANTIBODY	SST (GOLD) OR RED TOP	1 ML	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS
THYROPEROXIDASE ANTIBODY	ANTI-TPO ANTI- MICROSOMAL ANTIBODY MICROSOMAL ANTIBODY THYROID PEROXIDASE ANTIBODY ANTI THYROID ANTIBODY THYROID MICROSOMAL Ab	SST (GOLD) OR RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
THYROXINE	FREE T4 FT4 FREE THYROXINE T4	SST (GOLD)	1 ML SERUM	AVOID LIPEMIA CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
TIBC	SEE IRON/TIBC					
TISSUE TRANSGLUTAMINASE ANTIBODY (CELIAC ANTIBODY SCREEN)	TTG ANTI-TTG IgA ENODMYIAL ANTIBODY	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE VGH TESTS TTG ONCE A WEEK	SEND FROZEN	VGH
TISSUE TYPING	SEE HLA TYPING					
TOBRAMYCIN LEVEL TROUGH		RED TOP OR RST (ORANGE)	0.5 ML SERUM	TROUGH SHOULD BE COLLECTED 30 MINS PRIOR TO NEXT DOSE	SEND COOL	CHEM
TOBRAMYCIN LEVEL PEAK				IV PEAK SHOULD BE COLLECTED 30 MINS POST INFUSION IM PEAK SHOULD BE COLLECTED 60 MINS POST DOSE PEAKS ARE NOT REQUIRED FOR THE MAJORITY OF PATIENTS		
TOBRAMYCIN LEVEL				FOR TROUGH, PEAK OR RANDOM: <ul style="list-style-type: none"> CENTRIFUGE ALIQUOT (IF RED TOP) STORE AT 4°C 		
TOPIRAMATE LEVEL	TOPAMAX LEVEL	RED TOP NO SST OR GEL	2 ML SERUM	COLLECT IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT WITHIN 2 HRS OF COLLECTION STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

TEST		SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING		SHIPPING		TEST LAB	
T.O.R.C.H. TOXOPLASMOSIS RUBELLA CYTOMEGALOVIRUS HERPES		SUBMIT WITH: <ul style="list-style-type: none">SEROLOGY REQUISITION FOR TOXOPLASMOSIS, RUBELLA, AND PARVO B19VIROLOGY REQUISITION FOR CMV & HERPESZOOTIC REQUISITION FOR TOXOPLASMOSIS	SST (GOLD)	2 ML WHOLE BLOOD	FOR NEONATAL AND CONGENITAL INFECTIONS: <ul style="list-style-type: none">COLLECT BLOOD SAMPLES FROM BOTH MOTHER AND INFANT REFER TO TORCH COLLECTION CHART AVOID USING CORD BLOOD CENTRIFUGE AND ALIQUOT STORE AT 4°C		SEND COOL		BCCDC	
Sample Collection – Congenital and Neonatal Infections Torch Serology (Toxoplasmosis, Rubella, Cytomegalovirus and Herpes)										
Submit blood samples from both mother and infant (avoid using cord blood if possible)										
		NASOPHARYNX	RECTAL SWAB	CSF	URINE	VESICLES	CONJUNCTIVA	CERVIX	SERUM	AUTOPSY/BIOPSY ***
RUBELLA	BABY	X*(X3)			X*(X3)				X	
	MOM								X	
CMV	BABY				X*(X3)				X	
	MOM								X	
HERPES	BABY	X	X	X*		X	X		X	
	MOM					X		X	X	
ENTEROVIRUS	BABY	X	X	X		X	X			
	MOM	X	X	X		X	X			
PARVO B19 (HYDROPS)	BABY								X	LIVER, ADRENAL, BONE MARROW
	MOM								X	
VARICELLA	BABY			X		X	X		X	
	MOM			X		X	X		X	

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TOTAL VOLUME 24 HR URINE		24 HOUR URINE CONTAINER		FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS INDICATE TOTAL URINE VOLUME ALIUOT URINE INTO ORANGE TOP CONTAINER STORE AT 4°C	SEND COOL	CHEM
TOTAL VOLUME 48 HR URINE		24 HOUR URINE CONTAINER		FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS CONTINUING AN EXTRA 24 HRS INDICATE TOTAL URINE VOL ANY TESTING SHOULD BE ORDERED AS RANDOM URINES NOT 24 HR	SEND COOL	CHEM
TOXOCARA ANTIBODY, IgG	TOXOCARA SEROLOGY TOXOCAROSIS TOXOCARA CANIS	SST (GOLD)	2 ML SERUM	BBCDC DOES NOT PERFORM TESTING. IT IS REFERRED TO THE NATIONAL REFERENCE CENTRE FOR PARASITOLOGY IN MONTREAL CENTRIFUGE AND ALIUOT STORE AT 4°C	SEND COOL	NATIONAL REFERENCE CENTRE FOR PARASTOL-OGY BY WAY OF BCCDC
TOXOPLASMA ANTIBODY	TOXOPLASMA SEROLOGY IgM/IgG	SST (GOLD)	2 ML SERUM	CENTRIFUGE AND ALIUOT STORE AT 4°C	SEND COOL	BCCDC
TPA TUMOR MARKER	NO LONGER AVAILABLE					
TRACE ELEMENT ANALYSIS <u>INCLUDES :</u> <ul style="list-style-type: none">• COPPER• LEAD• ZINC	SEE INDIVIDUAL TESTS FOR COLLECTION INSTRUCTIONS					

NH LABORATORY SERVICES TEST DIRECTORY

TRANSFERRIN ***NOT THE SAME AS TIBC OR %SAT- ORDER IF SPECIFICALLY REQUESTED ON REQ***		DARK GREEN (LITHIUM HEPARIN)	1 ML SERUM	AVOID HEMOLYSIS OVERNIGHT FAST PREFERRED CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	ST PAULS
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TRANSFERRIN ISOELECTRIC FOCUSING	TRANSFERRIN ISOFORMS CARBOHYDRATE DEFICIENT GLYCOPROTEIN SYNDROM	RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE SERUM	SEND FROZEN	BCCH
TRANSFUSION REACTION SCREEN		2 x 7.0 ML EDTA (LAVENDER) & FIRST VOIDED URINE	7 ML WHOLE BLOOD	REPORT TRANSFUSION REACTION IMMEDIATELY TO TRANSFUSION MEDICINE ON APPEARANCE OF SYMPTOMS FILL OUT TRANSFUSION REACTION REPORT FORM AND GROUP & SCREEN REQUISITION ***** LAB TO COLLECT POST TRANSFUSION REACTIONS SPECIMENS. NEW BBID BAND IS REQUIRED FOR THIS COLLECTION	SEND COOL	TMS
TRAZODONE LEVEL	DESYREL LEVEL	RED TOP NO SST/GEL	2 ML SERUM	PATIENT SHOULD BE AT STEADY STATE FOR 1-2 DAYS PRIOR TO SAMPLING REQUISITION SHOULD INDICATE WHICH TRICYCLIC PATIENT IS ON DRAW SAMPLE JUST PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB


NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TREATABLE INTELLECTUAL DISABILITY ENDEAVOUR ORDER INDIVIDUAL TESTS UNTIL PANEL IS BUILT	TIDE PROTOCOL PANEL INCLUDES: <ul style="list-style-type: none"> COPPER CERULOPLASMIN ACYCARNITINE BLOOD SPOT AMINO ACID SCREEN HOMOCYSTEINE LEVEL ORGANIC ACIDS URINE SCREEN URINE PURINES 	PANEL WILL ORDER EACH INDIVIDUAL TEST		COLLECT INDIVIDUAL TESTS AS PER COLLECTION REQUIREMENTS	SEND AS PER INDIVIDUAL TEST	AS PER INDIVIDUAL TEST
TREPONEMA PALLIDUM MICROSCOPY	SYPHILIS MICROSCOPY	DF SLIDES SEE BCCDC SAMPLE CONTAINER ORDER FORM	N/A	PHYSICIAN TO COLLECT FLUID FROM PUSTULE ONTO DF SLIDE KIT	SEND ROOM TEMP	BCCDC
TRICHINELLA ANTIBODY ORDER HOLD REF UNTIL BUILT IN CERNER	TRICHINELLA SEROLOGY TRICHINELLOSIS TRICHINELLA SPIRALIS TRICHINOSIS	SST (GOLD)	2 ML SERUM	SEE BCCDC ZOOONOTIC DISEASE REQUISITION CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
TRICHOMONAS VAGINALIS NAAT **CAN BE ADDED ON TO CHLAM/GC NAAT TESTING**	CERVIX	APTIMA UNISEX SWAB	N/A	PIERCED OR TAMPERED LIDS OR LEAKING SAMPLES WILL NOT BE PROCESSED AND SHOULD NOT BE SENT TO THE LAB STABILITY AT ROOM TEMP: 60 DAYS FOR URINES: ORIGINAL URINE MUST BE TRANSFERRED TO URINE COLLECTION KIT WITHIN 24 HRS	STORE AT ROOM TEMP IN TRANSPORT MEDIA UP TO 60 DAYS	UHNBC MICRO
	VAGINA	APTIMA MULTITEST SWAB	N/A			
	URINE	PRIMARY : ORANGE TOP CONTAINER SECONDARY : URINE APTIMA (YELLOW)	2 ML			
TRICYCLIC ANTIDEPRESSANT SCREEN	NO LONGER AVAILABLE ORDER INDIVIDUAL DRUG LEVEL					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TRICYCLIC ANTIDEPRESSANT SCREEN, URINE	SEE DRUG SCREEN, URINE					
TRIGLYCERIDE, BODY FLUID	TRIG TRIACYLGLYCEROL	ORANGE TOP CONTAINER	0.5 ML FLUID	CENTRIFUGE AND ALIQUOT SUPERNATANT STORE AT 4°C	SEND COOL	CHEM
TRIGLYCERIDES		SST (GOLD) OR RED TOP	0.5 ML SERUM	PATIENT SHOULD FAST 12-14 HRS OVERNIGHT (WATER ALLOWED) NO CONSUMPTION OF ALCOHOL WITHIN 72 HRS PRIOR CENTRIFUGE AND ALIQUOT STORE AT 4°C		
TRIIODOTHYRONINE FREE ADULT & PEDIATRIC SAMPLES	T3 FREE UNBOUND T3	SST (GOLD)	2 ML SERUM	NO RADIOISOTOPES MUST BE GIVEN 24 HOURS PRIOR TO VENEPUNCTURE CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
TRIIODOTHYRONINE REVERSE	REVERSE T3 REVERSE TRIIODOTHYONINE RT3	RED TOPPED	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C TEST NOT COVERED BY MSP CONTACT LIFELABS DIRECTLY FOR COST OF TEST	SEND COOL	LIFELABS
TRIIODOTHYRONINE TOTAL ORDER HOLD REF UNTIL BUILT IN CERNER	T3 TOTAL TT3	SST (GOLD)	0.5 ML SERUM	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	HIC
NO LONGER PERFORMED AT UHNBC- ORDER T3 FREE						

