

Department of Pathology & Laboratory Medicine Central Zone

Laboratory Test Catalogue



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General Information

Catalogue Information

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

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

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

Tests Not in Catalogue

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

Reference Ranges

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

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

Specimen Receiving Locations

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

Blood Collection

Out-Patient Blood Collection Locations and Hours of Operation

For a list of Nova Scotia Health-Central Zone outpatient blood collection locations and hours of operation please consult the reverse side of any Pathology and Laboratory Medicine requisition or visit: <a href="http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/location-hours-outpatient-blood-collection-services/location-

In-Patient and Clinic Blood Collection

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

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

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Specimen Collection Information

Venipuncture Policy

The Nova Scotia Health-Central Zone Department of Pathology and Laboratory Medicine Venipuncture Policy can be viewed at:

NSHA CL-BP-040 Venipuncture for Blood Specimen Collection

Collection, Handling and Transport Instructions

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

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

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

Blood Collection under Special Circumstances

Physicians must complete the following consent form authorizing phlebotomy under special circumstances such as mastectomy, fistula, and blood draws from the foot:

http://healthforms.cdha.nshealth.ca/sites/default/files/CD2154MR.pdf

Transfusion Medicine - Specimen Collection Policy

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

Requisition Information

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

Required formats and information for laboratory requisitions:

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

Requisitions and Supplies

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

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

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Specimen Labeling

Required formats and information for labeling laboratory specimens:

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

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

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

Frozen Specimens

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

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

Transport

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

QEII HSC Specimen Receiving, Mackenzie Building, Room 128, 5788 University Avenue Halifax, Nova Scotia B3H 1V8

Coagulation Testing

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

Citrate tubes must be:

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

Referral testing not in primary tube:

- Specimens must be double spun at centrifuge parameters that are validated for platelet poor plasma by following the steps below:
 - 1. After centrifuging the primary container transfer all plasma into a secondary aliquot tube with the exception of a small layer near the buffy coat (5 mm of plasma).
 - 2. Centrifuge the secondary container and then aliquot 1 ml of the platelet poor plasma into each of the required number of labeled polypropylene aliquot tubes (required number of aliquots is listed under each assay). Do not pipette or disturb the bottom 2 to 5 mm of plasma in the secondary container.
 - 3. Freeze and send on dry ice so no thawing occurs during transport (rejected if received thawed).

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Safety

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

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

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

Nova Scotia Health adheres to the following:

WHMIS Act and Regulations
TDG Act and Regulations

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Nova Scotia Health - Central Zone - Laboratory Test Catalogue

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

Indicates the test is to be collected in a small volume (2.0 mL Lavender EDTA/1.8 mL Light blue Sodium Citrate) tube. Where applicable, please refer to the Tube/Specimen information for the tube type required.

17 Beta Estradiol see Estradiol Division: Clinical Chemistry - Core 50 % Correction see PT 50% Mix or PTT 50% Mix Division: Hematopathology - Coagulation 11-Deoxycortisol Serum Compound "S" Tube/Specimen: 4.0 mL Gold SST (BD#367977) Referred Out: In-Common Laboratories Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. Freeze at once. Send copy of requisition. LIS Mnemonic: 11-Deoxy 1, 25 Dihydroxycholecalciferol see Vitamin D (1, 25-Dihydroxy) Level Referred Out: In-Common Laboratories **10, 11 Epoxide** see Carbamazepine-10, 11 Epoxide Referred Out: In-Common Laboratories 72 hour Fecal Fat see Fat, Fecal Referred Out: In-Common Laboratories 5HIAA, 24-Hour Urine Tube/Specimen: 24-hour urine collected in a container with 25 mL 6N HCL.

Referred Out: In-Common Laboratories

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

The patient must have a diet free of avocados, bananas, tomatoes, plums, eggplant, hickory nuts, pineapple and mollusks for 2 days prior to

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and during collection. Patients should be off all medications for 3 days if possible. Record Total Volume of 24 hour urine on both the aliquot and the requisition.

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

Send copy of requisition.

Refer to Appendix A for pH adjustment instructions.

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

LIS Mnemonic: 5HIAA

21 Hydroxylase

see Adrenal Antibody

Referred Out: In-Common Laboratories

17 Hydroxyprogesterone (17 Alpha Hydroxyprogesterone)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

Specimen may be thawed and refrozen once.

Send copy of requisition.

LIS Mnemonic: 17OH Prog

16S

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

CD0432/ CD0433 Requisition:

Division: Virology-Immunology

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

able to be identified may be submitted.

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

LIS Mnemonic:

18S see Mycology (18S)

Referred Out: The Hospital for Sick Children

 $\mathbf{A}\mathbf{A}\mathbf{A}$ see Adrenal Antibody

Referred Out: In-Common Laboratories

see Alpha-1-Anti-Trypsin

Division: Clinical Chemistry - Core

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AAT



Division:

PLM Laboratory Test Catalogue

see Next Generation Sequencing-Myeloid Panel

ABL kinase domain mutation

Molecular Diagnostics

ABO Antibody Titre

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

Requisition: CD0001_05_2019

Division: Transfusion Medicine

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

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

Alternate Names: Anti A/Anti B Titre

Isohemagglutinin Titre

ABO Group and Rh Type

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

Requisition: CD0001_05_2019

Division: Transfusion Medicine

Instructions: For medical purposes only

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

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

Alternate Names: Blood Group and Rh Type

Group and Type

Absolute Neutrophil Count

Division: Hematopathology – Core

Alternate Names: ANC

AC Blood Sugar

see Glucose AC, Plasma

Division: Clinical Chemistry - Core

see Angiotensin Converting Enzyme, Plasma

Division: Clinical Chemistry - Core

Acetaminophen

ACE

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Tube/Specimen: Plain Red - 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry- Core

Alternate Names: Tylenol

LIS Mnemonic: ACET

Acetylcholine Receptor Antibodies

(Do not confuse with Ganglionic Acetylcholine Receptor Antibody)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

LIS Mnemonic: ACRAB

Acetylcholinesterase, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Cholinesterase

Pseudo Cholinesterase

LIS Mnemonic: CHE

Acetylsalicylic Acid see Salicylates

Division: Clinical Chemistry - Core

Acid Mucopolysaccharide Screen see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

ACTH

Tube/Specimen: Plastic Lavender Stoppered (EDTA) 4mL on ice

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

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Freeze immediately and send frozen. Thawed specimens are unacceptable.

Alternate Names: Adrenocorticotropic Hormone

LIS Mnemonic: ACTH

Acute Intermittent Porphyria gene mutation

Requisition: IWK Clinical Genomics

Instructions: Do not accession; send directly to IWK Clinical Genomics lab.

Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the IWK Clinical Genomics lab to prevent delay in

results

Alternate Names: AIP gene

PBGD gene

Porphyria gene mutation

HMBS

Hydroxymethylbilane Synthase gene

LIS Mnemonic: None

Adams 13 Genetics Mutation

contact Hematology Coagulation lab for more information

Adams 13 Test Activity

(Do not confuse with Adams 13 Genetics Mutation Testing)

Tube/Specimen: Two 2.7 mL Light blue buffered sodium Citrate (BD#363083)

Referred Out: Mayo Medical Laboratories

Instructions: Send to Esoteric Coagulation Lab for processing.

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

delay in results.

LIS Mnemonic: ADAM TS13

Adenovirus

Tube/Specimen: Swabs collected in UTM, Urine collected in dry sterile container, stool collected in dry sterile container.

Requisition: CD0432/CD0433

Division: Virology-Immunology

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

LIS Mnemonic: E AD

E RAN (for stool, tested along with norovirus and rotavirus)

ADH see Copeptin

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

Adrenal Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

Send copy of requisition.

ADRAB LIS Mnemonic:

Adrenaline see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

Adrenocorticotropic Hormone see ACTH

Division: Clinical Chemistry - Core

AEMA see Endomysial Antibody

Division: Immunopathology

AF4-MLL gene fusion

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C

Bone Marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen

RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Translocation (4; 11)

t(4;11)

LIS Mnemonic: 2LAVDNA

AFP

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send 1.0 mL frozen serum, if longer.

Alternate Names: Alpha Fetoprotein

AFP LIS Mnemonic:

Aids Test see HIV-1/HIV-2

Division: Virology-Immunology

ALA, random urine see Porphyrin Precursors, random urine

Referred Out: In-Common Laboratories

ALA Dehydratase see Porphobilinogen Deaminase

Referred Out: In-Common Laboratories

Alanine Aminotransferase, Plasma see ALT, Plasma

Division: Clinical Chemistry - Core

Albumin, Fluid

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

BF ALB LIS Mnemonic:

Albumin, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

LIS Mnemonic: ALB

Albumin, Random Urine or 24-Hour Urine

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

container.

CD0002 Requisition:

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Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

> Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate. Record the Total Volume of the 24-hour urine on both the specimen aliquot and the requisition.

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 14 days.

Alternate Names: **U ACR**

Albumin/Creatinine Ratio Microalbumin, Urine

LIS Mnemonics: U ACR

U24 ALB

Alcohol, Serum

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations.

Alternate Names: Ethanol

Ethyl Alcohol **ETOH**

LIS Mnemonic: ALC

Aldosterone/Renin Activity Ratio, Plasma

Tube/Specimen: Two lavender topped EDTA tubes. Indicate on requisition patient's position during collection; upright or lying down (supine).

Referred Out: In-Common Laboratories

Centrifuge at room temperature within 4 hours of collection; aliquot two 1.0 mL quantities of plasma and freeze. Instructions:

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

As of July 19, 2022 all Aldosterone and/or Renin requests will be ordered as Aldosterone/Renin Activity Ratio.

Send copy of requisition.

Stability: Room temperature for 24 hours, 2 to 8°C for 24 hours and frozen for 28 days.

LIS Mnemonic: ARRATIO

Aldosterone, 24-Hour Urine

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

Referred Out: In-Common Laboratories

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

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

Record Total Volume of the 24-hour urine on both the aliquot and requisition.

Identify drugs administered within 2 weeks as some drugs have a low cross-reactivity in this assay.

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Comments: Specimens with Boric Acid are acceptable.

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

Send copy of requisition.

Stability: Room temperature for 2 days, 2 to 8°C (preferred) for 10 days and frozen for 3 weeks.

LIS Mnemonic: ALDOS U

ALK see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

ALK-NPM gene fusion

Tube/Specimen: Tissue: Formalin-fixed paraffin embedded (FFPE)

Referred Out: MAYO Medical Laboratories

Instructions: Do not accession. NSH and all zones- FFPE tissue will be referred out by the Anatomical Pathology lab.

Comment: Test is not performed at the QEII. IWK and labs from outside NS are to send specimens directly to the referral site which performs the test to

prevent delay in results.

Alternate Names: Translocation (2;5)

t(2;5)

LIS Mnemonic: None

Referred Out:

ALK PHOS see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry – Core

Alkaline Phosphatase, Bone see Bone Alkaline Phosphatase

Mayo Medical Laboratories

Alkaline Phosphatase, Isoenzyme

(Do not confuse with Bone Alkaline Phosphatase)

Tube/Specimen: One 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

LIS Mnemonic: ALPISO

Alkaline Phosphatase, Plasma

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

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Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: ALP

ALK

ALK PHOS

Phosphatase, Alkaline

LIS Mnemonic: ALP

ALP see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

Alpha Fetoprotein see AFP

Division: Clinical Chemistry - Core

Alpha Galactosidase, Whole Blood

(Do not confuse with Alpha-Gal IgE)

Tube/Specimen: One 6 mL green topped Sodium or Lithium heparin tube, no gel separator

Collect only Monday to Wednesday before noon. Contact Referred Out at 902-473-7237 before collection.

Referred Out: Hospital for Sick Children, Metabolic Diseases Laboratory

Instructions: **Do Not Centrifuge.**

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

LIS Mnemonic: MISC REF

Alpha Thalassemia, DNA Testing

Tube/Specimen: Three lavender topped EDTA tubes

Referred Out: McMaster University Medical Centre

Instructions: **Do Not Centrifuge.**

Ship at room temperature.

LIS Mnemonic: MISC HEM

Alpha Thalassemia Screen see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

Alpha Tocopherol see Vitamin E Level

Referred Out: In-Common Laboratories

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Alpha-1-Acid Glycoprotein

(Do not confuse with Alpha Glycoprotein Subunit)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 1.0 mL serum into a plastic vial and freeze.

Send copy of requisition.

LIS Mnemonic: A1AGP

Alpha-1-AntiTrypsin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: AAT

Alpha-1-Antitrypsin Genotype

(Do not confuse with AAT Phenotyping or AAT Proteotype)

Tube/Specimen: One 6.0 mL Lavender (EDTA) (BD#367863) AND One 6.0 mL Plain Red (BD#367815)

Referred Out: In-Common Laboratories

Instructions: Centrifuge the plain red tube at room temperature and aliquot 1.0 mL of serum.

Do NOT centrifuge the lavender EDTA tube and whole blood should be submitted in original collection tube.

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

Send copy of requisition.

Stability: Ambient 21 days, refrigerated 30 days, frozen 30 days.

LIS Mnemonic: MISC REF

Alpha-1-Antitrypsin Phenotyping, Pl Typing

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

Comments: If specimen requirements are met, patients with quantitative AAT results below 0.900 g/L will be sent to In-Common Laboratories for

Proteotype testing. If the mass spectrometry proteotype and quantitative serum levels are discordant, phenotyping will be added and reported.