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TROPONIN T	TROPONIN T TNT	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
TROPONIN T – HIGH SENSITIVITY	TNT HS	RST (ORANGE)	0.5ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C <u>TEST AVAILABLE ONLY AT:</u> <ul style="list-style-type: none"> • PRINCE GEORGE • DAWSON CREEK • FORT ST. JOHN • PRINCE RUPERT • QUESNEL • SMITHERS • TERRACE 	SEND COOL	CHEM
TRYPANOSOMA ANTIBODY	AFRICAN TRYPANOSOMIASIS SEROLOGY	SST (GOLD)	1 ML SERUM	SEE BCCDC ZOOBOTICS REQ CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
TRYPSIN, IMMUNOREACTIVE 	TRYPSINOGEN	PKU CARD	MIN OF 2 CIRCLES	FOLLOW BCCH IRTDOT COLLECTION INSTRUCTIONS ALLOW BLOOD SPOTS TO DRY COMPLETELY PROTECT FROM LIGHT MARK “TRYPSIN” ON BOTTOM OF CARD	SEND ROOM TEMP	BCCH
TRYPTASE		RED TOP	0.5 ML SERUM	COLLECT BETWEEN 15 MIN – 3 HRS OF SUSPECTED ANAPHYLACTIC EVENT CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCH
FOR OUTPATIENT TESTING, SEE BCCH MANUAL FOR ALLOWABLE SPECIALISTS OR PATHOLOGIST APPROVAL IS REQUIRED						

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
TUBERCULOSIS INTERFERON GAMMA RELEASE ASSAY HOSPITAL-BASED PROVIDERS FOR INPATIENTS, NEPHROLOGISTS AND SPECIALISTS (RESPIRATORY, TRANSPLANT AND INFECTIOUS DISEASE) ARE ABLE TO ORDER IF CRITERIA (TABLE 2) IS MET PUBLICALLY FUNDED TB IGRA ONLY AVAILABLE UPON MEDICAL APPROVAL FROM A LOCAL RESPIRATORY OR INFECTIOUS DISEASE SPECIALIST, OR THROUGH THE TB CLINIC PHYSICIAN AT BCCDC TB CONTROL (1-604-707-2692)	TB IGRA TB T-Spot QUANTIFERON TB	TB IGRA TUBES <ul style="list-style-type: none"> PURPLE GREEN YELLOW GREY 	1 ML WHOLE BLOOD PER TUBE	<u>COLLECTION ONLY AVAILABLE IN:</u> <ul style="list-style-type: none"> PRINCE GEORGE SMITHERS VANDERHOOF FORT ST JOHN TERRACE SUN-WED ONLY ***** FOLLOW TB IGRA COLLECTION INSTRUCTIONS INCUBATE TUBES FOR 16-24 HRS AT 37°C CENTRIFUGE AT 2000 RCF FOR 15 MINS PIPET ASEPCTICALLY INTO COLOR CODED ALIQUOT TUBES LABEL WITH "SEND URGENT TO ZEP" LABELS	SEND COOL	BCCDC ZEP LAB
TULAREMIA ANTIBODY	FRANCISELLA TULARENSIS SEROLOGY	SST (GOLD)	1 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC

NH LABORATORY SERVICES TEST DIRECTORY

U

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
URATE	URIC ACID UA	SST (GOLD)	0.5 ML SERUM	AVOID HEMOLYSIS (SST) CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	CHEM
	BODY FLUID	ORANGE TOP CONTAINER	0.5 ML FLUID			
	URINE URIC ACID	ORANGE TOP CONTAINER	1 ML RANDOM URINE			
	24 HR URINE	24 HR URINE CONTAINER NO PRESERVATIVE	ALL URINE COLLECTED IN A 24 HR PERIOD	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS MUST BE DEDICATED COLLECTION DO NOT REFRIGERATE ADJUST FINAL pH TO >8 WITH 1N NaOH RECORD VOLUME IN ORDER COMMENT ALIQUOT MIN 25 ML URINE SAMPLE FOR ANALYSIS		
UREA	BUN UREA NITROGEN	PST (LT GREEN) OR SST (GOLD)	0.5 ML PLASMA OR SERUM	AVOID HEMOLYSIS CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
	BODY FLUID	ORANGE TOP CONTAINER	1.0 ML BODY FLUID	CENTRIFUGE STORE AT 4°C		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
UREA ,URINE	URINE UREA CLEARANCE	24 HR URINE CONTAINER NO PRESERVATIVE	ALL URINE COLLECTED IN A 24 HR PERIOD	SEE 24 HR URINE COLLECTION INSTRUCTIONS RECORD PATIENT HEIGHT (CM) AND WEIGHT (KG) KEEP REFRIGERATED DURING COLLECTION RECORD VOLUME IN ORDER COMMENT ALQUOT SAMPLE FOR ANALYSIS	SEND COOL	CHEM
	URINE 24 HR UREA URINE 24 HR BUN	24 HR URINE CONTAINER NO PRESERVATIVE	ALL URINE COLLECTED IN A 24 HR PERIOD 25 ML ALIQUOT	SEE 24 HR URINE COLLECTION INSTRUCTIONS KEEP REFRIGERATED DURING COLLECTION RECORD VOLUME IN ORDER COMMENT		
	URINE UREA URINE BUN	ORANGE TOP CONTAINER	5 ML URINE	COLLECT RANDOM URINE CENTRIFUGE STORE AT 4°C		
URINALYSIS	ROUTINE URINALYSIS	ORANGE TOP CONTAINER	10 ML URINE < 10 MLS MAY NOT GIVE VALID RESULTS	COLLECT MIDSTREAM URINE, FIRST MORNING SAMPLE PREFERRED <u>STABILITY:</u> <ul style="list-style-type: none"> ROOM TEMP <2 HRS REFRIGERATED <8 HRS URINES <8 HRS >8 HRS POST COLLECTION WILL BE REJECTED ***** BRING TO ROOM TEMP PRIOR TO ANALYSIS MICROSCOPIC ANALYSIS WILL BE PERFORMED BASED ON LAB CRITERIA	SEND COOL	CHEM
	URINALYSIS AND MICROSCOPIC IF INDICATED					
	URINALYSIS AND CULTURE IF INDICATED					

NH LABORATORY SERVICES TEST DIRECTORY

URINE, 24 HR COLLECTION	SEE SPECIFIC TEST	24 HR COLLECTION CONTAINER	ALL URINE COLLECTED IN A 24 HR PERIOD	SEE 24 HR URINE COLLECTION INSTRUCTIONS	SEE SPECIFIC TEST	VARIOUS FACILITIES
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
URINE DRUG SCREEN	SEE DRUG SCREEN, URINE					
URINE EOSINOPHILS	SEE EOSINOPHILS, URINE					
URINE CITRATE OR CITIRC ACID	SEE CITRATE, 24HR URINE					
URINE CULTURE	SEE CULTURE, URINE					
URINE CYTOLOGY	SEE CYTOLOGY - URINE					
URINE HEMOSIDERIN	SEE HEMOSIDERIN, URINE					
URINE - MALIGNANT CELLS	SEE CYTOLOGY, URINE					
UROBILINOGEN	NO LONGER AVAILABLE					
UROPORPHYRIN SCREEN	SEE PORPHYRIN SCREEN- URINE					
UROPORPHYRIN SYNTHASE	NO LONGER AVAILABLE					
	SEE ERYTHROCYTE PROPHOBILINOGEN DEAMINASE					

NH LABORATORY SERVICES TEST DIRECTORY

V						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VALPROATE LEVEL	VALPROIC ACID DEPAKENE DEPAKOTE DIVALPROEX EPIVAL	RED TOP OR RST (ORANGE)	0.5 ML SERUM	DOSAGE SHOULD BE STABLE FOR 2 DAYS DRAW SAMPLE PRIOR TO NEXT DOSE OR 6 HOURS AFTER LAST DOSE CENTRIFUGE (ALiquOT IF RED TOP) STORE AT 4C	SEND COOL	CHEM
VANCOMYCIN LEVEL, RANDOM		RED TOP OR RST (ORANGE)	0.5 ML SERUM	NOTE DOSE DATE & TIME FOR ALL COLLECTIONS CENTRIFUGE (ALiquOT IF RED TOP) STORE AT 4°C FREEZE IF DELAYED	SEND COOL RST: STABLE 5 DAYS RED TOP: SEND COOL IF < 48 HRS IN TRANSIT SEND FROZEN IF >48 HRS IN TRANSIT	CHEM
VANCOMYCIN LEVEL TROUGH				TROUGH: COLLECT BEFORE TO THE 3 rd or 4 th DOSE DRAW UP TO 30 MINS PRIOR TO NEXT DOSE VANCO TROUGHS ARE OFTEN ORDERED WITHOUT A PEAK LEVEL		
VANCOMYCIN LEVEL PEAK				PEAK – ADULTS: DRAW 3 HOURS POST INFUSION PEAK – CHILDREN <16: DRAW 1 HR POST INFUSION (AS PER UHNBC PHARMACY)		




NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VARICELLA ZOSTER	CHICKEN POX	SST (GOLD)	0.5 ML SERUM	CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	BCCDC
	VZ ANTIBODY VZ SEROLOGY SHINGLES ANTIBODY	CSF TUBE	250 µL	STORE AT 4°C		
VARICELLA ZOSTER IMMUNE SERUM GLOBULIN BLOOD PRODUCT FOR TRANSFUSION	VZIG			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		
VASOACTIVE INTESTINAL PEPTIDE	VIP	7 ML EDTA (LAVENDER)	3 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING PATIENT MUST BE FASTING ≥ 8HRS CENTRIFUGE IMMEDIATELY AND ALIQUOT FREEZE	SEND FROZEN ON DRY ICE	MAYO CLINIC
VDRL	SEE SYPHILIS					
VENIPUNCTURE AND DISPATCH **LAB ORDER ONLY**	90000	NONE	NA	ONLY USED WHEN <u>SEND OUT TESTS</u> ARE ORDERED		
VENLAFAXIME	NORVENLAFLAXIME EFFEXOR	RED TOP NO SST/GEL	1 ML SERUM	PERFORMED BI-WEEKLY ON TUES COLLECT IMMEDIATELY PRIOR TO NEXT DOSE INCLUDE DATE & TIME OF LAST DOSE	SEND COOL	PROV TOX LAB
VENOUS BLOOD GASES	SEE BLOOD GAS , VENOUS					
VENOUS CORD BLOOD GASES	SEE BLOOD GAS , CORD VENOUS					



NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VEROTOXIN ASSAY (NAT)	SHIGATOXIN E.COLI 0157	ORANGE TOP CONTAINER	1 GRAM OR 1 ML	OBTAIN RANDOM STOOL SAMPLE STORE AT ROOM TEMP	SEND ROOM TEMP	BCCDC
VERY LONG CHAIN FATTY ACIDS	SEE FATTY ACIDS					
VERY LOW DENSITY LIPOPROTEIN (VLDL)	NO LONGER AVAILABLE					
VIRAL CULTURE	HERPES SIMPLEX VIRUS 1 & 2 VARICELLA ZOSTER	<u>VIRAL SWAB (UTM):</u> • WOUNDS • SKIN (RASHES/LESIONS) • GENITAL • THROAT		VIRAL SWAB AVAILABLE FROM LAB MUST SEND AND INDICATE SPECIFIC VIRUS ON BCCDC VIROLOGY REQUISITION. ***** STORE AT 4°C	SEND COOL	BCCDC
	<u>NPW FOR :</u> • RSV • INFLUENZA A • INFLUENZA B <u>URINE FOR:</u> • CMV <u>FECES FOR:</u> • ENTEROVIRUS • GI PANEL- ADENOVIRUS, NOROVIRUS, ROTAVIRUS	<u>ORANGE TOP CONTAINER:</u> • BODY FLUID • CSF • SPUTUM • URINE • FECES • NASOPHARYNGEAL WASHING (NPW) • AUTOPSY TISSUE (NO FORMALIN)				
	<u>CSF FOR:</u> • HERPES SIMPLEX VIRUS 1 & 2 • WEST NILE VIRUS • VARICELLA • ENTEROVIRUS	STERILE LUMBAR PUNCTURE TUBE				
VIRAL LOAD	SEE HIV VIRAL LOAD					
VIRAP	NO LONGER AVAILABLE SEE INDIVIDUAL TESTS: • INFLUENZA A & B • RSV • VIRAL STUDIES					


NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VISCOSITY	SERUM VISCOSITY	RED TOP	1ML SERUM	COLLECT BEFORE NOON MONDAY-THURSDAY INSTRUCTIONS: <ul style="list-style-type: none"> PATIENT MUST KEEP SAMPLE WARM @37°C BRING TO LAB IMMEDIATELY PLACE SAMPLE IN 37°C WATERBATH WAIT UNTIL CLOT RETRACTS WHEN FULLY CLOTTED, DRAW SERUM OFF CAREFULLY PIPET INTO ALIQUOT TUBE IF SAMPLE IS DELAYED (>72HRS) SEND FROZEN	SEND COOL	VGH
VITAMIN A LEVEL 	RETINOL LEVEL	RED TOP	1 ML SERUM	PATIENT MUST FAST FOR A MINIMUM OF 8 HOURS CENTRIFUGE AT 4°C AND ALIQUOT FREEZE	SEND FROZEN	BCCH
VITAMIN B1 LEVEL 	THIAMINE LEVEL	EDTA (LAVENDER)	2ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
VITAMIN B2 LEVEL 	RIBOFLAVIN LEVEL	SODIUM HEPARIN (DARK GREEN)	2 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING FASTING REQUIRED: <ul style="list-style-type: none"> CHILDREN & ADULTS: 10-12 HRS INFANTS: PRIOR TO NEXT FEEDING CENTRIFUGE AND ALIQUOT STABLE AT 4°C FOR 7 DAYS OTHERWISE FREEZE	SEND COOL	MAYO CLINIC

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VITAMIN B6 LEVEL 	PYRIDOXINE LEVEL PYRIDONYL PHOSPHATE	EDTA (LAVENDER)		SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING BRING TO LAB IMMEDIATELY AFTER COLLECTION CENTRIFUGE AND ALIQUOT WITHIN 1 HR OF COLLECTION FREEZE	SEND FROZEN	HIC
VITAMIN B12 LEVEL	COBALAMIN CYANOCOBALAMIN	SST (GOLD) OR RST (ORANGE)	0.5 ML SERUM	ROUTINE SCREENING/TESTING IN ASYMPTOMATIC PATIENTS IS NOT SUPPORTED BY EVIDENCE- SEE BCGuidelines.ca FOR MORE INFO FASTING NOT REQUIRED CENTRIFUGE STORE AT 4°C	SEND COOL	CHEM
VITAMIN C LEVEL 	ASCORBIC ACID	LI HEPARIN (DARK GREEN)	2 ML PLASMA	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING BRING TO LAB IMMEDIATELY CENTRIFUGE AND ALIQUOT FREEZE IMMEDIATELY THAWED SAMPLES WILL NOT BE TESTED	SEND FROZEN	HIC
VITAMIN D 1,25 LEVEL ***ORDER VIT D 25 IF VITAMIN D 1,25 NOT SPECIFIED***	DIHYDROXY 1,25 CALCITRIOL 1,25 DIHYDROXY CHOLECALCIFEROL	RED TOP	2 ML SERUM	VIT D 1, 25 DONE ONLY IF SPECIFIED AND IS CONSIDERED A 2ND ORDER TEST IN THE ASSESSMENT OF VIT D STATUS.	SEND COOL	ST PAULS
VITAMIN D 25 HYDROXY LEVEL	CALCIFEROL VITAMIN D3 VITAMIN D 25	SST (GOLD)	1 ML SERUM	VITAMIN D DEFICIENCY SCREENING ***** ONLY COVERED BY MSP IF ORDERED BY SPECIALIST OR PATIENT <19 YRS OF AGE	SEND FROZEN	ST PAULS
VITAMIN D 25 HYDROXY LEVEL PEDIATRIC	HYDROXY LEVEL	RED TOP	0.5 ML SERUM	COLLECT PAYMENT PRIOR TO COLLECTION OF TEST (FEE CODE 92460) VITAMIN D 25 DOES NOT NEED PROTECTION FROM LIGHT CENTRIFUGE AND ALIQUOT FREEZE		BCCH

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VITAMIN E LEVEL 	TOCOPHEROL LEVEL ALPHA TOCOPHEROL LEVEL	RED TOP	1 ML SERUM	CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	BCCH
VANILLYLMADELATE, 24 HR URINE	VMA VANILLYLMADELIC ACID	24HR URINE CONTAINER WITH 15 ML 6N HCL	50 ML	FOLLOW 24 HR URINE COLLECTION INSTRUCTIONS ***** ACIDIFY URINE TO PH 2-4 IN CHEMISTRY STORE AT 4°C	SEND ACIDIFIED ALIQUOT COOL	VGH
VANILLYLMADELATE, RANDOM URINE	VMA VANILLYLMADELIC ACID	ORANGE TOP CONTAINER	20 ML	RANDOM DONE ONLY FOR CHILDREN <12 YEARS OLD. COLLECT RANDOM SAMPLE ***** ACIDIFY URINE TO PH 2-4 STORE AT 4°C	SEND COOL	VGH
VOLTAGE GATED CALCIUM CHANNEL ANTIBODY SPECIFY TYPE N OR P/Q Ab	VGCC	SST (GOLD) OR RED TOP	0.5 ML	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	HIC
VOLTAGE GATED POTASSIUM CHANNEL ANTIBODY ORDER HOLD REF UNTIL BUILT IN CERNER NO LONGER MSP BILLABLE	VGKC SERUM	SST (GOLD) OR RED TOP	0.5 ML	MUST USE MITOGEN AUTOANTIBODY REQUISITION CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	MADL
	VGKC CSF	STERILE CSF CONTAINER		MUST USE MITOGEN AUTOANTIBODY REQUISITION FREEZE		
VON WILLEBRAND FACTOR BLOOD PRODUCT FOR TRANSFUSION	VWF			SAMPLE NOT REQUIRED REQUIRES TRANSFUSION SERVICE REQUISITION SEND REQUEST DIRECTLY TO TRANSFUSION MEDICINE DEPARTMENT		