LIS Mnemonic: AAT PHE

Alpha-2-Anti Plasmin

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

Referred Out: Hamilton General Hospital

Instructions: Send to Hematology Coagulation Lab for processing.

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

delay in results

LIS Mnemonic: Antiplasmn

ALT, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Alanine Aminotransferase

SGPT

LIS Mnemonic: ALT

Aluminum Level

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature. Aliquot 3.0 mL plasma into a plastic transfer vial. Freeze.

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

Send copy of requisition.

LIS Mnemonic: Aluminum

AMA

see Anti-Mitochondrial Antibodies

Division: Immunopathology

AMH

see Anti-Mullerian Hormone

Referred Out: Mayo Medical Laboratories

Amikacin Level

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002A/CD0002B

Division: Microbiology

Instructions: Do not take blood from catheter or from site of injection of the antibiotic. Take Pre blood specimen immediately before dose is administered.

Take Post blood specimen 30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. The

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time specimen was collected (pre/post) should be indicated on the requisition and tubes.

Note: This test will be referred out by the Microbiology lab.

Alternate Names: Aminoglycoside Level

LIS Mnemonic: RO AMIK

Amino Acid Quantitative Plasma

Tube/Specimen: 7.0 mL Lithium heparin (dark green) tube on ice.

Referred Out: IWK Metabolic Lab

Instructions: Patient fasting is preferred.

Centrifuge at room temperature immediately or within 4 hours of collection if specimen is kept refrigerated.

Aliquot 2.0 mL heparinized plasma into plastic vial.

Refrigerate for up to 24 hours. If unable to ship within 24 hours, freeze and ship frozen. Otherwise ship same day with cold pack.

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK Metabolic Lab Specimen should be accompanied by a Metabolic Investigation Form completed by the ordering physician.

LIS Mnemonic: AA PL QT

Amino Acid, Quantitative, Random Urine or 24-Hour Urine

Tube/Specimen: Random urine collection must be a mid-stream technique to eliminate bacterial contamination. Timed (12-hour or 24-hour) specimens are

also acceptable.

Referred Out: IWK Metabolic Lab

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

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

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK Metabolic Lab Specimen should be accompanied by a Metabolic Investigation Form completed by the ordering physician.

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

LIS Mnemonic: UAA

U AA 24 (24-Hour)

Amino Acid Screen, Qualitative, Random Urine or 24-Hour Urine

Tube/Specimen: Collection must be in a plain container; random using mid-stream technique to eliminate bacterial contamination.

Timed 12-hour and 24-hour collections are also acceptable.

Referred Out: IWK Metabolic Lab

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

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

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK Metabolic Lab Specimen should be accompanied by a Metabolic Investigation Form completed by the ordering physician.

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

LIS Mnemonic: Miscellaneous Referred-Out

Aminoglycoside Levels

see Gentamicin, or Tobramycin, or Vancomycin

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Division: Clinical Chemistry - Core

Aminophylline see Theophylline

Division: Clinical Chemistry - Core

Amiodarone Level

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

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

To monitor therapy, draw trough specimen prior to next dose.

Analysis includes Desethylamiodarone.

Send copy of requisition.

LIS Mnemonic: Amiod Lvl

Amitriptyline Level

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

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

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

Note: Royal Blue Trace Element SERUM tube (BD #368380) and Lavender topped EDTA plasma are also acceptable.

Indicate specimen type on tube.

Send copy of requisition.

LIS Mnemonic: AMIT

AML1-ETO gene fusion

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen

RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Translocation (8;21)

t (8;21)

RUNX1-RUNX1T1

LIS Mnemonic: 2LAVDNA

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Ammonia, Plasma

Tube/Specimen:

2.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Tube must be filled to capacity.

Label tube with patient information with waterproof ink, immediately immerse in slurry of ice and water and deliver to Processing area within

20 minutes

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

Plasma aliquot must be kept on ice before analysis.

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

Shipping: Plasma aliquot is stable for 15 minutes at 15 to 25°C, 2 hours at 4 to 8°C and 3 weeks frozen.

Freeze/thaw once.

LIS Mnemonic: AMMON

Amoebiasis

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

Alternate Names: Amoebic Serum

Hemagglutination

LIS Mnemonic: RO AMOEBA

Amoebic Serum

see Amoebiasis - IHA

Division: Virology-Immunology

Amylase and CEA, Pancreatic Cyst Fluid

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: PCF AMY and CEA

PCF CEA and AMY

Amylase, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Alternate Names: Diastase

LIS Mnemonic: AMY

Amylase, Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Specimen required: 4 mL urine aliquot from well-mixed collection. Instructions:

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

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

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

LIS Mnemonic: U AMY T

ANA

see Anti-Nuclear Antibody

Division: Immunopathology

Anafranil see Clomipramine

Referred Out: In-Common Laboratories

Anaplasma see Hem Microorganism

Division: Hematopathology-Microscopy

Anaplasma PCR

Tube/Specimen: 4.0 mL Lavender topped EDTA tube

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

and Anaplasma PCR testing.

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

RO ANAPLPCR LIS Mnemonic:

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Anaplasma Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ANAPLSER

ANC see Absolute Neutrophil Count

Division: Hematopathology - Core

ANCA see Vasculitis Panel

Division: Immunopathology

Androstenedione

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 24 hours at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Delta 4 Androstenedione

LIS Mnemonic: ANDRO

ANF see Anti-Nuclear Antibody

Division: Immunopathology

Angiotensin Converting Enzyme, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: ACE

LIS Mnemonic: ACE

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Anion Gap, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry – Core

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

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

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: Anion Gap

LIS Mnemonic: AGAP

Anti A / Anti B Titre

see ABO Antibody Titre

Division: Transfusion Medicine

Anti TTG see Anti-Tissue Transglutaminase

Division: Immunopathology

Anti-Adrenal Antibody

see Adrenal Antibody

Referred Out: In-Common Laboratories

Anti-AMPA Receptor, Serum or CSF

Tube/Specimen: One 4.0 mL Gold SST (BD#367977) or 3.0 mL CSF

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic: AMPA

AMPA CSF

Antibody Screen

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

Division: Transfusion Medicine

Alternate Names: Indirect Antiglobulin Test

IDAT

Anti-Borrelia Antibodies

see Lyme Antibodies

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Division:	Virology-Immunology
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Anti-Cardiolipin Ab

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Immunopathology

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

Alternate Names: Cardio Ab

Cardiolipin Antibodies

LIS Mnemonic: CARD

Anti-CCP see Anti Cyclic Citrullinated Peptide

Division: Immunopathology

Anti-Centromere Antibody see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-Centromere B see Anti-Nuclear AB, (ANA)

Division: Immunopathology

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

Division: Immunopathology

Anti-Cochlear Ab FORWARD see F68KD

Referred Out: Mayo Medical Laboratories

Anti-Cyclic Citrullinated Peptide

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Immunopathology

Alternate Names: Anti-CCp

CCP

Cyclic Citrullinated Peptide Antibody

LIS Mnemonic:

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Anti-Depressant Level Physician must specify name of drugs

Anti-Diuretic Hormone (ADH, Vasopressin) see Copeptin

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

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

Division: Immunopathology

Anti-Double Stranded DNA see Anti-ds DNA

Division: Immunopathology

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

Tube/Specimen: 4.0 mL Gold SST (BD#367977) or 3.0 mL CSF

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic: DPPX

Division:

DPPX CSF

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

Division: Immunopathology

ANTI-ds DNA see Anti-Nuclear Ab

Anti-GABAB Receptor, Serum or CSF

Immunopathology

Tube/Specimen: 4.0 mL Gold SST (BD#367977) or 3.0 mL CSF

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic: GABAB

GABABCSF

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Anti-GAD

Tube/Specimen: 4.0 mL Gold SST (BD#367977) preferred, red topped tube acceptable.

Referred Out: In-Common Laboratories

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

Send copy of requisition.

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

LIS Mnemonic: Anti-GAD

Anti-GBM Ab see Vasculitis Panel

Division: Immunopathology

Anti-Gliadin IgG or IgA see Anti-Tissue Transglutaminase

Division: Immunopathology

Anti-Glomerular Basement see Vasculitis Panel

Division: Immunopathology

Anti-HMGCR Antibodies see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

Anti-Hu see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

Anti-Hu, CSF see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

Anti-Jo-1 see Anti-Nuclear AB, (ANA)

Division: Immunopathology

Anti-LKM see Liver Kidney Microsomal Antibodies

Referred Out: In-Common Laboratories

Anti-MAG see Myelin Associated Glycoprotein Antibody

Referred Out: In-Common Laboratories

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Anti-MOG see Neuromyelitis Optica (NMO_IgG)

Referred Out: In-Common Laboratories

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

Tube/Specimen: Isolate, Susceptibility testing

Referred Out: Antimicrobial Resistance and Nosocomial Infections (ARNI)

Instructions: Shipped as Category B.

Anti-Microsomal Antibodies see Anti-thyroid Peroxidase Antibodies

Division: Clinical Chemistry – Core

Anti-Mitochondrial Ab

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Immunopathology

Alternate Names: AMA2

Division:

And MDO

Anti-MPO see Vasculitis Panel

Anti-Mullerian Hormone

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

Plain red topped tube

Immunopathology

Referred Out: Mayo Medical Laboratories

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

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

LIS Mnemonic: AMH

Anti-Mup44/NT5C1 see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

Anti-MuSK (Muscle Specific Kinase) Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

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Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

Stability: 28 days frozen

LIS Mnemonic: MUSK

Anti-NDNA see Anti-ds DNA

Division: Immunopathology

Anti-Neutrophil Cytoplasmic Ab see Vasculitis Panel

Division: Immunopathology

Anti-Nuclear Antibody (ANA)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Immunopathology

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

Anti-ds DNA: Anti-Chromatin; Anti-Ribosomal P; Anti-SS-A/RO; Anti-SS-B/LA; Anti-Centromere B; Anti-Sm; Anti-Sn/RNP; Anti-RNP;

Anti-Scl-70; Anti-JO-1

LIS Mnemonic: ANA

Alternate Names: ANF

Anti-Nuclear Factor Nuclear Factor

Anti-Nuclear Factor see Anti-Nuclear Antibody

Division: Immunopathology

Anti-Pancreatic Islet Cell Antibody

Alternate Names: APICA

Islet Cell Antibody

Pancreatic Islet Cell antibody

Note: Pancreatic Islet Cell Antibody testing is no longer offered in Nova Scotia Health Central Zone Laboratories as of September 23rd, 2024. Glutamic

Acid Decarboxylase 65 Antibodies (Anti-GAD) will be ordered instead.

Anti-Parietal Cell see Autoantibodies Panel

Referred Out: In-Common Laboratories

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Anti-PC see Autoantibodies Panel

Referred Out: In-Common Laboratories

Skin Antibodies

Tube/Specimen: Collect two 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot 3 mL serum into one aliquot tube.

Stability: 2 to 8 °C 14 days and frozen 30 days

LIS Mnemonic: Anti-PP

Alternate Names: Anti-Basement Membrane Antibody

Skin Basement Membrane Antibody

Anti-Pemphigoid Antibody Anti-Pemphigus Antibody

Anti-Pemphigus/Pemphigoid Antibodies

Intercellular Skin Antibody

Anti-Phospholipase A2 Receptor (Anti-PLA2R)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

CSF specimen acceptable. Send copy of requisition.

Refrigerated at 2 to 8 °C for 14 days and frozen >14 days. Stability:

LIS Mnemonic: PLA2R

Referred Out:

Anti-PLA2R see Anti-Phospholipase A2 Receptor

Referred Out: In-Common Laboratories

Anti-Plasmin see Alpha-2-Anti-Plasmin

Hamilton Regional Hospital

Anti-Platelet Antibody/Platelet Typing

Tube/Specimen: Seven 7.0 mL yellow topped ACD tubes or Nine 4.5 mL light blue topped sodium citrate tubes and one 10.0 mL red topped tube.

Referred Out: McMaster University HSC

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Instructions:	Send to Hematology Coagulatio	a Lab for processing.	
LIS Mnemonic:	Miscellaneous Hematology		
Anti-PR3		see Vasculitis Panel	
Division:	Immunopathology		
Anti-Proteinase 3		see Vasculitis Panel	
Division:	Immunopathology		
Anti-Retinal A			
Tube/Specimen:	Two 4.0 mL Gold SST (BD#367	977) or two Red topped tubes	
Referred Out:	Mayo Medical Laboratories		
Instructions:	Centrifuge and aliquot 5 mL ser	gy Test Request form is completed by physician. um (minimum volume is 3 mL) into a referred out aliquot tube. Scotia Health <i>Central Zone</i> Hospitals	
Stability:	Refrigerated 7 days.		
LIS Mnemonic:	Miscellaneous Referred Out		
Anti-Ri		see Paraneoplastic Antibodies	
Referred Out:	In-Common Laboratories		
Anti-Ri, CSF		see Paraneoplastic Antibodies, CSF	
Referred Out:	In-Common Laboratories		
Anti-Ribosom	al P	see Anti-Nuclear AB, (ANA)	
Division:	Immunopathology		
Anti-RNP		see Anti-Nuclear AB, (ANA)	
Division:	Immunopathology		
Anti-Scl-70		see Anti-Nuclear AB, (ANA)	
Division:	Immunopathology		

Skeletal Muscle Antibodies

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4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

Stability: Refrigerated at 2 to 8 °C 14 days and frozen 30 days.