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VON WILLEBRAND FACTOR ASSAY INCLUDES: <ul style="list-style-type: none"> • INR • PTT • vWF ACTIVITY (RISTOCETIN) 	vWF ACTIVITY vWF PANEL vWB	2 x Na CITRATE (LIGHT BLUE) COLLECT FULL TUBES AND MIX WELL	2 ML PLASMA 4.5 ML PLASMA PREFERRED	COLLECT INR & APTT ALSO ENTER COMMENT IF PATIENT ON ANTICOAGULANTS ***** DOUBLE SPIN WITHIN 2 HRS OF COLLECTION & ALIQUOT INTO 2 POLYPROPYLENE TUBES FREEZE	SEND FROZEN ON DRY ICE	ST PAULS
VON WILLEBRAND FACTOR ANTIGEN INCLUDES: <ul style="list-style-type: none"> • INR • PTT 	vWF ANTIGEN vWF Ag	2- SODIUM CITRATE (LIGHT BLUE) COLLECT FULL TUBES AND MIX WELL	2 ML MIN 4.5 ML PLASMA PREFERRED	COLLECT INR & APTT ALSO ENTER COMMENT IF PATIENT IS ON ANTICOAGULANTS TRANSPORT TO LAB AT ROOM TEMP WITHIN 30 MIN OF COLLECTION ***** DOUBLE SPIN WITHIN 2 HRS OF COLLECTION & ALIQUOT INTO 2 POLYPROPYLENE TUBES FREEZE	SEND FROZEN ON DRY ICE	BCCH
VON WILLEBRAND DISEASE INVESTIGATION INCLUDES: <ul style="list-style-type: none"> • CBC • INR • PTT • vWF Ag • vWF ACTIVITY • FACTOR VIII ACTIVITY ORDER TESTS INDIVIDUALLY UNTIL BUILT IN CERNER	VWD INVESTIGATION	3- SODIUM CITRATE (LIGHT BLUE) AND EDTA (LAVENDER) COLLECT FULL TUBES AND MIX WELL		ENTER COMMENT IF PATIENT IS ON ANTICOAGULANTS TRANSPORT TO LAB AT ROOM TEMP WITHIN 30 MIN OF COLLECTION ***** TEST INR, PTT AND CBC AS PER LAB PROCEDURES AND SEND RESULTS WITH THE REST OF THE SAMPLES TO SPH DOUBLE SPIN 2 CITRATE TUBES (FOR ANTIIGEN AND ACTIVITY TESTING) WITHIN 2 HRS OF COLLECTION & ALIQUOT INTO 2 POLYPROPYLENE TUBES FREEZE	SEND FROZEN ON DRY ICE	ST PAULS

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
VORICONAZOLE	VFEND	LAVENDER (EDTA)	1 ML	LAST DOSE DATE/TIME REQUIRED COLLECT IMMEDIATELY PRIOR TO NEXT DOSE CENTRIFUGE AND ALIQUOT FREEZE	SEND FROZEN	ST PAULS
VRE SCREEN	VRE CULTURE	STARSWAB II	N/A	INSERT TIP OF SWAB INTO RECTUM OR INTO A STOOL SAMPLE SWAB MUST HAVE VISIBLE STOOL SEE COLLECTION INSTRUCTIONS	STORE AT ROOM TEMP	MICRO

NH LABORATORY SERVICES TEST DIRECTORY

W						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
WARFARIN	COUMADIN	RED TOP	1-2 ML SERUM	COLLECTED FOR TOXICITY LEVELS ONLY DONE ONLY IF INR >6 CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB
WATER DEPRIVATION TEST		<u>E6</u> SST (YELLOW)	0.5 ML SERUM	<u>INSTRUCTIONS:</u> <ul style="list-style-type: none"> PATIENT TO BE BOOKED INTO AMBC PATIENT NPO FOR FLUID & FRUIT PRIOR TO PROCEDURE NO FLUIDS DURING PROCEDURE COLLECT BASELINE E6 & OSMOLALITY WARD TO SEND BASELINE URINE ALIQUOT FOR URINE OSMOLALITY REPEAT URINE OSMOLALITY EVERY HR REPEAT E6 & SERUM OSMOLALITY EVERY 2 HRS MAXIMUM TEST TIME 6 HRS SEE INSTRUCTIONS FOR HANDLING OF INDIVIDUAL TESTS	SEE SHIPPING FOR EACH INDIVIDUAL TEST	CHEM
		<u>OSMO:</u> SST (YELLOW)				
		<u>URINE OSMO:</u> ORANGE TOP CONTAINER	0.5 ML URINE			
		<u>ADH:</u> NO LONGER AVAILABLE				
WHITE BLOOD CELL COUNT (WBC) &/OR DIFFERENTIAL	SEE COMPLETE BLOOD COUNT (CBC)					
WBC CYSTINE LEVEL	SEE CYSTINE, WHITE BLOOD CELL (FOR PATIENTS NOT YET DIAGNOSED)					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
WBC TO ACID MALTASE	SEE ALPHA GLUCOSIDASE					
WBC - STOOL	SEE STOOL LEUKOCYTE					
WEST NILE VIRUS	WNV WNV ANTIBODY	SST (GOLD) AND EDTA (LAVENDER)	2 ML SERUM AND 1 ML WHOLE BLOOD	SEE BCCDC ZOONOTICS REQUISITION ***** CENTRIFUGE STORE AT 4°C	SEND COOL	BCCDC
WOUND CULTURE	SEE CULTURE, WOUND					

NH LABORATORY SERVICES TEST DIRECTORY

X						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
XANAX LEVEL	SEE ALPRAZOLAM LEVEL					
XANTHOCHROMIA CSF (CANNOT BE ORDERED IN CERNER)	PART OF CSF ANALYSIS- THIS IS A VISUAL TEST AND WILL ONLY BE REPORTED IF PRESENT					
XYLOSE TOLERANCE TEST 1 HR OR 2 HR ORDER 2 HR AS HOLD REF UNTIL BUILT IN CERNER	XTT XYLOSE ABSORPTION TEST (1 HR)	SODIUM FLUORIDE (GREY TOP)	0.5 MLS PER TUBE • BASELINE • 1 HR MUST CLEARLY LABEL TUBES AS BASELINE AND 1 HR	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING PATIENT MUST BE FASTING OVERNIGHT AND DURING THE TEST PERIOD - WATER IS OK CHILDREN UNDER 2 YEARS OF AGE MUST FAST A MINIMUM OF 4 HRS - WATER IS OK D-XYLOSE IS AVAILABLE AS ' XYLO-PFAN ' FROM ADRIA LABORATORIES D-XYLOSE DOSAGE: • <u>ADULTS:</u> DISSOLVE 5g D-XYLOSE IN 250 MLS H ₂ O • <u>CHILDREN:</u> 0.5g/kg BODY WEIGHT UP TO A MAX OF 5g PROCESS: • COLLECT FASTING BASELINE SAMPLE • GIVE PATIENT D-XYLOSE DRINK- DRINK QUICKLY • GIVE ANOTHER 250 ML H ₂ O • COLLECT NEXT SAMPLE 1 HR OR 2 HR POST XYLOSE INGESTION RECORD XYLOSE DOSAGE AND PATIENT HEIGHT AND WEIGHT (REQUIRED FOR XTT CALCULATION) ***** CENTRIFUGE AND ALIQUOT FREEZE IMMEDIATELY	SEND FROZEN	HIC
	XTT XYLOSE ABSORPTION TEST (2 HR)		0.5 MLS PER TUBE • BASELINE • 1 HR MUST CLEARLY LABEL TUBES AS BASELINE AND 2 HR			

NH LABORATORY SERVICES TEST DIRECTORY

Y						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
Y MICRODELETION	SEE CYTOGENETICS					

NH LABORATORY SERVICES TEST DIRECTORY

Z						
TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ZARONTIN	SEE ETHOSUXIMIDE					
ZIKA VIRUS		7 ML EDTA (LAVENDER) AND 5 ML SST (GOLD)		MUST USE PHSA ZOO NOTIC DISEASE REQUISITION TO INCLUDE DETAILED TRAVEL HISTORY AND DATE OF SYMPTOM ONSET REQUIRED: <ul style="list-style-type: none"> • PRENATAL STATUS • COUNTRIES OF TRAVEL • DATES OF TRAVEL • DATES OF SYMPTOM ONSET • DESCRIPTION OF SYMPTOMS 	SEND COOL	BCCDC
ZINC LEVEL		NAVY TOP (CLOT * NO ADDITIVE) OR NAVY BLUE (K2 EDTA)	2 ML SERUM	AVOID HEMOLYSIS MAINTAIN TUBE IN AN UPRIGHT POSITION TO AVOID CONTAMINATION OF THE BLOOD WITH THE STOPPER TRANSPORT TO LAB WITHIN 1 HR OF COLLECTION ***** CENTRIFUGE AND ALIQUOT WITH A STERILE PIPETTE TRANSFER INTO A FALCON ROUND-BOTTOM POLYPROPYLENE TUBE DO NOT TRANSFER INTO ANOTHER BLUE TOP TUBE	SEND COOL	VGH
ZINC LEVEL, PEDIATRIC	SEE ZINC LEVEL					