LIS Mnemonic: **ASKMA**

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

Division: Immunopathology

Anti-Smooth Muscle see Autoantibodies Panel

Referred Out: In-Common Laboratories

Anti-SM see Autoantibodies Panel

Referred Out: In-Common Laboratories

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

Division: Immunopathology

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

Division: Immunopathology

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

Anti-Streptolysin "O" Titer

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Immunopathology

Requisition: CD0002

Division:

Division: Clinical Chemistry - Core

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

Alternate Names: ASOT

ASO Titer

LIS Mnemonic: ASOT

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Anti-Striated Muscle Antibody

see Autoantibodies Panel

Referred Out: In-Common Laboratories

Anti-Thrombin (III) (AT)

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

CD0002 Requisition:

Division: Hematopathology - Coagulation

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

Polypropylene vials (12x75).

Alternate Names: Anti-Thrombin

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

Anti-Thyroglobulin Antibodies

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

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

All other Nova Scotia Health Zones: Anti-Thyroglobulin requests are automatically also assayed for Thyroglobulin.

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

Alternate Names: TAB-TA

Thyroglobulin Antibodies

Thyroid Antibodies-Thyroglobulin

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

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

Anti-Thyroid Antibodies

see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

Anti-Thyroid Peroxidase

4.0 mL Gold SST (BD#367977) Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

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Alternate Names: Anti-Microsomal Antibodies

Anti-Thyroid Antibodies

Anti-TPO

Thyroid Antibodies

LIS Mnemonic: ANTI-TPO

TAB

Anti-Thyrotropin Receptor Antibody

see Thyroid Receptor Antibody

Referred Out: In-Common Laboratories

Anti-Tissue Transglutaminase

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B Division: Immunopathology

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

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

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

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

Alternate Names: Anti-TTG

TTG

Tissue Transglutaminase Celiac Screen/Disease

LIS Mnemonic: TTG

Anti-Topoisomerase

see Anti-Nuclear Ab

Division: Immunopathology

Anti-TPO

see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

Anti-Xa

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

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

vials (12x75).

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Send on dry ice.

Alternate Names: Heparin XA

Anti-Yo see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

Anti-Yo, CSF see Paraneoplastic Antibodies, CSF

Referred Out: In-Common Laboratories

APA see Autoantibodies Panel

Referred Out: In-Common Laboratories

Apolipoprotein A1

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

Separate within 2 hours of collection. Aliquot 1.0 mL of serum and freeze.

Lavender EDTA plasma is acceptable.

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

Send copy of requisition.

Stability: Refrigerated 7 days, frozen 90 days.

LIS Mnemonic: APO A1

Apolipoprotein B

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Centrifuge within 4 hours of collection.

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

Frozen serum specimens accepted and are stable for 60 days.

Referrals: Frozen <u>plasma</u> will not be accepted.

Alternate Names: APO B

LIS Mnemonic: APO B

ARBO Virus

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Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

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

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

Alternate Names: California Encephalitis

Dengue Virus

Eastern Equine Encephalitis Western Equine Encephalitis

Chikungunya Virus Jamestown Canyon Snowshoe Hare Japanese Encephalitis

Powassan Yellow Fever

LIS Mnemonic: RO ARBO

Arsenic, Random Urine or 24-Hour, Inorganic

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

container.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection.

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

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

Avoid seafood consumption for five days prior to collection.

Record Total Volume of the 24-hour urine on both the aliquot and requisition.

Send copy of requisition.

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

LIS Mnemonic: INARS U

INARSRU

Arsenic, Whole Blood

Instructions:

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

Referred Out: In-Common Laboratories

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

Keep refrigerated. Send copy of requisition.

Do Not Centrifuge.

LIS Mnemonic: ARS WB

ASA see Salicylates

Division: Clinical Chemistry - Core

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ASCA		see Saccharomyces cer Antibodies	
Referred Out:	In-Common Laboratories		
Ascorbic Acid		see Vitamin C	
Referred Out:	In-Common Laboratories		
ASKMA		see Skeletal Muscle Antibodies	
Referred Out:	In-Common Laboratories		
ASOT		see Anti-Streptolysin "O" Titer	
Division:	Clinical Chemistry - Core		
Aspartate Amino Transferase		see AST, Plasma	
Division:	Clinical Chemistry - Core		
Aspergillosis			
Tube/Specimen:	4.0 mL Gold SST (BD#367977)		
Requisition:	CD0432/ CD0433		
Division:	Virology-Immunology		
Note:	Farmer's Lung, Pidgeon Serum Test, and Bird Antigen Testing not available.		
LIS Mnemonic:	RO ASPER		
Aspirin		see Salicylates	
Division:	Clinical Chemistry - Core		
AST, Plasma			
Tube/Specimen:	Light Green 4.5 mL Lithium heparin and gel for plasma separation		
Requisition:	CD0002		
Division:	Clinical Chemistry - Core		
Alternate Names:	Aspartate Amino Transferase SGOT		
LIS Mnemonic:	AST		

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Autoantibodies Panel

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Aliquot serum and freeze.

LIS Mnemonic: AUTOAB

Autoimmune Encephalitis

Tube/Specimen: One 4.0 mL Gold SST (BD#367977) or 3.0 mL CSF

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

Note: Ordering physician must indicate the individual tests required, example, AMPA, NMDA, DPPX, VGKC or GABAB.

Autoimmune Encephalitis panel is not an acceptable order request.

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

Autoimmune Inflammatory Myopathy

see Autoimmune Myopathy/Myositis Profile

/Myositis Profile

Referred Out: In-Common Laboratories

Autoimmune Liver Disease Profile, Serum

Tube/Specimen: One 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic: AILDP

Autoimmune Muscle Disease Profile

see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

Autoimmune Myopathy/Myositis Profile

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

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Referred Out: In-Common Laboratories

Instructions: Aliquot at least 1.0 mL of serum. Freeze aliquot.

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

CSF specimen acceptable. Send copy of requisition.

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

Alternate Names: Anti-HMGCR

Anti-Mup44/NT5C1

Autoimmune Inflammatory Myopathy/Myositis Profile

Autoimmune Muscle Disease Profile Muscle Autoimmune Myositis Panel

LIS Mnemonic: MYOSITIS

Autoimmune Retinopathy Panel

see Anti-Retinal Autoantibody

(ARP)

Referred Out: Mayo Medical Laboratories

Autoimmune Thrombocytopenia Purpura

Tube/Specimen: Seven 7.0 mL yellow topped ACD tubes or Nine 4.5 mL light blue topped sodium citrate tubes.

Referred Out: McMaster University HSC

Instructions: Send to Hematology Coagulation Lab for processing.

LIS Mnemonic: Miscellaneous Hematology

Aventyl see Amitriptyline

Referred Out: In-Common Laboratories

Babesia see Hem Microorganism

Division: Hematopathology-Microscopy

Babesia PCR

Tube/Specimen: 4.0 mL Lavender topped EDTA tube

Requisition: CD0002A/CD0002B Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO BABPCR

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Division:

PLM Laboratory Test Catalogue

Babesia Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Instructions: Clinical data should be indicated on the requisition.

Virology-Immunology

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

LIS Mnemonic: RO BABSER

Bacterial vaginosis/Vulvovaginal candidiasis/Trichomoniasis PCR

Tube/Specimen: Aptima Multitest swabs

Requisition: CD0432/ CD0433

Division: Virology-Immunology

Shipping: Store at 2 to 30°C for up to 30 days

LIS Mnemonic: BVPAN

Barbiturate Screen

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 3.0 mL of serum into plastic transfer vial. Freeze.

Send copy of requisition.

LIS Mnemonic: BARBS

Bartonella Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO BART

B Cell Counts

Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin

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Requisition: CD0002C

Division: Hematopathology - Flow Cytometry

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

later than 14:00 hours on Fridays (or the day before a holiday).

The requisition must accompany the specimen to the Flow laboratory.

Shipping: Maintain specimen at room temperature.

CD19 TESTING Alternate Name:

LIS Mnemonic: CELL SM

B-cell lymphoid clonality

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

Alternately, send fixed tissue in paraffin block. DNA: Stability – 3 months at 4°C or frozen

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Ig gene rearrangement

Ig heavy chain Lymphoma protocol

2LAVDNA LIS Mnemonic:

BCL-1 see BCL1-IGH gene fusion

Division: Molecular Diagnostics

BCL1-IGH gene fusion

Tube/Specimen: 4.0 mL Lavender (EDTA)

Peripheral blood: 1 tube, minimum volume 1 mL. Stability - 9 days at 4°C Bone marrow: 1 tube, minimum volume 1 mL. Stability – 9 days at 4°C

Tissue: Formalin-fixed paraffin embedded (FFPE)

Referred Out: MAYO Medical Laboratories

NSH and all zones- Send peripheral blood or bone marrow to Esoteric Molecular Diagnostics Lab for processing. FFPE tissue will be Instructions:

referred out by the Anatomical Pathology lab.

Test is not performed at the QEII. IWK and labs from outside NS are to send specimens directly to the referral site which performs the test to Comments:

prevent delay in results.

Alternate Names: BCL-1

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t(11;14)

Translocation (11;14) Cyclin-D1 PRAD1 Lymphoma, mantle cell

LIS Mnemonic: 2LAVDNA

BCL-2 see BCL2-IGH gene fusion

Division: Molecular Diagnostics

BCL2-IGH gene fusion

Tube/Specimen: 4.0 mL Lavender (EDTA)

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 9 days at 4°C Bone marrow: 1 tube, minimum volume 1 mL. Stability – 9 days at 4°C

Tissue: Formalin-fixed paraffin embedded (FFPE)

Referred Out: MAYO Medical Laboratories

Instructions: NSH and all zones- Send peripheral blood or bone marrow to Esoteric Molecular Diagnostics Lab for processing. FFPE tissue will be

referred out by the Anatomical Pathology lab.

Comments: Test is not performed at the QEII. IWK and labs from outside NS are to send specimens directly to the referral site which performs the test to

prevent delay in results.

Alternate Names: BCL-2

t(14;18)

Translocation (14;18) Lymphoma, follicular

LIS Mnemonic: 2LAVDNA

BCR-ABL gene fusion

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen

RNA: Stability – 3 months frozen

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: Quantitative BCR/abl

Philadelphia chromosome Translocation (9;22)

LIS Mnemonic: 2LAVDNA

BCR-ABL mutation

see Next Generation Sequencing-Myeloid Panel

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

Division: Molecular Diagnostics

B-Ctx see C-Telopeptide

Referred Out: In-Common Laboratories

Benzodiazepine see Clonazepam (Clonazepine)

Referred Out: In-Common Laboratories

Beryllium Lymphocyte Proliferation (BeLPT)

Tube/Specimen: Four 10.0 mL Dark Green BD 366480 glass tubes.

Notify Referred-out bench at 902-473-7237 prior to collection.

Referred Out: Oak Ridge Associated Laboratories

Instructions: Collect Tuesday, Wednesday or Thursday before 11:00 ONLY!

Do Not Centrifuge! Keep at room temperature.

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

LIS Mnemonic: BELPT

Beta-2-Glycoprotein Antibody

Tube/Specimen: One 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into one plastic vial for a minimum of 1.0 mL serum.

Freeze at once.

If specimen thaws, it is unsuitable for analysis.

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

Send copy of requisition.

LIS Mnemonic: B2GLYAB

Beta-2-Microglobulin, Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: B2M

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Beta-2-Microglobulin, Urine

Tube/Specimen: Random urine with pH adjusted to 6.0 to 8.0 within 30 minutes of collection.

Referred Out: In-Common Laboratories

Instructions: Available at QE II VG site Blood Collection only.

Aliquot and freeze.

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

Send copy of requisition.

LIS Mnemonic: B2MG U

Beta-Carotene see Carotene

(β-Carotene)

Referred Out: In-Common Laboratories

Beta-CrossLaps see C-Telopeptide

Referred Out: In-Common Laboratories

Beta Hydroxybutyrate

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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

Send copy of requisition.

LIS Mnemonic: BHYB

Beta-Transferrin

 $\beta\text{-}Transferrin$ (includes $\beta1\text{-}Transferrin$ and $\beta2\text{-}Transferrin)$

Tube/Specimen: Fluid specimen; indicate source

Referred Out: In-Common Laboratories

Instructions: Freeze.

Division:

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

Send copy of requisition.

Hematopathology - Coagulation

LIS Mnemonic: BETATRANS

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

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Bethesda (Factor IX Inhibitor)

see Factor IX Inhibitor

Division: Hematopathology - Coagulation

Bicarbonate, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Shipping: Separate plasma within 2 hours of collection

Alternate Names: HCO3

TCO2 Total CO2

LIS Mnemonic: CO2

TOTAL CO2

Bile Acids/Bile Salts

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

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

Referred Out: IWK Chemistry

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

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

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

LIS Mnemonic: BILET

Bilirubin Direct, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Total Bilirubin will also be assayed.

Alternate Names: Direct Bilirubin

VDB

LIS Mnemonic: BILI D

Bilirubin Indirect, Plasma

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

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Requisition: CD0002

Division: Clinical Chemistry - Core

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

Indirect Bilirubin Alternate Names:

LIS Mnemonic: BILI I

Bilirubin Total, Fluids

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Transport at room temperature wrapped in tin foil to protect from light.