NH LABORATORY SERVICES TEST DIRECTORY

TEST	SYNONYM	CONTAINER TYPE	MIN VOL	SPECIMEN COLLECTION AND HANDLING	SHIPPING	TEST LAB
ZINC PROTOPORPHYRIN	ZPP PROTOPORPHYRIN	NAVY BLUE (K2 EDTA)	6 ML WHOLE BLOOD	SEE OUT OF COUNTRY/OUT OF PROVINCE TESTING MUST BE ANALYZED WITHIN 5 DAYS OF COLLECTION RECOMMENDED TO ORDER/TEST LEAD SIMULTANEOUSLY	SEND COOL	HIC
ZINC, URINE		24 HR URINE CONTAINER	25 ML URINE ALIQUOT TO STERILE ORANGE TOP	24 HR URINE COLLECTION ONLY - NO RANDOM SAMPLES SEE 24 HR URINE COLLECTION INSTRUCTIONS STORE AT 4°C	SEND COOL	BCCH
ZYLOCAINE	XYLOCAINE LIDOCAINE	RED TOP NO SST	1 ML SERUM	DRAW JUST PRIOR TO NEXT DOSE INDICATE LAST DOSE & TIME CENTRIFUGE AND ALIQUOT STORE AT 4°C	SEND COOL	PROV TOX LAB

NH LABORATORY SERVICES TEST DIRECTORY

NH Lab Services – Chemistry Reference Intervals

(* Reference Intervals for Adults only unless otherwise stated. Adult = 19 & over)

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Acetaminophen		1 - 200	umol/L	8.4%
Albumin		35 - 52	g/L	4%
Albumin/ Creatinine Ratio	see Urine			
Alk Phos	M > 19yr	40 - 129	U/L	5.2%
	F > 19yr	35 - 104		
ALT	M	< 41	IU/L	5.6%
	F	< 33		
Ammonia	M	16 - 60	umol/L	10.6%
	F	11 - 51		
Amylase		28 - 100	U/L	2%
Anion Gap		10 - 20	na	not defined
AST	M	< 51	IU/L	4.6%
	F	< 36		
BhCG	non-pregnant	< 5	IU/L	11.4%
	gest. age: 0 - 1 wk	0 - 50		
	gest. age: 1 – 2 wk	40 - 300		
	gest. age: 2 - 3 wk	100 - 1000		
	gest. age: 3 - 4 wk	500 - 6000		
	gest. age: 1 – 2 mo	5000 - 20000		
	gest. age: 2 – 3 mo	10,000 - 100,000		
	gest. age: 2 nd trimester	3000 - 50,000		
	gest. age: 3 rd trimester	1000 - 50,000		
Bilirubin Direct		<6	umol/L	6.2%
Bilirubin Total	0 – 24 hrs:	< 138	umol/L	5.8%
	24 – 48 hrs:	< 223		
	48 – 84 hrs:	< 291		
	84 hrs – 5 days:	< 206		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age* / Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Blood Gas, Arterial				
pH, Arterial	0 - 6 days	7.30 - 7.49	na	0.22%
	7 days - 18 yr	7.35 - 7.45		
	Adult	7.35 - 7.45		
pCO2 Art		35 - 45	mmHg	3.6%
pO2 Art		80 – 100	mmHg	7.4%
O2 Sat Art		95 - 100	%	not defined
Blood Gas, Venous				
pH, Venous	0 - 6 days	7.30 - 7.49	na	0.22%
	6 days - 18 yrs	7.35 - 7.45		
	Adult	7.35 - 7.45		
pCO2, Venous		38 - 50	mmHg	3.6%
pO2, Venous		not reported		
O2 Sat Ven		60 - 65	%	not defined
Blood Gas, Arterial Cord				
pH Arterial Cord		7.23 - 7.33	na	0.22%
pCO2 Art Cord		32.4 – 66.0	mmHg	3.6%
HCO3 Art Cord		21 - 28	mmol/L	7.4%
pO2 Art Cord		not reported		
Blood Gas, Venous Cord				
pH Ven Cord		7.3 - 7.4	na	0.22%
pCO2 Ven Cord		27.0 - 49.4	mmHg	3.6%
HCO3 Ven Cord		22 - 29	mmol/L	7.4%
pO2 Ven Cord		not reported		
Body Fluid				
Amylase, BF		not defined	U/L	2%
Albumin, BF		not defined	g/L	4%
Bilirubin, BF		not defined	umol/L	5.8%
Cholesterol, BF		not defined	mmol/L	2.8%
Creatinine, BF		not defined	mmol/L	4.0%

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Glucose, BF		not defined	mmol/L	2.4%
Lactate, BF		not defined	mmol/L	3.0%
LDH, BF		not defined	IU/L	3.8%
Lipase , BF		not defined	IU/L	5.6%
pH, BF		not defined	na	not defined
Protein, BF		not defined	g/L	3.0%
Triglyceride, BF		not defined	mmol/L	5.6%
Specific Gravity , BF		1.00 - 1.03	na	na
Urate, BF		not defined	umol/L	3.2%
BNP (NT- pro BNP)	0 - 75 yrs	< 126	pg/mL	7.2%
	> 75 yrs	< 451		
C3 Complement	0 – 2 mo	0.70 – 1.96	g/L	4.2%
	2 mo – 1 yr	0.69 - 2.01		
	1 – 18 yrs	0.70 – 2.06		
	Adult	0.90 – 1.80		
C4 Complement	0 – 3 mo	0.13 -0.38	g/L	4.0%
	3 mo – 18 yrs	0.11 – 0.51		
	Adult	0.10 - 0.40		
Calcium	0 – 1 month	not defined	mmol/L	2.8%
	2 – 12 mo	2.10 – 2.70		
	1 - 4 yrs	2.10 - 2.60		
	5 - 19 yrs	2.30 – 2.75		
	> 20 yrs	2.15 – 2.55		
Calcium , Ionized		1.15 – 1.35	mmol/L	3.0%
Carbamazepine	therapeutic level	17 – 51	umol/L	5.4%
Carboxyhemoglobin		<4	%	7.4%
Chloride		98 – 107	mmol/L	4.2%
Cholesterol				
Cholesterol, Fasting	0 – 18 yrs	3.2 – 4.4	mmol/L	2.8%
	Adult	desirable: < 5.2		
		borderline high: 5.2 - 6.2		
		high: > 6.2		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Cholesterol, Non Fasting		not defined		
HDL, Fasting	Favourable	> 1.55	mmol/L	4.8%
	Risk Factor	< 0.9		
Non HDL / Non HDL-C	Total Cholesterol minus HDL	not defined	mmol/L	not defined
HDL, Non Fasting		not defined	mmol/L	4.8%
LDL, Fasting	0 -17 yrs	not defined	mmol/L	not defined
	18 - 29 yrs	< 3.1		
	> 29 yrs	< 3.5		
LDL, Non Fasting		not defined	mmol/L	not defined
CO2		22 – 29	mmol/L	9.4%
Cortisol Dexamethasone Suppression		<139	nmol/L	8.6%
Cortisol AM	> 21 yrs	133 - 537	nmol/L	8.6%
Cortisol PM	> 21 yrs	68 - 327		
Creatinine	M	59 - 104	umol/L	4.0%
	F	45 – 84		
Creatinine GFR	see BC Guidelines for CKD monitoring	>= 60	ml/min/1.7 3m ²	not defined
Creatinine Kinase, CK Total	M	< 191	IU/L	3.2%
	F	< 171		
C Reactive Protein High Sensitivity (CRP hs)	0 – 1 mo	0.1 – 4.1	mg/L	11.2%
	2 mo – 15 yrs	0.1 – 2.8		
	> 15 yrs	< 5.1		
Cerebrospinal Fluid				
Glucose, CSF	0 – 16 yrs	3.3 - 4.4	mmol/L	3.6%
	> 16 yrs	2.2 - 3.9		
Lactate, CSF		1.1 – 2.4	mmol/L	3.0%
Protein, CSF		0.15 - 0.45	g/L	5.2%
Digoxin	heart failure	0.6 - 1.2	nmol/L	20%
	atrial fibrillation	not defined		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Electrophoresis				
Albumin		55.8 - 66.1	%	not defined
Alpha 1		2.9 – 4.9	%	not defined
Alpha 2		7.1 – 11.8	%	not defined
Beta 1		5.3 – 8.7	%	not defined
Beta 2		3.2 – 6.5	%	not defined
Gamma		8.6 – 14.4	%	not defined
Estradiol	Follicular	45 - 854	pmol/L	13.4%
	Mid-cycle	151 - 1461		
	Luteal	82 - 1251		
	Post Menopausal	18 - 505		
	Male	19 – 258		
Ethanol		0	mmol/L	5.6%
Ferritin	M	30 – 400	ug/L	6.6%
	F	13 – 150		
FSH	Follicular	4 - 13	IU/L	5.2%
	Mid-cycle	5 - 22		
	Luteal	2 - 8		
	Post Menopausal	26 - 135		
	Male	2 - 12		
Gentamicin	Random	< = 2	mg/L	13.0%
	Peak	5 - 10		
	Trough	< = 2		
GGT	M	<61	IU/L	5.4%
	F	<41		
Glucose Fasting	0 - 1 yr	3.3 - 5.6	mmol/L	2.4%
	2 - 6 yrs	4.1 - 7.0		
	7 - 18 yrs	3.6 - 6.1		
	Adult	3.6 - 6.1		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Glucose, Gestational Screen		< 7.8	mmol/L	2.4%
Glucose, Random	0 – 24 mo	3.3 – 5.6	mmol/L	2.4%
	2 - 6 yrs	4.1 - 7.0		
	7 - 16 yrs	3.6 - 6.1		
	> 16 yrs	4.0 - 11.0		
Glucose, 2 hr Tolerance 5 hr Tolerance	pathologist interpretation see also Diabetes Canada - Clinical Practice Guidelines			
Haptoglobin	0 - 1 mo	0.06 - 1.96	g/L	2.8%
	2 mo - 18 yrs	0.22 - 1.64		
	Adult	0.30 - 2.00		
Hepatitis				
Hep B Core Ab Total		non reactive		
Hep Bs Ab		<10	mIU/mL	
Hep Bs Ag		non reactive		
HepBsAg Conf		confirmed		
HDL / Non - HDL	see Cholesterol			
Hgb A1c		< 6.1	%	6%
IgA	0 - 30 days	0.07 - 0.94	g/L	5%
	1 – 3 mo	0.07 - 1.31		
	4 – 12 mo	0.10 - 1.29		
	13 – 24 mo	0.19 - 1.75		
	25 – 36 mo	0.22 - 2.20		
	37 – 48 mo	0.48 - 3.45		
	49 – 60 mo	0.61 - 3.45		
	61 – 72 mo	0.43 - 2.53		
	72 – 84 mo	0.41 - 2.97		
	7 - 10 yrs	0.51 - 2.97		
	10 - 12 yrs	0.44 - 3.95		
	13 - 18 yrs	0.44 - 4.41		
	Adult	0.70 - 4.00		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
IgG	0 – 90 days	2.5 - 12.0	g/L	4.6%
	3 – 24 mo	2.85 - 16.8		
	25 mo - 3yrs	3.41 - 19.5		
	4 - 18 yrs	5.28 - 21.9		
	Adult	7.0 - 16.0		
IgM	0 - 89 days	0.19 - 1.93	g/L	5.4%
	3 - 12 mo	0.21 - 1.92		
	1 – 3 yr	0.43 - 1.63		
	4 - 18 yr	0.48 - 2.26		
	Adult	0.40 - 2.30		
Iron Level		6 - 35	umol/L	7.2%
Iron Saturation		20 - 50	%	not defined
Iron Binding Capacity, Total (TIBC)		20 - 62	umol/L	not defined
Iron Binding Capacity, Unbound (UIBC)	M	22 - 62	umol/L	9.2%
	F	24 - 70		
Lactate		0.5 -2.2	mmol/L	3.0%
Lactose Tolerance	pathologist interpretation			
LDH (Lactate Dehydrogenase)	M	135 - 225	IU/L	3.8%
	F	135 - 214		
LDL, Fasting/ Non Fasting	see Cholesterol			
LH	Follicular	2 – 13	IU/L	3.8%
	Mid-cycle	14– 96		
	Luteal	1.0 -11		
	Post-Menopausal	8 – 59		
	Male	2 - 10		
	Female, unspecified phase	2 - 60		
Lipase		13 - 60	IU/L	5.6%
Lithium	0 - 65 yr	0.5 - 1.2	mmol/L	5.8%
	> 65 yr	0.5 – 1.0		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Magnesium		0.65 - 1.05	mmol/L	5.0%
Methemoglobin		0 - 1.5	%	10.2%
Microalbumin	see Urine			
Osmolality				
Osmolality, Plasma/ Serum		275 - 300	mmol/kg	1.8%
Osmolality, Stool		not defined	mmol/kg	1.8%
Osmolality, Urine		50 - 1400	mmol/kg	1.8%
Osmolality, 24 Urine		300 - 900	mmol/kg	1.8%
Osmolar Gap, Plasma/ Serum		<= 10	mOsm/kg	not defined
Osmotic Gap, Fecal	Secretory Diarrhea	< 50	mOsm/kg	not defined
	Mixed Secretory and Osmotic Diarrhea	50 - 12		
	Osmotic Diarrhea	> 125		
Oxyhemoglobin		95 - 100	%	0.2%
Parathyroid Hormone, PTH		1.69 - 6.90	pmol/L	11.4%
Phenobarbital	Therapeutic level	52 - 170	umol/L	4.2%
Phenytoin Total	Therapeutic level	40 - 80	umol/L	7.4%
Phosphorus (PO4)	0 – 60 days	1.6 - 3.1	mmol/L	4.6%
	2 – 12 mo	1.6 -3.5		
	1 - 16 yrs	1.1 - 2.0		
	> 16 yrs	0.8 - 1.45		
Potassium		3.5 - 5.1	mmol/L	5.6%
Progesterone	Follicular	< 3.0	nmol/L	10.6%
	Mid-cycle	< 38.1		
	Adequate Ovulation Range	> 10.0		
	Luteal	< 76.0		
	Adequate Luteal Range	> 20.0		
	Post Menopausal	< 1.0		
	Male	< 1.0		