LIS Mnemonic: BF BILI T

Bilirubin Total, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Alternate Names: Total Bilirubin

Total VDB

LIS Mnemonic: BILI T

Bioavailable Testosterone, Plasma/Serum

Tube/Specimen: separation.

a) Nova Scotia Health Central Zone collection: 4.0 mL Gold SST (BD#367977) & Light Green 4.5 mL Lithium heparin and gel for plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Outside of Nova Scotia Health Central Zone collection: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Shipping:

Freeze and send two 1.0 mL frozen serum aliquots. DO NOT SEND FROZEN PLASMA.

LIS Mnemonic: BA TEST

Biquin Level see Quinidine Level

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Referred Out: In-Common Laboratories

Blastomycosis

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0432/ CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO BLASTO

Blood C&S see Blood Cultures

Division: Microbiology

Blood Cultures

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

QE 7125 Requisition:

Division: Microbiology

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

Alternate Names: Blood C&S

Culture & Sensitivity

LIS Mnemonics: Aerobic (and or fungus): M BLDAE

Anaerobic: M BLDAN

Aerobic (and or fungus) and Anaerobic: M BLD

Mycobacterium: M BLDTB

Source: Blood

Body Site/Free text: As indicated

Blood Film, Differential, Manual

Tube/Specimen: 4.0 mL Lavender (EDTA)

CD0002 Requisition:

Division: Hematopathology - Microscopy

Instructions: Any Differential ordered will have a slide reviewed.

Blood Gases, Arterial

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

Maximum heparin ratio must be <10 IU/mL blood

Recommended volume: 1 mL

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Minimum volume: 0.7 mL

Requisition: CD3211_05 - 2022

Division: Clinical Chemistry - Core

Comments: Ensure specimen is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with

needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (**NOT ON ICE**) and deliver to Processing Area immediately. The patient's temperature and whether patient is receiving supplementary oxygen or room

air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

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

Alternate Names: Oxygen Content

Oxygen Saturation Co-Oximetry

LIS Mnemonic: ABG full panel

Blood Gases, Mixed Venous

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

Maximum heparin ratio must be <10 IU/mL blood

Recommended volume: 1 mL Minimum volume: 0.7 mL

Note: Mixed VBG Panel is only for specimens drawn from the pulmonary artery catheter (PAC) to measure the end result of O2 consumption

and delivery.

Requisition: CD3211_05 - 2022

Division: Clinical Chemistry - Core

Comments: Ensure specimen is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with

needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (**NOT ON ICE**) and deliver to Processing Area immediately. The patient's temperature and whether patient is receiving supplementary oxygen or room

 $air\ must\ be\ indicated\ on\ the\ requisition.\ The\ Blood\ Gas\ should\ be\ analyzed\ within\ 30\ minutes\ of\ collection.$

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

Alternate Names: Oxygen Content

Oxygen Saturation Co-Oximetry

LIS Mnemonic: MVBG

Blood Gases, Venous Extended

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

Maximum heparin ratio must be <10 IU/mL blood

Recommended volume: 1 mL Minimum volume: 0.7 mL

Note: Venous blood gases are not available for collection at Nova Scotia Health Outpatient Blood Collection sites.

Note: VBG ExtPnl requests are limited to patients with diabetic ketoacidosis (DKA) or other critical conditions where arterial specimens cannot be drawn. If electrolytes, glucose, lactate, hemoglobin, or ionized calcium are required; use the standard test requisition form

CD0002A and collect specimen(s) as indicated.

Requisition: CD3211_05 - 2022

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Division: Clinical Chemistry - Core

Comments: Ensure specimen is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with

needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (**NOT ON ICE**) and deliver to Processing Area immediately. The patient's temperature and whether patient is receiving supplementary oxygen or room

air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

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

Alternate Names: Oxygen Content

Oxygen Saturation Co-Oximetry

LIS Mnemonic: VBG ExtPnl

Blood Gases, Venous Standard

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

Maximum heparin ratio must be <10 IU/mL blood

Recommended volume: 1 mL Minimum volume: 0.7 mL

Note: Venous blood gases are not available for collection at Nova Scotia Health Outpatient Blood Collection sites.

Requisition: CD3211_05 - 2022

Division: Clinical Chemistry - Core

Comments: Ensure specimen is mixed for at least 20 seconds to ensure proper mixing with heparin. If using syringe, remove needle; do not transport with

needle attached; label barrel with patient information in waterproof ink. Place labelled requisition and syringe in a transport bag (**NOT ON ICE**) and deliver to Processing Area immediately. The patient's temperature and whether patient is receiving supplementary oxygen or room

air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

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

Alternate Names: Oxygen Content

Oxygen Saturation Co-Oximetry

In-Common Laboratories

Clinical Chemistry - Core

LIS Mnemonic: VBG StdPnl

Referred Out:

Division:

Blood Group and Rh Type see ABO Group and Rh Type

Division: Transfusion Medicine

Blood Porphyrins see Porphyrin Screen, Plasma

Blood Sugar see Glucose AC, Plasma

Body Fluids see specific test for instructions.

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Bone Alkaline Phosphatase (Bone Specific Alkaline Phosphatase)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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

Send copy of requisition.

LIS Mnemonic: Bone ALP

Bone Marrow Aspiration- Bedside Collection

Tube/Specimen: See Instructions

Requisition: CD0046

Division: Hematopathology-Microscopy

Instructions: For QEII patients: Phone 902-473-6667 to book a technologist to spread the films (available Mon-Fri 09:00-16:00 hours) and collect requested

specimens (Flow Cytometry, Molecular Diagnostics or Cytogenetics). Technologist is not available weekends or Holidays unless approved by

Hematopathologist. A CBC and manual differential must be collected within 48 hours of the marrow collection.

Bone Marrow Aspiration- EDTA Collection

Please Note: Hematology Clinic and Dartmouth General Hospital are the only sites approved for EDTA collections.

Tube/Specimen: 2.0 mL EDTA tube

Requisition: CD0046

Division: Hematopathology-Microscopy

Instructions: EDTA Marrows must be received in lab by 16:30 (Monday to Friday only, excluding holidays). The Laboratory must be notified when

sending an EDTA bone marrow (Phone 902-473-6667). A CBC and manual differential must be collected within 48 hours of the marrow

collection.

Bone Marrow Biopsy

Requisition: CD0046

Division: Hematopathology - Microscopy

Instructions: Procedure is done when bone marrow aspiration is booked at 902-473-6667.

Bone Marrow for Cytogenetics

Tube/Specimen: 4.0 mL Dark green sodium heparin (BD#367871) or 6.0 mL Dark green sodium heparin (BD#367878)

Referred out: IWK Clinical genomics Lab. Send STAT same day

Requisition: CD0046 and IWK Oncology Cytogenetic Karyotype Requisition obtained from https://iwkhealth.ca/health-professionals/clinical-genomics

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Division: Hematopathology-Microscopy

QEII patients for this procedure must be booked with Hematopathology at 902-473-6667. Instructions:

Complete specimen type and date and time specimen collected on IWK requisition.

Bordetella Pertussis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

LIS Mnemonic: RO BORD

Division:

Division:

Division:

Borrelia Antibodies see Lyme Antibodies

Division: Virology-Immunology

Borrelia-Lyme see Lyme Antibodies

BR see CA 15-3

Virology-Immunology

Molecular Diagnostics

Molecular Diagnostics

Division: Clinical Chemistry - Core

see Next Generation Sequencing – Solid Tumor panel BRAF

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

Breast Cancer Marker see CA 15-3

Division: Clinical Chemistry - Core

Brucella Abortus Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

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

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LIS	Mnemonic:	RO BRUC

BUN see Urea, Plasma

Division: Clinical Chemistry - Core

see Cyclosporine C0

Division: Clinical Chemistry - Toxicology

C1 Esterase Inhibitor see C1 Inactivator

Division: Clinical Chemistry - Immunology

C1 Esterase Inhibitor "Functional"

Tube/Specimen: Light blue topped Sodium Citrate tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Separate plasma. Freeze at once.

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

Send copy of requisition.

LIS Mnemonic: C1ESTF

C1 Inactivator

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

Requisition: CD0002

Division: Clinical Chemistry - Immunology

Ensure the specimen is allowed to clot for 30 minutes before centrifuging and removing the serum. Double centrifugation (after serum has Shipping:

been removed from plain red topped tube) is required to prevent red blood cells being present in the specimen. Two aliquot vials should be

frozen and sent on dry ice.

C1 Esterase Inhibitor Alternate Names:

C1Q Complement Component

Tube/Specimen: Lavender topped K2EDTA tube.

Referred Out: In-Common Laboratories

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

Aliquot platelet-poor plasma.

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

Send copy of requisition.

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

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I	JS	Mnemonic:	C10L

C2 see Cyclosporine

Division: Clinical Chemistry - Toxicology

C282Y see Hemochromatosis

Division: Molecular Diagnostics

C3 C4 see Complement Serum (C3 C4)

Division: Clinical Chemistry - Core

CA see Calcium, Plasma

Division: Clinical Chemistry – Core

CA125

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send 1.0 mL frozen serum.

Alternate Names: Ovarian Cancer Antigen

LIS Mnemonic: CA 125

CA15-3

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Breast Cancer Marker

BR

LIS Mnemonic: CA 15-3

CA 19-9 Level

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

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Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: CA 19-9 Level

Cadmium Level Whole Blood

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

In-Common Laboratories Referred Out:

Instructions: Do Not Centrifuge!

Refrigerate until shipping.

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

Send copy of requisition.

LIS Mnemonic: CAD WB

Cadmium, Random Urine or 24-Hour Urine

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

container.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 15 mL urine aliquot from a well-mixed collection.

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

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Send copy of requisition.

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

LIS Mnemonic: U CAD 24

U CAD

Caffeine Level

Tube/Specimen: Plain red topped tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL (minimum 0.5 mL) of serum into plastic vial. Do not accession for non-Nova Scotia Health Central Zone Hospitals

Ship refrigerated Send copy of requisition.

LIS Mnemonic: Caffeine Level

CAFQ

Calcitonin

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Tube/Specimen: 4.0 mL Gold SST (BD#367977) on ice.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimens for this determination should be collected in chilled tubes, kept on ice and delivered immediately to Laboratory Client Support

Centre, 1st floor Mackenzie.

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

Stability: Frozen: 60 days

Alternate Names: Thyrocalcitonin

LIS Mnemonic: CALCIT

Calcium, Ionized

see Ionized Calcium, Plasma

Division: Clinical Chemistry - Core

Calcium, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: CA

LIS Mnemonic: CA

Calcium, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL aliquot of pH adjusted and well-mixed collection.

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

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Refer to Appendix A for pH adjustment instructions.

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

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

LIS Mnemonic: U24 CA

U CA

Calculus Analysis

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

Referred Out: In-Common Laboratories

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

Ship at room temperature.

LIS Mnemonic: STONE

California Encephalitis

see ARBO Virus

Division: Virology-Immunology

Calprotectin, Fecal

Tube/Specimen: Collect 10 g of feces/stool in plain screw-capped plastic container. Do not add preservative.

Referred Out: IWK: Central Zone area only

In-Common Laboratories: non-Nova Scotia Health Central Zone Hospitals

Instructions: Freeze specimen.

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

Send copy of requisition.

Molecular Diagnostics

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

ICL specimens: 5 days refrigerated; 1 month frozen.

LIS Mnemonic: CALP F

see Next Generation Sequencing - Myeloid panel

CALR (Calreticulin) Mutation

see Cyclic AMP Urine and Serum cAMP

Referred Out: Mayo Medical Laboratories

Cancer Associated Retinopathy Panel (CARP)

see Anti-Retinal Autoantibody

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Division:

Referred Out: Mayo Medical Laboratories

Carbamazepine-10, 11 Epoxide (Do not confuse with Carbamazepine)

Collect one plain red topped tube Tube/Specimen:

Referred Out: In-Common Laboratories

Must indicate "Epoxide" on the requisition. Instructions:

Aliquot 2.0 mL serum. Freeze.

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

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Uncontrolled When Printed



	Send copy of requisition.		
LIS Mnemonic:	CARBEP		
Carbamazepir	ne		
Tube/Specimen:	Plain Red Tube 6 or 10 mL		
Requisition:	CD0002		
Division:	Clinical Chemistry - Core		
Comments:	Blood should be collected just prior to the next dose (trough collection). Specimens should not be collected until the blood concentration is steady state (3-4 half-lives).		
Note:	These determinations can be done on micro specimens. Send at least 0.2 mL of serum.		
Alternate Names:	Tegretol		
LIS Mnemonic:	CARB		
Carbon Dioxid	le, Plasma	see Bicarbonate, Plasma	
Division:	Clinical Chemistry - Core		
Carbon Mono	xide		
Tube/Specimen:	Dark green stoppered, lithium heparinized venous whole blood at Room Temperature . Maximum heparin ratio must be <10 IU/mL blood Recommended volume: Full tube		
Requisition:	CD3211_05 - 2022		
Division:	Clinical Chemistry - Core		
Comments:	Label tube with patient information in waterproof ink. Place labelled requisition and tube in transport bag (NOT ON ICE) and deliver to Processing Area immediately.		
Alternate Names:	Carboxyhemoglobin COHb		
LIS Mnemonic:	СОНВ		
Carboxyhemoglobin		see Carbon Monoxide	
Division:	Clinical Chemistry - Core		
Carcinoembry		see CEA	
Division:	Clinical Chemistry – Core		
Cardiac Enzymes		see CK, Plasma or Lactic Dehydrogenase, Serum	

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Division:

PLM Laboratory Test Catalogue

Cardio Ab see Anti-Cardiolipin Ab

Division: Immunopathology

Cardiolipin Antibodies see Anti-Cardiolipin Ab

Carnitine Free and Total

Tube/Specimen: Collect one 4.0 mL Gold SST (BD#367977) or plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Immunopathology

Aliquot 1.0 mL serum into plastic vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: CARN F T

Carotene (Beta-Carotene) (β-Carotene)

Tube/Specimen: Collect two 4.0 mL Gold SST (BD#367977). Wrap in foil to protect from light!

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 4.0 mL serum into plastic vial. Wrap aliquot in foil to protect from light. Freeze at once.

Send copy of requisition.

LIS Mnemonic: Carotene

Catecholamines, Total Plasma

Tube/Specimen: Collect two lavender topped EDTA tubes and place on ice.

Abstaining from tobacco use, drinking caffeinated beverages, and eating for at least 4 hours before the specimen is drawn are recommended

by the testing site for best results, however, are not required.

Referred Out: In-Common Laboratories

Instructions: Specimen must be centrifuged cold (4°C) and frozen within 1 hour of collection.

Aliquot minimum 5.0 mL of plasma into plastic vial. **Freeze.** Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

Stability: -20°C for 7 days and -70°C for 6 months.

Room temperature and refrigerated are not acceptable.

LIS Mnemonic: Cats Plasma

Catecholamine, 24-Hour Urine

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

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Referred Out: In-Common Laboratories

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

prior to collection.

Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate. Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.

Refer to Appendix A for pH adjustment instructions.

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

Urinary Catecholamines Alternate Names:

LIS Mnemonic: U24 CATS

CBC see Profile, AutoDiff

Division: Hematopathology - Core

CBF beta-MYH11 gene fusion see Inversion 16

Division: Molecular Diagnostics

CCP see Anti-Cyclic Citrullinated Peptide

Division: Immunopathology

Division:

Division:

Division:

CD4 Cells, CD4 Cell Marker see T Cell Subsets

Hematopathology- Flow Cytometry

CD19 TESTING see B Cell Counts

Hematopathology- Flow Cytometry

CD34 TESTING see Stem Cell Enumeration

Hematopathology- HLA

CD55/59 TESTING see Paroxysmal Nocturnal Hemoglobinuria

Hematopathology - Flow Cytometry Division:

CEA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

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Alternate Names: Carcinoembryonic Antigen

LIS Mnemonic: CEA

CEA and Amylase, Pancreatic Cyst Fluid

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

Requisition:

Clinical Chemistry - Core Division:

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

Stability: 72 hours refrigerated

LIS Mnemonic: PCF CEA and AMY

PCF AMY and CEA

Celiac Screen/Disease see Anti-Tissue Transglutaminase

Division: Immunopathology

see Mycophenolate CellCept

Hematopathology-Flow Cytometry

Clinical Chemistry - Core

Division: Clinical Chemistry - Toxicology

Cell-free DNA see Circulating Tumor DNA

Division: Molecular Diagnostics

Cell Surface Markers see Leukemia and Lymphoma Screening

Celontin see Methotrexate

Cerebrospinal Fluid

Division:

Division:

Tube/Specimen: Sterile plastic screw-top tubes

Requisition: QE 7850_12_05

Division: Hematopathology - Core

Testing of CSF is conducted in various laboratory disciplines making it desirable for each laboratory to have a separate specimen. Therefore, Instructions:

at least three (3) tubes should be collected. The tubes must be clearly numbered in order of collection. All specimens are sent to the

Hematopathology - Core lab.

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Specimens from Patients who are suspect or clinically diagnosed with CJD must follow Nova Scotia Health Central Zone Policy and

Procedure # IC 09-003.

Shipping: If quantities are not met, it may not be possible to provide the requested test results.

Amounts Required:

Lumbar Puncture or Drain Lumbar Puncture- Microbiology: 1.5 mL; Clinical Chemistry - Core: 1.0 mL; Hematopathology - Core: 1.0 mL;

Cytology: 1.0 mL

Ceruloplasmin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: CERULO

CH50 see Complement CH50

Referred Out: In-Common Laboratories

CHIC-2 see Hypereosinophilic Syndrome

Referred Out: Mayo Cytogenetics Laboratory

Chicken Pox Titre

see Varicella Zoster Immune Status

Division: Virology-Immunology

Chikungunya Virus

Division:

irus see ARBO Virus

Chimerism Analysis for BMT

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

Virology-Immunology

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

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Alternate Names: Pre-BMT Donor

Pre-BMT Recipient

Post-BMT

Post-BMT Recipient

STR

Short Tandem Repeats

VNTR

Variable Number Tandem Repeats

LIS Mnemonic: 2LAVDNA

Chlamydia PCR, Swab

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

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

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

LIS Mnemonic: CTGC

Chlamydia PCR, Urine

Requisition: CD0432/ CD0433

Division: Virology-Immunology

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

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

Shipping:

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

transport.

LIS Mnemonic: CTGC

Chloride, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

vaginal swab due to the decreased sensitivity of female urine.

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: C1-

LIS Mnemonic: CL

Chloride, Stool see Fecal Chloride

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Referred Out: In-Common Laboratories

Chloride, Random Urine or 24-Hour Urine

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

container

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

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

Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.

Comments: No reference ranges are provided for random urine.

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

LIS Mnemonic: U24 CL

U CL

Cholesterol, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Cholesterol Screen

Lipid Profile Lipid Screen Lipid Testing

LIS Mnemonic: CHOL

Cholesterol Crystals

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF CHOLCRY

Cholesterol Screen see Cholesterol, Plasma

Division: Clinical Chemistry - Core

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Cholesterol, HDL see HDL-Cholesterol, Plasma

Division: Clinical Chemistry - Core

Cholesterol, LDL see LDL-Cholesterol, Plasma

Division: Clinical Chemistry – Core

Cholinesterase see Acetylcholinesterase, Plasma

Division: Clinical Chemistry – Core

Cholinesterase Phenotyping (CHE Phenotyping)

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

Referred Out: In-Common Laboratories

Instructions: <u>Plasma not acceptable</u>.

Centrifuge at room temperature.

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

Send copy of requisition.

LIS Mnemonic: CHE Pheno

Chorionic Gonadotropin Beta- Subunit see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

Immunopathology

Chrithidia Lucillae see Anti-Nuclear AB (ANA)

Chromium 24 Hour Urine

Division:

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

Avoid seafood consumption for five days prior to collection.

Referred Out: In-Common Laboratories

Instructions: Record total volume.

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

Aliquot 13.0 mL of 24 hour urine collection into a transport tube.

Ship at room temperature.

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

Send copy of requisition.

LIS Mnemonic: Miscellaneous Referred-Out

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Chromium, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge within 30 minutes of collection.

Aliquot plasma into plastic transfer vial. Store and ship frozen.

Results may be falsely elevated if specimen is not separated within 30 minutes of collection and/or hemolysis is present.

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

Send copy of requisition.

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

arthroplasty.

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

LIS Mnemonic:

Chromium, Random Urine

Tube/Specimen: Collect a random urine specimen and transfer to a metal-free container. Provide collection date. Indicate "Random". Avoid seafood

consumption for five days prior to collection.

Referred Out: In-Common Laboratories

Instructions: Store and send cold.

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

Send copy of requisition.

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

LIS Mnemonic: **CRRU**

Chromium, Whole Blood

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

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

years to assess the function of implants and monitor potential adverse health effects.

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

LIS Mnemonic: CR WB

Chromogenic Factor IX

see Factor Assay Chromogenic IX

Referred Out: MAYO Medical Laboratories

Chromogranin A

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Tube/Specimen: One lavender topped EDTA tube

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 1.0 mL plasma into a plastic vial and freeze

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

Send copy of requisition.

Stability: Frozen 6 months. If the specimen thaws, it is unsuitable for analysis.

LIS Mnemonic: CGA

Chromosomal Analysis

Tube/Specimen: 4.0 mL Dark green sodium heparin (BD#367871) or 6.0 mL Dark green sodium heparin (BD#367878)

Referred out: IWK Clinical Genomics Lab

Requisition: IWK Constitutional Cytogenetic Karyotype Requisition (available at https://iwkhealth.ca/health-professionals/clinical-genomics)

Instructions: Other specimen types possible see requisition or https://iwkhealth.ca/health-professionals/clinical-genomics for more details.

Chromosome Translocation t (11; 14) see bcl-1 Gene fusion

Division: Molecular Diagnostics

Chromosome Translocation t (14; 18) see bcl-2 Gene fusion

Division: Molecular Diagnostics

Chylomicrons, Body Fluid (Pleural Fluid or Peritoneal Fluid)

Tube/Specimen: Minimum 1.0 mL Body Fluid collected in sterile plastic screw top tubes

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Send to the VG lab ASAP. Specimen is stable for 24 hours at room temperature and 7 days refrigerated.

LIS Mnemonic: BF CHYLO

Chylomicrons, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation or gold or red topped serum tubes

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Send to the VG lab. Specimen is stable for 24 hours at room temperature and 7 days refrigerated.

LIS Mnemonic: CHYLO P

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Circulating Tumor DNA

10 mL Streck Cell-Free DNA BCT black and brown stoppered tube. Tube/Specimen:

Peripheral blood: 2 tubes, minimum volume 7 mL. Stability – 14 days at room temperature or 4°C.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

To be ordered only by an oncologist. The patient's sensitizing mutation must be written on the requisition. Blood must be kept at room Instructions:

temperature or at 4°C, accompanied by requisition.

Alternate Names: ctDNA

ctEGFR T790M Liquid biopsy Cell-free DNA

LIS Mnemonic: DNA ct

Citrate, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container.

CD0002 Requisition:

Division: Clinical Chemistry - Core

Specimen required: 4 mL urine aliquot from well-mixed collection. Instructions:

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

Patient must follow special diet provided by the Stone Clinic.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Stability: Room temperature 6 hours, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

Alternate Names: Citric Acid

LIS Mnemonic: U24 CIT

U CIT R [IWK specimens only]

Citrate for Platelet

see Profile, AutoDiff with Citrate for Platelet

Division: Hematopathology - Core

see Citrate, Urine

Citric Acid

Clinical Chemistry - Core

CK, Plasma

Division:

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

Requisition: CD0002

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Division: Clinical Chemistry – Core

Alternate Names: Creatine Kinase

CPK

LIS Mnemonic: CK

CK isoenzymes (CKMB)

see Troponin T-HS (High Sensitivity), Plasma

CK Isoenzymes (CKMB) testing is no longer offered at NSH Central Zone. Please refer to Troponin T-HS (High Sensitivity), Plasma as a surrogate.

CL see Chloride, Plasma

Division: Clinical Chemistry - Core

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

Tube/Specimen: Isolate for identification/typing

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Category B

CLL hypermutation

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

CLL MLPA

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube(s) and one 7.0 mL Lithium Heparin Dark green stoppered tube

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 24 hours at 4°C

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 24 hours at 4°C

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

LIS Mnemonic: MLPA

Clobazam and Metabolite

Tube/Specimen: Plain Red Tube 6 or 10 mL (avoid gel separator tubes)

Referred Out: In-Common Laboratories

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Instructions: Blood should be collected just prior to the next dose (trough collection). Centrifuge at room temperature. Aliquot 1.0 mL serum.

Alternate Names: Frisium

Desmethylclobazam Norclobazam

LIS Mnemonic: CLOB

Clomipramine Level

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

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic: CLOMI

Clonazepam (Clonazepine)

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 3.0 mL of serum into plastic vial.

Freeze immediately.

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

Send copy of requisition.

LIS Mnemonic: CLONAZ

Clostridium difficile

Tube/Specimen: Stool collected in plain sterile container.

Requisition: CD0432/CD0433

Division: Virology-Immunology

Instructions: Formed specimens not acceptable.

Comments: C diff antigen test done as a screen; PCR toxin B test used for confirmation. Non-central zone specimens get PCR testing

only.

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

LIS Mnemonic: C DIFF AG

E CDIFF

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Clozapine (Clozaril)

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

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

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

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

Alternate Names: Clozaril

Desmethylclozapine Norclozapine

LIS Mnemonic: CLOZ

CMV Antibody Screen

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

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

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

Alternate Names: Cytomegalovirus Antibody Screen

LIS Mnemonic: CMV (IgG)

CMVM (IgM)

CMV Antigen see CMV PCR

Division: Virology-Immunology

CMV Avidity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

(ie.pregnancy) on the requisition.

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

LIS Mnemonic: RO ROSER

CMV Blood Culture see CMV PCR

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Division: Virology-Immunology

CMV PCR

Tube/Specimen: One 4.0 mL Lavender (EDTA) tube

Requisition: CD0002

Division: Virology-Immunology

Instructions: Store whole blood at 2 to 25°C for no longer than 24 hours. Separate plasma by centrifuging at 3000g for 20 minutes. Separated plasma

should be shipped at 2 to 8°C within 7 days.

Alternate Names: Cytomegalovirus Viral Load

CMV Antigen

LIS Mnemonic: CMVPCR

CMV PCR (Non-blood)

Tube/Specimen: Urine collected in dry sterile container /Bronchial wash.

Requisition: CD0432/CD0433

Division: Virology-Immunology

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

Alternate name: Cytomegalovirus PCR

LIS Mnemonic: E CMV

CMV Titre see CMV Antibody Screen

Division: Virology-Immunology

CO2, Plasma see Bicarbonate, plasma

Coagulation Factor Assays

Division:

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

Requisition: CD0002

Division: Hematopathology - Coagulation

Comments: The Factors required must be indicated on the requisition.