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Prolactin	M	4 - 18	ng/mL	4.4%
	F	3 - 24		
Prostate Specific Antigen, PSA	0 - 49 yrs	<2.6	ug/L	6.8%
	50 – 59 yrs	<3.6		
	60 – 69 yrs	<4.6		
	≥ 70 yrs	<6.6		
Protein, Total		60 - 83	g/L	3.0%
Rheumatoid Factor, RF Quant		< 15	IU/mL	6.4%
Salicylate		0.5 - 1.8	mmol/L	6.6%
Sodium		136 - 145	mmol/L	2.8%
Sweat Chloride		0 - 45	mmol/L	4.2%
T3, Free		3 - 7	pmol/L	5.8%
T3, Total		1.2 - 3.1	nmol/L	5.8%
T4, Free	M: 0 - 3 days	15 – 38	pmol/L pmol/L	9.6%
	M: 3 - 30 days	10 - 29		
	M: 1 - 12 mo	13 - 28		
	M: 1 - 5 yr	15 - 22		
	M: 5 - 10 yr	14 - 24		
	M: 10 - 17 yr	15 - 22		
	Male > 17 yrs	9 - 22		
	F: 0 - 3 days	14 - 27		
	F: 3 - 30 days	11 - 27		
	F: 1 - 12 mo	14 - 26		
	F: 1 - 5 yr	16 - 24		
	F: 5 - 10 yr	14 - 22		
	F: 10 - 15 yr	13- 21		
	F: 15 - 17 yr	14 - 21		
	Female > 17 yrs	9 - 22		
Testosterone	M: 20 - 50 yrs	8.64 - 29.0	nmol/L	9.2%
	M: > 50 yrs			
	F: 20 - 50 yrs			
	F: > 50 yr			

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Theophylline	Therapeutic Level	55 - 110	umol/L	4.0%
Tobramycin	Random	< = 2.0	mg/L	11.0%
	Peak	3 - 10		
	Trough	< = 2.0		
Triglyceride		< 1.9	mmol/L	2.%
Troponin-T		< 0.05	ng/mL	not defined
Troponin-T High Sensitivity		< =14	ng/L	10.4%
TSH	Male/ Non Pregnant Female	0.4 - 5.5	mIU/L	7.0%
	Pregnant Female	0.1 – 3.5		
	1 st trimester			
	2 nd trimester	0.3 – 3.5		
	3 rd trimester	0.5 – 3.5		
Urate	M	< 417	umol/L	3.2%
	F	< 341		
Urea		3.0 - 8.0	mmol/L	5.6%
Urine				
Calcium, Urine		not defined	mmol/L	4.2%
Chloride, Urine		not defined	mmol/L	4.0%
Creatinine, Urine		not defined	mmol/L	4.0%
Creatinine, 24 hr Urine		8.8 – 17.6	mmol/24 hr	4.0%
Creatinine Clearance, 24 hr Urine		1.33 – 1.83	ml/sec	4.0%
Glucose, Urine		not defined	mmol/L	3.8%
Magnesium, Urine		not defined	mmol/L	12.2%
Magnesium, 24 hr Urine		3 - 5	mmol/ 24 hr	12.2%
Microalbumin, Urine		<=2.0	mg/mmol	not defined
Microalbumin Excretion, 24 hr Urine		< = 31	mg/ 24hr	not defined
Phosphorus, Urine		not defined	mmol/L	3.8%
Phosphorus, 24 hr Urine		12.9 – 42.0	mmol/ 24 hr	3.8%

NH LABORATORY SERVICES TEST DIRECTORY

CHEMISTRY TEST	Age*/ Sex/ Condition (as applicable)	Reference Interval	UNITS	Measurement Uncertainty (MU) (high precision analyzer only)
Potassium, Urine		not defined	mmol/L	3.8%
Protein, Urine		not defined	g/L	8.0%
Protein, 24 hr Urine		0.05 – 0.08	g/ 24 hr	8.0%
Protein/ Creatinine Ratio, Urine	0 - 6 mo	not defined	g/mol	not defined
	6 mo - 2 yrs	0 - 56		
	2 - 18 yrs	0 - 22		
	Male > 18 yrs	0 - 22		
	Female > 18 yrs	0 - 30		
Sodium, Urine		not defined	mmol/L	3.8%
Sodium, 24 hr Urine		40 – 220	mmol/ 24 hr	3.8%
Urate, Urine		not defined	umol/L	3.2%
Urea, Urine		not defined	mmol/L	5.6%
Urine Drug Screen				
Amphetamine	not for legal purposes	not detected		14.4%
Barbiturates		not detected		11.6%
Benzodiazepine		not detected		13.2%
Cocaine		not detected		7.8%
Fentanyl		not detected		20.0%
Methadone Metabolites (EDDP)		not detected		8.6%
Opiates		not detected		14.2%
Oxycodone		not detected		5.4%
PCP		not detected		17.8%
THC		not detected		27.8%
Valproate		350-700	umol/L	3.6%
Vancomycin	Random	10 - 20	ug/mL	13.6%
	Peak	25 - 40		
	Trough	10 - 20		
Vitamin B12		156 - 698	pmol/L	21.8%

Measurement Uncertainty (MU)

Every laboratory value is an estimate of the true concentration of the substance. MU is the 95% confidence interval around that estimate. 95% of the time, the true concentration will be within the range of the reported value \pm MU. This value is based on analytical variability (precision) and does not reflect other factors such as sample collection and handling which may also affect the result.