Clinical Chemistry - Core

Note: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under

Specimen Collection Information) in polypropylene vials (12x75). Send on dry ice.

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

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Cobalt, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge as soon as possible.

Aliquot plasma into plastic transfer vial. Freeze.

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

Send copy of requisition.

Utilization: Whole blood is the preferred specimen for monitoring following orthopedic arthroplasty.

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

LIS Mnemonic: COBP

Cobalt, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions: Do Not Centrifuge!

Do not freeze. Ship refrigerated.

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

Send copy of requisition.

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

years to assess the function of implants and to monitor potential adverse health effects.

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

LIS Mnemonic: COB WB

Coccidioidomycosis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO COCCIDIO

COHb see Carbon Monoxide

Division: Clinical Chemistry - Core

Division: Transfusion Medicine

Cold Agglutinin Test

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see Cold Agglutinin Titre



Cold Agglutinin Titre

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

CD0001_05_2019 Requisition:

Division: Transfusion Medicine

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

If specimen cannot arrive in the laboratory at 37°C then spin and separate serum or plasma before sending.

Serum or plasma must be separated within 24 hours.

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

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

Complement Serum (C3 and C4)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: Indicate on requisition, which Complement is requested.

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

C3 C4 Alternate Names:

LIS Mnemonic:

Complement C3 C3 Complement

Complement C4 C4 Complement Complement C3C4

Complement C3C4

Complement CH50

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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

Send copy of requisition.

Note: Plasma is NOT suitable for analysis.

LIS Mnemonic: CH50

Compound "S"

see 11-Deoxycortisol

Referred Out: In-Common Laboratories

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Coombs Test see Direct Antiglobulin Test or Indirect

Division: Transfusion Medicine

see Blood Gases **Co-Oximetry**

Division: Clinical Chemistry - Core

Copeptin

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

Referred Out: In-Common Laboratories

Centrifuge. Instructions:

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

Send copy of requisition.

LIS Mnemonic: Copeptin

Copper, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge ASAP.

> Aliquot approximately 3.0 mL plasma into a plastic transfer vial. Freeze. Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

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

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

CUP LIS Mnemonic:

Copper, Random Urine or 24-Hour Urine

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

Referred Out: In-Common Laboratories

Instructions: Specimen required: 13 mL urine aliquot from well-mixed collection.

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

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Avoid mineral supplements for 5 days.

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

Send copy of requisition.

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

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

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LIS Mnemonic: CU U 24

CU U

Copper, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions: **Do Not Centrifuge**.

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

Send copy of requisition.

Utilization: Whole blood copper is used for toxicity.

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

LIS Mnemonic: CU WB

Coproporphyrin, 24 Hour Urine

see Porphyrin Screen, 24 Hour Urine

Referred Out: In-Common Laboratories

Cortisol, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

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

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

LIS Mnemonic: U24 CORT

Cortisol, Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

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

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

LIS Mnemonic: CORT

CORT (DST) [post Dexamethasone Suppression Test only]

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Coxiella Burnetii see Q-Fever

Division: Microbiology-Immunology

C-Peptide

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

Instructions: Patients must be fasting for 8 hours prior to collection.

Centrifuge specimen within 90 minutes of collection. Serum needs to be separated from gel separator within maximum 8 hours of collection.

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

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

LIS Mnemonic:

CPK see CK, Plasma

Division: Clinical Chemistry - Core

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

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

CRP Alternate Names:

High Sensitive CRP

CRP LIS Mnemonic:

Creatine Kinase see CK, Plasma

Division: Clinical Chemistry - Core

Creatinine Clearance, 24-Hour Urine or Timed Urine

Tube/Specimen: Submit both plasma and urine specimens (no preservative) as follows:

Plasma: Collect blood in Light Green 4.5 mL Lithium heparin and gel for plasma separation within +/- 12 hours of a 24-hour urine collection.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Plasma specimen must be collected within 12 hours pre or post 24-hour urine collection.

Specimen required: 4 mL urine aliquot from well-mixed collection.

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

Record the duration of collection in hours (ex: 24 or 2 hour) on both the urine aliquot and the requisition.

Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.

Indicate on requisition patient height (centimeters) and weight (kilograms).

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

LIS Mnemonic: U24 CRCL (SI Units)

U CRCL T (SI Units) (Timed specimen only)

Creatinine, Fluids

Tube/Specimen: Submit only one of the following specimens:

Dialysate Fluid: 10.0 mL Dialysate Fluid collected in sterile plastic screw top tubes. Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: DF CREAT

BF CREAT

Creatinine, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: CREAT

Creatinine, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

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

Record Total Volume of 24-hour urine on both the aliquot and the requisition.

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

LIS Mnemonic: U24 CREAT U CREAT

Creutzfeldt-Jakob Disease

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Tube/Specimen: CSF minimum 1.0 mL

Requisition: CD0432/ CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO PRION

Crithidia Lucillae see Anti-ds DNA

Division: Immunopathology

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

Division: Transfusion Medicine

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

Division: Clinical Chemistry - Core

Cryofibrinogen

Tube/Specimen: One 10.0 mL plain red topped tube at 37°C and two lavender topped EDTA tubes at 37°C.

Referred Out: Hamilton General Hospital

Instructions: Send to Esoteric Immunology Lab for processing.

Keep specimens at 37°C during transport.

LIS Mnemonic: MISC HEM

Cryoglobulins at 37°C

Tube/Specimen: 4 Plain Red Tubes (6 mL) or 2 Plain Red tubes (10 mL) collected at 37°C

Requisition: CD0002

Division: Clinical Chemistry – Immunology

Note: This test requires special handling hence is not offered at ESMH or MVMH. Please advise the patient to proceed to TOMH.

Instructions: Collect in pre-warmed tubes kept at 37°C. Maintain at 37°C throughout the procedure and transportation to the laboratory.

Specimen stability at 37°C is a maximum of 4 hours from collection to centrifugation. If transport is greater than 4 hours, tubes should optimally be centrifuged at 37°C, double spun to remove any red cells, and separated within 4 hours. Once separated, transport serum in

plastic aliquot tubes at room temperature. Minimum 6mL serum is required.

Cryptococcal Antigen

Tube/Specimen: Cerebrospinal Fluid (CSF) is the preferred specimen.

 $Serum\ separated\ from\ blood\ collected\ in\ a\ 4.0\ mL\ Gold\ SST\ (BD\#367977)\ tube\ is\ an\ acceptable\ alternate\ specimen.$

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Requisition: QE 7125

Division: Microbiology

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

see Lactate, Spinal Fluid

procedures.

CSF Lactate

IWK Laboratory

C-Telopeptide (CTX)

Referred Out:

Tube/Specimen: Lavender topped EDTA tube.

Patient must be fasting for 8 hours! Unknown or Not Fasting status will not be processed.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of plasma into a plastic vial. **Freeze** at once.

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

Send copy of requisition.

LIS Mnemonic: CTELO

ctDNA see Circulating Tumor DNA

Division: Molecular Diagnostics

ctEGFR see Circulating Tumor DNA

Division: Molecular Diagnostics

Culture & Sensitivity see Blood Cultures

Division: Microbiology

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

CYA see Cyclosporine

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Clinical Chemistry - Toxicology

Cyanide

Division:

(Do not confuse with Thiocyanate)

Tube/Specimen: 4.0 mL lavender topped EDTA tube.

Referred Out: In-Common Laboratories

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Instructions: Do Not Centrifuge!

Do Not Freeze! Keep refrigerated. Send specimen in original collection tube.

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

Send copy of requisition.

LIS Mnemonic: CYAN

Cyclic AMP Urine and Serum

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

4.0 mL Gold SST (BD#367977) and random urine specimen.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge gold topped tube at room temperature.

Aliquot 1.0 mL serum into a plastic vial.

Aliquot 13.0 mL of urine.

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

Send copy of requisition.

LIS Mnemonic: cAMP

Cyclic-Citrullinated Peptide

see Anti-Cyclic Citrullinated Peptide

Division: Immunopathology

Cyclin-D1

see BCL1-IGH gene fusion

Division: Molecular Diagnostics

Cyclosporine

Tube/Specimen:



2.0 mL Lavender (EDTA)

Requisition:

CD0002

Division:

Clinical Chemistry - Toxicology

Instructions:

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

Cyclosporine can be ordered as C0 (trough, pre-dose) or C2 (peak, 2 hour post-dose).

Shipping:

Mix whole blood, transfer whole blood to a plastic tube. Freeze and send on dry ice.

Alternate Names:

Neoral

Sandimmune IV

CYA

Cyclosporine A C0 (Trough) C2 (Peak)

LIS Mnemonic:

CYA

C0 hr (Trough) C2 hr (Peak)

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Cyclosporine A see Cyclosporine

Division: Clinical Chemistry - Toxicology

Cystatin C

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 1.0 mL serum into a plastic vial. Freeze at once.

Send copy of requisition.

Note: Recollect if specimen thaws.

LIS Mnemonic: CYSTC

Cysticercosis

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ROSER

Cystine, Random Urine or 24-Hour Urine

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

Referred Out: IWK Metabolic Lab

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

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

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to the IWK Metabolic Lab

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

LIS Mnemonic: U CYSTI

Referred Out:

U CYSTI 24

see IWK Cytogenetics Testing

Cytogenetic Testing for IWK

IWK Cytogenetics Lab

Cytomegalovirus Antibody see CMV Antibody Screen

Division: Virology-Immunology

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Cytomegalov	virus IgM	see CMV Antibody Screen
Division:	Virology-Immunology	
	virus Viral Load	see CMV PCR
Division:	Virology-Immunology	
Cytotoxic Aı		see HLA Antibody Testing
Division:	Hematopathology - Histocompatib	pility (HLA)
DADE		see PTT Dade
Division:	Hematopathology - Coagulation	
DAT		see Direct Antiglobulin Test
Division:	Transfusion Medicine	
D-Dimer		
Tube/Specimen:		odium citrate. Must be a full draw.
Requisition:	CD0002	
Division:	Hematopathology - Core	
Instructions:	Part of DIC screen	
Referrals:	Send 2 frozen aliquots of 1.0 mL privials (12x75).	platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylen
Deaminated	gliadin peptide IgG or IgA	see Anti-Tissue Transglutaminase
Division:	Immunopathology	
Dehydroepia	androsterone	see DHEA-S
Division:	Clinical Chemistry - Core	
	 rostenedione	see Androstenedione
Division:	Clinical Chemistry - Core	
Dengue Viru		see ARBO Virus
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Referred Out:

Referred Out:

PLM Laboratory Test Catalogue

Division:	Virology-Immunol	ogy
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Depakene see Valproate

Division: Clinical Chemistry - Core

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Desethylamiodarone see Amiodarone Level

Referred Out: In-Common Laboratories

In-Common Laboratories

In-Common Laboratories

Desipramine see Imipramine Level

Desmethylclomipramine see Clomipramine Level

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Desmethyldoxepin see Doxepin Level

Referred Out: In-Common Laboratories

Dexamethasone Suppression Test (DST) see Cortisol, Serum

Division: Clinical Chemistry - Core

DHEA-Unconjugated

 $(Dehydroepiand roster one\ unconjugated)$

Tube/Specimen: Plain red topped tube or 4.0 mL Gold SST (BD#367977)

Centrifuge at room temperature.

Referred Out: Mayo Medical Laboratories

Aliquot 1.0 mL of serum into plastic vial. **Freeze** at once.

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

Send copy of requisition.

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

LIS Mnemonic: DHEA UNCON

DHEA-S

Instructions:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

Alternate Names: Dehydroepiandrosterone Sulphate

LIS Mnemonic: DHEAS

Diabetes Mellitus Type 1 Panel

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

Centrifuge 2 gold SST tubes at room temperature. **Instructions:**

Aliquot serum from both tubes into one plastic vial (minimum 2.0 mL, prefer 4.0 mL).

Do not accession for clients out of Nova Scotia Health Central Zone

Send copy of requisition.

Stability: Ambient 72 hours, Refrigerated (preferred) 28 days, Frozen 28 days.

This panel includes four tests: Glutamic Acid Decarboxylase Antibody (GAD65 Ab), Insulin Antibodies, Islet Antigen 2 Antibody (IA-2 Ab)

and Zinc Transporter 8 Antibody (ZnT8 Abs).

LIS Mnemonic: DBS1

Dialysate Fluid see specific test for instructions.

Division: Clinical Chemistry - Core

Diastase see Amylase

Division: Clinical Chemistry - Core

DIC Screen

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

Division: Hematopathology - Core

Differential WBC Count see Profile

Hematopathology - Microscopy

Division: Hematopathology - Core

Differential, Manual see Blood Film, Differential, Manual

Digoxin

Division:

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

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Division: Clinical Chemistry - Core

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

LIS Mnemonic: DIG

Dihydrohodamine

(DHR)

Tube/Specimen: 5.0 mL green topped Sodium Heparin AND 5.0 mL green topped Sodium Heparin for a CONTROL from an unrelated healthy donor. Label

the CONTROL as "Normal Control".

Referred Out: Mayo Medical Laboratories

Instructions: **Do Not Centrifuge!**

Keep specimens ambient.

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

Send copy of requisition.

Stability: 48 hours

LIS Mnemonic: MISC REF

Dihydrotestosterone

(DHT)

Tube/Specimen: 4.0 mL Gold SST (BD#367977) preferred. Lavender topped EDTA tube, Sodium heparin tube and Lithium heparin tubes acceptable.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum or plasma into plastic vial.