➤ **Example**

Reported sodium = 140 mmol/L

Sodium MU = 2.8%

Expanded uncertainty = 140 mmol/L \pm 2.8% or 140mmol/L \pm 3.9 mmol/L

Interpretation - the true value of sodium in the sample is in the range 136.1-143.9 mmol/L, with 95% confidence.

NH LABORATORY SERVICES TEST DIRECTORY

NH Lab Services - Hematology Reference Intervals

(* Reference Intervals for Adults only unless otherwise stated. Adult = 19 & over)

Automated Complete Blood Count (CBC)										
AGE	White Blood Cell (X10 ⁹ /L)	Red Blood Cell (X10 ¹² /L)	Hemoglobin (g/L)	Hematocrit (L/L)	MCV (fl)	MCH (pg)	MCHC* (g/L)	RDW %	Platelets (X10 ⁹ /L)	Reticulocyte (X10 ⁹ /L)
0 – 24 hrs	9.0 - 30.0	3.9 - 5.5	135 - 195	0.42 - 0.60	98 - 118	26 - 35	330 - 360		150 - 450	100 - 300
1 – 6 days	9.4 - 34.0	4.0 - 6.6	145 - 225	0.45 - 0.67	95 - 121	26 - 35	290 - 360		160 - 380	100 - 300
7 – 13 days	5.0 - 21.0	3.9 - 6.3	135 - 215	0.42 - 0.66	88 - 126	26 - 35	280 - 360		160 - 380	100 - 300
14 - 30 days	5.0 - 20.0	3.6 - 6.2	125 - 205	0.39 - 0.63	86 - 124	26 - 35	280 - 360		160 - 380	100 - 300
31 – 59 days	5.0 - 19.5	3.6 - 6.2	100 - 180	0.31 - 0.55	85 - 123	26 - 35	290 - 360		160 - 380	100 - 300
2 - 3 mo	5.0 - 19.5	2.7 - 4.9	90 - 140	0.28 - 0.42	77 - 115	26 - 35	290 - 360		210 - 650	100 - 300
3 – 5 mo	5.0 - 17.5	3.1 - 4.5	95 - 135	0.29 - 0.41	74 - 108	26 - 35	300 - 360		210 - 650	100 - 300
6 – 24 mo	5.3 - 16.0	3.7 - 5.3	105 - 135	0.31 - 0.39	70 - 86	26 - 35	300 - 360	11.7 – 15.7	200 - 550	40 - 120
2 – 4 yrs	5.3 - 16.0	3.9 - 5.3	105 - 135	0.34 - 0.40	75 - 87	26 - 35	310 - 360	11.7 – 15.7	200 - 490	40 - 120
5 - 6 yrs	5.0 - 15.0	3.9 - 5.3	105 - 147	0.35 - 0.43	77 - 95	26 - 35	310 - 360	11.7 – 15.7	180 - 440	40 - 120
7 – 11 yrs	3.9 - 10.2	4.0 - 5.2	118 - 146	0.37 - 0.47	77 - 95	26 - 35	310 - 360	11.6 – 14.8	180 - 440	30 - 180
12 - 15 yrs	3.9 - 10.2	4.4 - 5.5	F 117 - 149 M 125 - 165	F 0.37 - 0.47 M 0.37 - 0.49	F 78 - 100 M 78 - 98	26 - 35	310 - 360	11.6 – 14.8	180 - 440	30 - 180
16 - 18 yrs	3.9 - 10.2	F 4.4 - 5.7 M 4.1 - 5.0	F 117 - 149 M 131 - 169	F 0.36 - 0.46 M 0.37 - 0.49	F 78 - 100 M 78 - 98	26 - 35	310 - 360	11.2 – 14.8	165 - 397	30 - 180
ADULT	4.0 - 11.0	F 4.3 - 5.5 M 4.0 - 4.9	F 115 - 150 M 135 - 170	F 0.36 - 0.46 M 0.41 - 0.52	80 - 100	26 - 35	320 - 360	11.6 – 15.0	160 - 380	45 - 105
Measurement Uncertainty (MU) (high precision analyzer only)	7.5%	3%	3.5%	3%	2.5%	2.5%	2.5%	2.3%	12.5%	15%

NH LABORATORY SERVICES TEST DIRECTORY

Automated Differential (5-part or 6-part differential analyzer)**						
AGE	Neutrophils x 10⁹ / L	Lymphocyte x 10⁹ / L	Monocyte x 10⁹ / L	Eosinophil x 10⁹ / L	Basophil x 10⁹ / L	Immature Granulocytes x 10⁹ / L
0 – 5 mo						
6 mo – 5 yrs	1.0 – 6.5	1.5 – 7.0	0.2 – 1.9	0.0 – 0.06	0.0 – 0.1	
6 – 8 yrs	1.8 – 5.4	1.8 – 4.2	0.2 – 1.9	0.0 – 0.08	0.0 – 0.2	
9 – 11 yrs	1.5 – 5.6	1.4 – 4.1	0.0 – 0.5	0.0 – 0.08	0.0 – 0.2	
12 – 15 yrs	1.6 – 7.9	0.9 – 3.5	0.0 – 0.5	0.0 – 0.08	0.0 – 0.2	
16 – 18 yrs	1.9 – 7.3	0.9 – 3.5	0.0 – 0.5	0.0 – 0.06	0.0 – 0.2	
ADULT	1.9 – 7.4	1.0 – 3.3	0.0 – 0.8	0.0 – 0.05	0.0 – 0.1	0.0 – 0.55

Automated Differential (3-part differential analyzer)**			
AGE	Granulocytes x 10⁹ / L	Lymphocyte x 10⁹ / L	Mixed (Monocyte/Eosinophil/ Basophil) x 10⁹ / L
0 – 5 mo			
6 mo – 5 yrs	1.0 – 6.5	1.5 – 7.0	0.2 – 2.6
6 – 8 yrs	1.8 – 5.4	1.8 – 4.2	0.0 – 1.3
9 – 11 yrs	1.5 – 5.6	1.4 – 4.1	0.0 – 1.3
12 – 15 yrs	1.6 – 7.9	0.9 – 3.5	0.0 – 1.3
16 – 18 yrs	1.9 – 7.3	0.9 – 3.5	0.0 – 1.3
ADULT	1.9 – 7.4	1.0 – 3.3	0.0 – 1.4

NH LABORATORY SERVICES TEST DIRECTORY

Coagulation		
Test	Reference Interval	Measurement Uncertainty (MU) <small>(high precision analyzer only)</small>
INR	0.9 – 1.2	7.5%
APTT (secs)	25 - 38	7.5%
Fibrinogen (g/L)	2.0 – 5.0	10%
Thrombin Time (secs)	15 – 22	5%
D-Dimer (quantitative) ug/mL FEU	< 0.50	15%
D-Dimer Whole Blood (semi-quantitative) ug/mL FEU	< 0.30	n/a

Other		
Test	Age	Reference Interval
Erythrocyte Sedimentation Rate (mm/hr)	> 15 yrs	< 20
Mononucleosis		Negative
Cerebrospinal Fluid - RBC (x 10 ⁶ / L)	all ages	0 - 10
Cerebrospinal Fluid - WBC (x 10 ⁶ / L)	0 – 12 mo	0 – 30
	1 – 3 yr	0 - 20
	4 – 11 yr	0 - 10
	12 yr – Adult	0 - 5
Antinuclear Antibody (ANA)		< 1.0
Anti-dsDNA		Negative

TEST DIRECTORY REVISION LOG

Version Number	Description of Change	Date of Revision	Reviewed By
6.13	Theophylline Level – RST added to container type	2019-01-11	Caroline Perrin
6.14	PNEUMOCYSTIS CARINII PNEUMONIA added as a synonym for PNEUMOCYSTIS JIROVECI PNEUMONIA	2019-01-15	Caroline Perrin
6.15	24 Hour Urine Coper no longer requires acid-washing of collection containers.	2019-01-18	Caroline Perrin
6.16	HLA AB INVESTIGATION can only be collected Sun to noon on Thursday.	2019-01-25	Caroline Perrin
6.17	24 Hour urine Lead and Zinc collections no longer need acid added to container or acid washed container.	2019-01-30	Caroline Perrin
6.18	Semen Analysis, Post Vasectomy Monday-Friday prior to noon is now Monday-Friday prior to 2:00pm	2019-02-12	Caroline Perrin
6.19	Ova & Parasite and Pinworm now sent to BCCDC from UHNBC.	2019-02-26	Caroline Perrin
6.20	EDTA specimen type added to mononucleosis screen.	2019-07-09	Caroline Perrin
6.21	Added 16years or age or less to Specimen Collection and Handling for Tetanus Antibody	2019-07-09	Caroline Perrin
6.22	Added other TB IGRA HUB sites, and TB Tube Colours	2019-08-09	Caroline Perrin
6.23	Remove CMV Culture Testing no longer tested by BCCDC.	2019-08-09	Caroline Perrin
6.24	Updated sputum collection frequency for Mycobacteria culture.	2019-08-09	Caroline Perrin
6.25	Removed Hb H Body slides for HGB Investigations; no longer needed by testing site.	2019-08-09	Caroline Perrin
6.26	Added Terrace and Smithers to the sites that perform Troponin T High Sensitivity testing.	2019-08-09	Caroline Perrin
6.27	CHANGED SAMPLE TYPE FOR MMA TO LITHIUM HEPARIN OR SODIUM HEPERIN FROM EDTA. SEND ON	2019-10-04	Caroline Perrin
6.28	Changed Sample handling and transport conditions from RT to Cool; >72 hours freeze.	21-10-07	Caroline Perrin
6.29	Updated CMV, HIV Viral Load and BK Virus centrifuge settings to 10 mins at 1300 RCF	14-11-2019	Caroline Perrin
6.30	Aluminum testing now done at HIC and needs OOP/OOC approval. Sample no longer requires being in the upright position after collection.	14-11-2019	Caroline Perrin
6.31	Updated the sample type for Trichomonas by NAAT testing for urine, cervix and vaginal samples.	14-11-2019	Caroline Perrin
6.32	Stool Calprotectin now approved by MSP for patients with IBD who are on biologic agent.1	27-11-2019	Caroline Perrin
6.33	Corrected spelling on Acanthamoeba Culture.	2019-12-11	Ally King
6.33	Update Bordetella pertussis culture to Bordetella pertussis testing to reflect NAT testing at BCCDC. Updated specimen collection and handling instructions.	2019-12-11	Ally King
6.33	Update RSV and Influenza AB specimen collection & handling information	2019-12-11	Ally King
6.33	Update Legionella culture, synonyms and sample types.	2019-12-11	Ally King
6.33	Add new order details for Cystic Fibrosis Respiratory Culture (cough swab)	2019-12-12	Ally King
6.33	Culture, Eye – Add DAP MIC 4.2.1, 4.2.4 Eye swabs are taken prior to the application of topical anesthetic. Specify transportation time for eye samples.	2019-12-16	Ally King