Send copy of requisition.

In-Common Laboratories

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

LIS Mnemonic: DHT

Dilantin see Phenytoin

Division: Clinical Chemistry - Core

Diphenylhydantoin see Phenytoin, Free

Diphtheria Antitoxin

Referred Out:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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nstructions: Clinical data should be indicated on the requisition	n.
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Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO DIPHTH

Direct Antiglobulin Test

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

Requisition: CD0001_05_2019

Division: Transfusion Medicine

Instructions: Indicate on requisition date and time required.

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

Alternate Names: DAT

Coombs Test

Direct Bilirubin see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

DLI see Donor Lymphocyte Infusion

Division: Hematopathology - Flow Cytometry

DNA Testing for IWK see IWK Molecular Testing

Referred Out: IWK Clinical Genomics Lab

Donor Lymphocyte Infusion

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002C

Division: Hematopathology - Flow Cytometry

Instructions: Specimens must arrive in the Flow Cytometry lab within 24 hours of collection and by 14:00 hours on Friday (or the day before a holiday).

The volume of product collected is required on the requisition.

The requisition must accompany the specimen to the Flow laboratory.

Shipping: Maintain specimen at room temperature.

In-Common Laboratories

LIS Mnemonic: T CELL SUB

Division:

Dopamine, Urine see Catecholamines, 24 Hour Urine

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Doxepin Level

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into plastic vial. Freeze.

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

Send copy of requisition.

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

LIS Mnemonic: DOX

Drug Levels

(Micro Mycobacteriology)

Tube/Specimen: Plain red topped

Referred Out: Infectious Disease Pharmacokinetics Laboratory

Instructions: Ship as Category B

Drugs of Abuse Screen, Random Urine

Tube/Specimen: Random collection using mid-stream technique to avoid bacterial contamination in a plain container.

Requisition: CD0002

Division: Clinical Chemistry – Toxicology

Instructions: Specimen required: 30 mL urine aliquot from well-mixed collection.

Comments: Testing includes amphetamines, benzodiazepines, quetiapine, cannabinoids, cocaine metabolite, opiates, phencyclidine, and ritalin.

This test is done for medical purposes only; it will not be done for pre-employment, work related or legal matters.

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

LIS Mnemonic: U DS M

D'Xylose Tolerance Test

Division:

Note: D'Xylose Tolerance test is no longer offered at NSH Central Zone.

E+ see Electrolytes (Na, K), Plasma

Clinical Chemistry - Core

E2 see Estradiol

Division: Clinical Chemistry - Core

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Eastern Equine Encephalitis

see ARBO Virus

Division: Virology-Immunology

EB Virus see Epstein - Barr Virus Antibodies

Division: Virology-Immunology

EBV PCR

Tube/Specimen: One 4.0 mL Lavender (EDTA) tube.

Requisition: CD0002

Division: Virology-Immunology

Instructions: Store whole blood at 2°C to 25°C for no longer than 24 hours.

Separate plasma by centrifuging at 3000g for 20 minutes.

Separated plasma should be shipped at 2°C to 8°C within 6 days, if longer freeze at -20°C and ship frozen.

Note: This test is reserved for post-transplant patients and those with hematological malignancies only upon request.

For infectious mononucleosis testing or pre-transplant EBNA testing refer to Epstein – Barr Virus section below.

Alternate Names: EBV Viral Load

Epstein Barr Virus Viral Load Epstein Barr Virus PCR

_p.....

EBVPCR

Echinococcosis

LIS Mnemonic:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: QE 7125

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ECHINO

eGFR, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Age and gender must be included.

Note: eGFR should not be used when plasma creatinine is changing rapidly, in pregnancy, age less than 18, or for drug dosing; and should be

interpreted with caution in extremes of body habitus eGFR <60 mL/min/1.73mE2 and/or Albumin to Creatinine Ratio (ACR) ≥ 3 mg/mmol for

>3 months are diagnostic criterion for Chronic Kidney Disease (CKD).

For more information, refer to the latest Kidney Disease: Improving Global Outcomes (KDIGO) guidelines.

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Reported eGFR is based on the CKD-EPI 2021 equation that does not use a race coefficient.

Alternate Names: Estimated Glomerular Filtration Rate

LIS Mnemonic: eGFR

Ehrlichia see Hem Microorganism

Division: Hematopathology-Microscopy

Ehrlichia PCR

Tube/Specimen: 4.0 mL Lavender topped EDTA tube

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO EHRPCR

Ehrlichia Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO EHRSER

Elastase, Stool see Fecal Elastase

Referred Out: In-Common Laboratories

Electrolytes (Na, K), Plasma

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

Requisition: CD0002

Division: Clinical Chemistry – Core

Comments: Specimens must be delivered to the laboratory within 2 hours of collection. Testing for Electrolytes include Sodium (Na), Potassium (K).

Shipping: Separate plasma within 2 hours of collection.

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Lytes

LIS Mnemonic: LYTES (NA, K)

Electrolytes, Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Amount required: 5 mL urine aliquot from well-mixed collection.

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

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

Shipping: Transport at room temperature.

Record Total Volume on both the specimen aliquot and the requisition

LIS Mnemonic: U24 LYTES

U LYTES

Electrophoresis of Protein

see Protein Electrophoresis, Serum

Division: Clinical Chemistry - Immunology

Emerging Bacterial Pathogens/ Pathogenic Neisseria, Syphilis, and Vaccine Preventable Bacterial Diseases (Neisseria meningitides, Neisseria gonorrohoeae,

Haemophilus influenza, Bordetella)

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

Detection

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B

ENA Screen

see Anti-nuclear Antibody

Division: Immunopathology

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

Endomysial Antibody

see Tissue Transglutaminase

Division: Immunopathology

Enteric Diseases Program:

Escherichia coli 0157

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

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category A

Enteric Diseases Program: Listeria monocytogenes

Tube/Specimen: Isolate, Serotyping

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B.

Enteric Diseases Program:

Salmonella species

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

Referred Out: National Microbiology Laboratory

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

Enteric Diseases Program:

Shigella species

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

Referred Out: National Microbiology Laboratory

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

Enterohemorrhagic Ecoli requests

Referred Out: IWK-Microbiology Lab

Shipped as Biological Substance Category B. Instructions:

Enterovirus

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

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: CSF: IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens

require CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting

location by the microbiology laboratory.

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

CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen. Shipping:

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

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LIS Mnemonic: E BFME (CSF)

ROSER (Stool/throat/respiratory)

Eosinophil Count

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology - Core Alternate Names: Total Eosinophil Count

Eosinophil, Nasal Smear

Tube/Specimen: Nasal smear

Requisition: CD0002

Division: Hematopathology - Microscopy

Specimen is sent to Microbiology and prepared on slide; then sent to Microscopy to be stained and viewed. Instructions:

Eosinophil, Sputum

Tube/Specimen: Collect in polypropylene container with no preservative.

CD0002 Requisition:

Division: Hematopathology - Microscopy

Instructions: Specimen is sent to Microbiology and prepared on slide; then sent to Microscopy to be stained and viewed.

Eosinophil, Random Urine or 24-Hour Urine

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

Requisition: CD0002

Division: Hematopathology - Microscopy

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

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

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

LIS Mnemonic: Eo US

Epinephrine see Catecholamines, Total Plasma

Referred Out:

Epinephrine, Urine see Catecholamines, 24 Hour Urine

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Division:	In-Common Laboratories

Epival see Valproate

Division: Clinical Chemistry - Core

EPO see Erythropoietin

Division: Clinical Chemistry - Core

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

Epstein - Barr Virus

Referred Out:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

Comments: Clinical data should be indicated on the requisition.

In-Common Laboratories

Note: EBNA IgG testing will be performed on all EBV serology requests. VCA IgM and IgG testing will only be performed on EBNA negative

specimens.

LIS Mnemonic: EBNA

Erythropoietin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Since diurnal variation of erythropoietin exists, it is important to collect the specimens at a consistent time of day. Morning specimens taken

between 7:30 am and 12:00 noon have been recommended.

High circulating biotin levels may reduce results by more than 10% of the true value. Patients must discontinue any biotin supplement at least

3 days prior to testing.

Comments: EDTA tubes are unacceptable.

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

Alternate Names: EPO

LIS Mnemonic: EPO

ESR

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Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology - Core

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

Alternate Names: Sedimentation Rate

Estradiol

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: E2

17 Beta Estradiol

LIS Mnemonic: E2

Ethanol see Alcohol, Serum

Division: Clinical Chemistry - Core

Ethosuximide Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into plastic vial.

Send copy of requisition.

LIS Mnemonic: Ethosux

Ethyl Alcohol see Alcohol, Serum

Division: Clinical Chemistry - Core

Ethylene Glycol

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Comments: Analysis includes quantitation of Glycolic Acid, the primary metabolite of Ethylene Glycol.

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Alternate Names: Glycolic Acid

LIS Mnemonic: ETH GLY

ETOH see Alcohol, Serum

Division: Clinical Chemistry - Core

Extractable-Nuclear Antibodies see Anti-nuclear Antibody

Division: Immunopathology

F68KD (hsp-70)

Tube/Specimen: One 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 2.0 mL serum and freeze.

Send copy of requisition.

Stability: Ambient – 48 hours; Refrigerated – 5 days; Frozen – 1 year

LIS Mnemonic: F68KD

Facioscapulohumeral Dystrophy (FSHD) DNA Testing

Tube/Specimen: Two 10.0 mL Lavender topped EDTA tubes. <u>Do not collect on Thursday or Friday</u>

Referred Out: Molecular Genetics Diagnostic Laboratory

Instructions: Keep specimens at room temperature.

Send Children's Hospital of Eastern Ontario (CHEO) Form and Consent Form with specimens.

LIS Mnemonic: Miscellaneous Referred-Out

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

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

Multiple assays - 3 Light Blue Stoppered Tubes 2.7 mL, must be a full draw.

Requisition: CD0002

Division: Hematopathology - Coagulation

Comments: Indicate Factors required on the requisition.

Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma for a single factor and add one aliquot for every additional factor ordered (see

Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).

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

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Factor Assay Chromogenic VIII

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

Requisition: CD0002

Division: Hematopathology - Coagulation

Comments: Indicate Chromogenic Factor FVIII required on the requisition.

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

vials (12x75).

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

Alternate Names: Chrom Factor VIII

Chrom FVIII

LIS Mnemonic: Chrom FVIII

Factor Assay Chromogenic IX

Tube/Specimen: 2.7 mL Light blue buffered sodium citrate. Must be a full draw.

Requisition: CD0002

Referred Out: MAYO Medical Laboratories

Instruction: Send copy of requisition and specimen to Hematopathology Coagulation Lab for processing if within Central Zone. Only available to be

ordered by Hematologists – all other orders will be cancelled.

Comments: Test is not performed at the QEII. Referring hospitals are to send specimens directly to MAYO Medical Laboratories. Must indicate

Chromogenic Factor IX on the requisition and send 2 frozen aliquots of 1.0 mL platelet-poor plasma in polypropylene vials (12 x 75)

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

vials (12x75).

LIS Mnemonic: Chrom IX

Factor V Leiden Mutation

Tube/Specimen: 4.0 mL EDTA Lavender stoppered - One tube sufficient for both FV and PT mutation

Peripheral blood: 1 tube, minimum volume 1 mL. Stability - 14 days at 4° C. Bone marrow: 1 tube, minimum volume 1 mL. Stability - 14 days at 4° C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C or 7 days frozen.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

As per hereditary thrombophilia best practice testing guidelines, Factor V Leiden gene mutation testing is restricted to hematologists, medical

geneticists, neurologists, and general internists for both adult and pediatric populations.

Alternate Names: FV gene mutation

FV G1691 A mutation

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LIS Mnemonic: 2LAVDNA

Factor VIII C Inhibitor

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

vials (12x75). Send on dry ice.

Alternate Names: Bethesda Assay

Bethesda Inhibitor Bethesda (Factor VIII C)

Factor VIII Chromogenic Inhibitor

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

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

vials (12x75). Send on dry ice.

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

Alternate Names: Chrom VIII Inhib

Chromogenic Bethesda (Factor 8) Inhibitor Chromogenic Bethesda (Factor VIII) Assay Chromogenic Bethesda (Factor VIII) Inhibitor Chromogenic Coagulation Bethesda Assay Chromogenic Bethesda (Factor 8) Chromogenic Bethesda (Factor VIII C)

LIS Mnemonic: Chrom VIII Inhibitor

Factor IX Inhibitor

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

vials (12x75). Send on dry ice.

Alternate Names: Bethesda (Factor IX) Assay

Bethesda (Factor IX) Inhibitor

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Factor VIII Mutation

see Hemophilia Carrier Testing

Division:

Molecular Diagnostics

Factor XIII Antigen or Activity

Tube/Specimen: 4.5 mL Light Blue topped Sodium Citrate tube

Referred Out: Hamilton General Hospital

Instructions: Send to Hematopathology Coagulation Lab for processing.

LIS Mnemonic: Miscellaneous Hematology

Factor XIII Assay

Tube/Specimen: 4.5 mL Light Blue topped Sodium Citrate tube

Referred Out: Hamilton General Hospital (Nova Scotia Health Central Zone specimens only, see comment)

Instructions: Send to Hematopathology Coagulation Lab for processing.