NH LABORATORY SERVICES TEST DIRECTORY

Version Number	Description of Change	Date of Revision	Reviewed By
6.34	BK VIRUS PEDS added to test directory; not an orderable yet will need to be a HOLD REF	2020-01-18	Caroline Perrin
6.35	Body Fluid Crystals changed from Orange Top Sterile container to 3ML EDTA tube	2020-01-20	Caroline Perrin
6.36	Change in test name Helicobacter pylori Antibody (Stool) to Helicobacter pylori Stool Antigen Test and update collection requirements. Update Fecal calprotectin to reflect LifeLabs change in billing guidelines	2021-03-24	Katie Campen
6.37	Remove Helicobacter pylori Antibody (Stool)- test not available Update amino acid screen –CSF (remove SSA requirement) and update to current requirements Update CMV, HIV, and HBV viral load Update polypropylene tube requirements for Copper (incl. Peds), Selenium and Zinc Update Arsenic Test Urine to include current collection/shipping requirements Update Catecholamine Total to re-route to HIC and update collection requirements Update Pneumocystis jirovecii testing- add new test PJP NAT for send out to St Paul's. (HOLD REF until orderable built in Cerner)	2021-03-23	Katie Campen
6.38	Update collection requirements: RBC membrane flow analysis, PJP (removed Hold ref), hydroxyprogesterone, Proinsulin, Anti-Mullerian Hormone (AMH)- hold ref, HLA Ab Investigation, Cyanide testing-hold ref, Alpha-1 Antitrypsin- hold ref, Humira-hold ref	2021-05-25	Katie Campen
6.39	Add COVID testing to directory: GeneXpert, Fusion and Serology Add Influenza A/B/RSV NAAT test Add Respiratory Pathogen NAAT Aldosterone/Renin ratio- update collection requirements Methylmalonic Acid- update collection requirements Update HIV Screen for Infants and Mom	2021-06-04	Katie Campen
6.40	Further update of HIV	2021-06-07	Katie Campen
6.41	Update: Arbovirus Serology (Change name to Phlebovirus Serology), BK Virus (name change to Polyomavirus Viral Load), Vitamin D 25, Catecholamines (Urine and Total), CCP Antibody, Alpha-Mannosidase WBC, Alpha-Fucosidase WBC, 5-Hydroxyindoleacetate 24 Hour Urine, Cholinesterase, Dibucaine, Acetylcholine Receptor Antibody Discontinue: Bzotropine Level (Cogentin), Brozepam, Brompheniramine, Buprenorphine ADD: Lysosomal Enzyme Blood Spots: <ul style="list-style-type: none"> • Alpha-Galactosidase • Alpha-Glucosidase • Alpha Iduronidase • Beta-Galactocerebrosidase • Beta-Glucosidase • Sphingomyelinase 	2021-06-21	Katie Campen
6.42	Re-format A Update: 14-3-3 Protein, 7-dehydrocholesterol, Acylcarnitine (blood spot and serum), ACTH, Aldosterone 9incl 24 hr urine), Alkaline Phosphatase Isoenzymes, Alpha 1 Fetoprotein Amniotic Fluid Screen, Alpha 1 Fetoprotein Tumor marker, AASA Urine, Aluminum Level, Alprazolam Level, Amino Acid Screen (CSF, Plasma, Urine), Amoebiasis Serology, Amikacin level, Amylase urine, Androstenedione, Arbovirus Serology (name change to Phlebovirus Serology), Aripiprazole Level, Azathioprine (name change to Thiopurine Metabolites) Discontinue: Alpha 1 Fetoprotein Maternal Screen, , Acetazolamide, Alpha Glucosidase WBC, Adenovirus Antibody, Actinomyces Antibody, Acid Phosphatase (incl Prostatic), Aldolase, Amphetamine level (Incl Pediatric), Amantidine, Ethchlorvynol Level, Eye Muscle Antibody, Glutethimide, Granulocyte Antibody, Tricyclic Antidepressant Screen Add New: Amitriptyline Level, G6PD Assay, AMPA Receptor Antibody Test (hold ref until built), AMPA Receptor Antibody Test CSF (hold ref until built)	2021-06-29	Katie Campen

NH LABORATORY SERVICES TEST DIRECTORY

Version Number	Description of Change	Date of Revision	Reviewed By
6.43	Re-format A through D Update Send-out Tests A-D	2021-07-07	Katie Campen
6.44	Re-format A-Q Update send-out tests in sections E-Q	2021-07-27	Katie Campen
6.45	Re-format A-Z Update send-outs A-Z	2021-09-29	Katie Campen
6.46	Update Mononucleosis Screen to include EDTA and better collection instructions. Update Transferrin for ordering clarity. Update JAK2 link. Update Helicobacter pylori Stool Antigen test- re-route to LifeLabs and update collection requirements. Update Parathyroid Hormone Related Peptide Add 5-Hydroxyindoleacetic Acid 24 Hour Urine back to directory Remove H. pylori Breath Test- unavailable due to COVID (Stool Ag will replace) Remove iFOB- no longer available and add FIT Other Indicators and FIT Testing Colon Screening Add Manganese Serum Rename Phlebovirus Antibody with correct primary synonym- Arbovirus Antibody Remove old Herpesvirus synonyms from test directory and refer to new Herpes tests where required	2021-11-15	Katie Neilson
6.47	New tests: Nuclear Antibody IFA Screen, TIDE Protocol panel, Hereditary Cancer Genetic Testing, Clostridium botulinum, COVID-19 Total Antibody (Pre-Regeneron Therapy), Complement Classical, Complement Alternative, Microscopic Examination Cytology Stain: Brushing, Tissue or Wash, Update: MuSK Antibody, HIT, HLA Typing, Porphobilinogen 24 hr Urine, Porphyrin 24 hr Urine, Embryopathology, Thrombin III Antibody Assay, Lymphoma Protocol, Flow Cytometry, Skin Biopsy Alopecia, Glucose Tolerance Gestational Screen, Glucose Tolerance Gestational 2 Hour, HLA Typing, Voltage Gated Potassium Channel Antibody, Glutamate Decarboxylase 65 Antibody, MADL links, Voltage Gated Calcium Channel Antibody, DHEAS, DHEAS Ped,	2021-12-13	Katie Neilson
6.48	Update: Hepatitis C PCR (update requisition link), CJD CSF, Manganese Serum, Thiopurine Metabolites (rename to legal name Mercaptopurine Metabolites) New: Calprotectin, Fecal Pediatric	2022-01-28	Katie Neilson
6.49	Update: Add in which tests are not covered by MSP, add polypropylene aliquot tube to coag tests, Acanthamoeba Culture, Albumin Level, Amiodarone, BK Virus Viral Load Pediatric, CD4/CD8 Pediatric, Chromium Level, Cold Agglutinin Screen Referral, Epstein Barr Virus by PCR Pediatric, Erythropoietin Level w/CBC, Factor V Leiden & Prothrombin Gene Variant, Helicobacter pylori Breath Test, Human Leukocyte Antigen B27, Legionella Antigen Urine, Metanephries Plasma, Nuclear Antibody EIA Screen, Partial Thromboplastin Time, Polyomavirus Viral Load, Sperm Antibody, Tuberculosis Interferon Gamma Release Assay,	2023-08-30	Katie Neilson
6.50	Update to: Acanthamoeba Culture, Albumin Level, Amiodarone Level, BK Virus Viral Load Pediatric, Catecholamines Random and 24 Hour Urine, CD4/CD8 Pediatric, Chromium Level, Cold Agglutinin Screen Referral, Cytology, Epstein Barr Virus by PCR Pediatric, Erythropoietin Level w/CBC, Factor V Leiden & Prothrombin Gene Variant, Helicobacter pylori Breath Test, Human Immunodeficiency Virus (HIV) Genotype, HIV Screen Infant, HIV Screen Mother, Human Immunodeficiency Virus (HIV) Serology, Human Immunodeficiency Virus (HIV) Viral Load, Human Immunodeficiency Virus (HV) 1 NAT, Human Leukocyte Antigen B27, Immunoglobulin Panel IgA, IgM, IgG, Immunoglobulin Panel Pediatric IgA, IgM, IgG, Immunophenotyping Human Immunodeficiency Virus (HIV) Patients, Legionella Antigen Urine, Metanephries Plasma and 24 Hour Urine, Methylmalonic Acid, Microarray Analysis Pediatric, NIPT (Non-Invasive Prenatal Testing), Nuclear Antibody EIA Screen, Partial Thromboplastin Time, Polyomavirus Viral Load, Sperm Antibody, Tuberculosis Interferon Gamma Release Assay, Vitamin B12	2023-11-21	Katie Neilson