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

LIS Mnemonic: FXIII or Factor XIII Assay

Comment: FXIII (Factor 13) is not performed at the QEII. Referring hospitals, outside of Central Zone, are to send specimens directly to

Hamilton General Hospital.

Farmer's Lung

see Aspergillosis/Farmer's Lung

Division: Virology-Immunology

Fascioliasis – IFA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ROSER

Fat, Fecal see Fecal Fat 72 Hour

Referred Out: In-Common Laboratories

Fe see Iron, Plasma

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Division: Clinical Chemistry - Core

FE, Liver see Iron Level Liver RO

Referred Out: In-Common Laboratories

Fecal Calprotectin see Calprotectin, Fecal

Referred Out: In-Common Laboratories

Fecal Chloride

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

Referred Out: In-Common Laboratories

Instructions: Store and send cold.

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

Send copy of requisition.

LIS Mnemonic: Fecal Chloride

ST CL

Fecal Elastase

Tube/Specimen: 5.0g Random stool specimen

Referred Out: In-Common Laboratories

Instructions: Send frozen.

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

Send copy of requisition.

LIS Mnemonic: ELAS F

Fecal Electrolytes

(Includes Sodium and Potassium-may order individually)

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

Referred Out: In-Common Laboratories

Instructions: Send at room temperature.

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

Send copy of requisition.

LIS Mnemonic: Fecal electrolytes

Fecal Fat 72 Hr

Tube/Specimen: Timed stool specimen MUST be collected in approved containers. Containers such as metal cans are not acceptable. Approved stool

collection containers may be obtained by calling the Referred-Out and Research Bench at 902-473-7237. 72 hour specimens are preferred,

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but non-72 hour specimens are accepted; actual time MUST be indicated.

Referred Out: In-Common Laboratories

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

Stable refrigerated for 180 days.

Send copy of requisition.

LIS Mnemonic: ST FAT

Fecal Osmolality

see Osmolality Fecal

Referred Out: In-Common Laboratories

Ferritin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: FER

Fetal Hemoglobin

see Hemoglobin Electrophoresis

(Hgb F)

Division: Hematopathology – Immunology

Alternate Names: Hemoglobin F

Note: This test is not ordered separately. It is included in the Hemoglobin Electrophoresis test.

Fibrinogen

Tube/Specimen: • 1.8 mL Light blue buffered sodium citrate. Must be a full draw.

Requisition: CD0002

Division: Hematopathology - Core

Instructions: Part of DIC Screen

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

vials (12x75). Send on dry ice.

Fibrosis-4

Tube/Specimen: 4.0 mL Lavender (EDTA) and Light Green 4.5 mL Lithium Heparin and gel for plasma separation.

Requisition: CD0002

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Division: Clinical Chemistry - Core

Comments: Testing for Fibrosis-4 (FIB-4) is automatically calculated based on the patient's age and test values for AST, ALT and Platelet Count from

Profile, No Diff.

Notes: Test is limited to General Practitioners in Nova Scotia Health Central Zone

LIS Mnemonic: FIBROSIS-4

Filariasis - IFA

Division:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Instructions: Clinical data should be indicated on the requisition.

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

Virology-Immunology

LIS Mnemonic: RO FILARIA

FIP1P1/PDGFRa

see Hypereosinophilic Syndrome

Referred Out: Mayo Medical Laboratories

Fitzgerald Factor (HMWK)

Tube/Specimen: 4.5 mL light blue topped Sodium Citrate tube.

Referred Out: Hamilton General Hospital

Instructions: Send to Hematopathology Coagulation Lab for processing.

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

delay in results.

LIS Mnemonic: Fitzgerald

FK 506

Tube/Specimen: 2.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: Trough whole blood should be collected before medication.

Specimen should be in Lab by 1200 PM to be done the same day.

The time specimen collected should be indicated on the requisition and tubes.

Time of last medication should be indicated on the requisition.

Comments: Pre-dose (trough) specimen is required.

Shipping: Mix whole blood, transfer whole blood to a plastic tube. Freeze and send on dry ice.

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Note: This determination can be done on micro specimens when necessary.

Alternate Names: Tacrolimus

Tacro

LIS Mnemonic: **TACRO**

Fletcher Factor (Prekallikrein)

4.5 mL light blue topped Sodium Citrate tube. Tube/Specimen:

Referred Out: Hamilton General Hospital

Instructions: Send to Hematopathology Coagulation Lab for processing.

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

delay in results.

LIS Mnemonic: Fletcher

Flow Crossmatch

Referred Out: Immunology and Genetics Laboratory

Flow Cytometry

see Leukemia and Lymphoma Screening

Division: Hematopathology - Flow Cytometry

FLT3

4.0 mL Lavender EDTA (BD#367861) Tube/Specimen:

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

LIS Mnemonic: 2LAVDNA

Fluoxetine Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Centrifuge at room temperature. Instructions:

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Aliquot serum in plastic vial. Freeze.

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

Send copy of requisition.

Note: Royal Blue Trace Element SERUM tube (BD368380) and Lavender topped EDTA plasma tubes are also acceptable. Must indicate specimen

type on tube.

LIS Mnemonic: FLUOX

Folate, Red Cell

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Referred Out: In-Common Laboratories

Instructions: Collect 2 x lavender (EDTA) tubes: one for RBC Folate at ICL, one for Hematocrit (HCT) in-house.

If CBC has been collected on the same collection, HCT value will be included in the CBC result.

Note: Ensure a separate specimen for Hematocrit (or CBC) has been sent for testing before freezing the RBC Folate tube.

Note: Ensure HCT value is obtained before shipping specimen to ICL.

Transport on ice or frozen unless the specimen can arrive at Central Specimen Accessioning (CSA) within 2 hours of collection.

Stability: Ambient 2 hours, Refrigerated 72 hours, Frozen 1 month.

Alternate Names: RBC Folate

Red Blood Cell Folate

LIS Mnemonic: RBC FOL

Folate, Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Can be done on the same tube as Vitamin B12 and Ferritin.

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

Alternate Names: Serum Folate

Folic Acid

LIS Mnemonic: FOL

Folic Acid see Folate, Serum

Division: Clinical Chemistry - Core

Follicle Stimulating Hormone see FSH

Division: Clinical Chemistry - Core

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Formic Acid		see Methanol
Division:	Clinical Chemistry - Toxicology	
FRDIL		see Phenytoin, Free
Referred Out:	In-Common Laboratories	
	yte Protoporphyrins	see Protoporphyrin, Erythrocyte
Referred Out:	In-Common Laboratories	
Free Phenytoin		see Phenytoin, Free
Referred Out:	In-Common Laboratories	
Free Prostate Specific Antigen		see PSA, Free
Division:	Clinical Chemistry - Core	
Free T3		
Tube/Specimen:	4.0 mL Gold SST (BD#367977)	
Requisition:	CD0002	
Division:	Clinical Chemistry - Core	
Shipping:	Separate serum within 5 hours of coll	lection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer.
Alternate Names:	Free Triiodothyronine	
LIS Mnemonic:	FT3 T3 FREE	
Free T4		see Thyroxine, Free
Division:	Clinical Chemistry - Core	
Free Triiodothyronine		see Free T3
Division:	Clinical Chemistry – Core	
Frisium		see Clobazam and Metabolite
Referred Out:	In-Common Laboratories	
Fructosamine		

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Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Hemolyzed or icteric (jaundiced) specimens are not acceptable.

Aliquot 2.0 mL serum in plastic vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: Fructosam

FSH

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Follicle Stimulating Hormone

LIS Mnemonic: FSH

FSH MD see Facioscapulohumeral Dystrophy

Referred Out: Molecular Genetics Diagnostic Laboratory

Molecular Diagnostics

Hamilton General Hospital

FV G1691 A Mutation see Factor V Leiden Mutation

Division: Molecular Diagnostics

FV Gene Mutation see Factor V Leiden Mutation

FXIII see Factor XIII Assay

G6PD see Glucose-6-Phosphate Dehydrogenase

Referred Out: In-Common Laboratories

Gabapentin Level

Division:

Referred Out:

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

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Instructions: Centrifuge at room temperature.

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

Send copy of requisition.

LIS Mnemonic: GABA or Gabapentin RO

GAD65 Antibody Glutamic Acid Decarboxylase see Anti-GAD

Referred Out: In-Common Laboratories

Galactomannan Testing

Tube/Specimen: 4.0 mL Gold SST (BD#367977) or Bronchial Wash (BRW)/Lavage (BAL)

Requisition: CD0002/CD0432/ CD0433

Division: Virology-Immunology

Instructions: Specify test requested on the Microbiology requisition.

Comments: Only one specimen of each type will be processed per week. The most recent collection will be processed.

Testing is only approved for patients from Hematology, 8A, 8B, 6B, Transplant or ID. Any requests from other ordering locations will

require director approval.

LIS Mnemonic: GALACT

Gamma Globulins

see Immunoglobulins (GAM)

Division: Clinical Chemistry - Core

Gamma Glutamyl

see Gamma GT, Plasma

Division: Clinical Chemistry - Core

Gamma GT, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Gamma Glutamyl Transpeptidase

Gamma Glutamyltransferase

GGT

LIS Mnemonic: GGT

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

Referred Out: In-Common Laboratories

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______ see GQ1B IgG Antibody

Ganglioside GQ1B IgG Antibody

Gastrin

Referred Out:

Tube/Specimen: 4.0 mL Gold SST (BD#367977) on ice

In-Common Laboratories

Patient must be fasting (12 hours or longer). Unknown or Not Fasting status will not be processed.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: High circulating biotin levels may reduce results by more than 10% of the true value. Patients must discontinue any biotin supplement at least

3 days prior to testing.

Specimens collected at QEII HSC must be placed on ice and sent to the processing area immediately. Separate the serum from the cells in a

refrigerated centrifuge within 1 hour. Aliquot and freeze immediately.

Stability: Frozen: 30 days

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

LIS Mnemonic: **GAST**

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

Division: Molecular Diagnostics

see Hemochromatosis **Genetic Testing for C282Y**

Division: Molecular Diagnostics

Genetic Testing for IWK see IWK Molecular Testing

Referred Out: IWK Clinical Genomics Lab

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

Tube/Specimen: CSF or Tissue

Referred Out: Central Public Health Lab

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

Gentamicin Level

Tube/Specimen: Plain Red Tube 6 or 10 mL

CD0002 Requisition:

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Division: Clinical Chemistry - Core

Comments: Gentamicin may be administered using 2 dosing strategies:

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

6 hours before next dose is administered.

If Gentamicin is administered more often (q8 - 12 hours), both pre and post specimens are required. Take Post (peak) blood specimen

30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. Take Pre (trough) blood specimen

30 minutes before next dose is administered.

The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

For information call the laboratory at 902-473-6886.

Alternate Names: Aminoglycoside Level

LIS Mnemonic: GENT PRE

GENT POST GENT TNS

GGT see Gamma GT, Plasma

Division: Clinical Chemistry - Core

GH see Human Growth Hormone

Division: Clinical Chemistry - Core

GH-RH see Growth Hormone-Releasing Hormone

Referred Out: Mayo Medical Laboratories

Gleevec Blood Monitoring

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

Referred Out: Warnex Medical Laboratories

Instructions: Send Gleevec Blood Monitoring Form along with specimen.

Clinical Chemistry - Core

LIS Mnemonic: Misc. Referred-Out

Globulin see Protein Total and Albumin Plasma

Glucagon

Division:

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

Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at 4°C.

Aliquot 2.0 mL plasma in plastic vial. Freeze immediately.

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

Send copy of requisition.

LIS Mnemonic: Glucagon RO

Glucose-6-Phosphate Dehydrogenase (G6PD)

Tube/Specimen: 4.5 mL lavender topped EDTA tube.

Referred Out: In-Common Laboratories

Instructions: Keep refrigerated.

Do NOT freeze.

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

Send copy of requisition.

LIS Mnemonic: G6PD

Glucose AC, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimens must be delivered to the laboratory within 2 hours of collection. Check off AC Glucose on the requisition.

Patient should be fasting for at least 8 hours.

Alternate Names: AC Blood Sugar

Blood Sugar

LIS Mnemonic: GLU AC

Glucose Challenge Test, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

Alternate Names: 1-hour GCT

LIS Mnemonic: 1 HR GCT

TRUTOL

Glucose, Fluids

Tube/Specimen: Submit only one of the following specimens:

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Spinal Fluid: 1.0 mL Spinal Fluid collected in sterile plastic screw top tube Dialysate Fluid: 10 mL Dialysate Fluid collected in sterile plastic screw top tubes

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: CSF GLU

> DF GLU BF GLU

Glucose PC, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

In order to ensure that timed determinations are taken properly, please give Blood Collection Service at least 30 minutes prior notice.

Blood Collection does not take appointments after 1530 hours.

Check off PC Glucose on the requisition.

Sugar PC Alternate Names:

GLU PC LIS Mnemonic:

GLU PC 2HR

Glucose Profile, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

LIS Mnemonic: GLU AC

GLU PC 2HR

Glucose Random, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

LIS Mnemonic: GLU R

Glucose Tolerance Test (GDM), Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

after the patient has finished the glucose drink. Specimens must be labeled with collection times.

Comments: Patient Preparation:

Fasting and post dosage specimens are required. Patients must be fasting 8 hours. Collect fasting specimen. Patient is given the 75 g glucose

drink immediately after taking the fasting glucose blood specimen.

Note: This test is for pregnant females.

Alternate Names: GTT

GTT2

LIS Mnemonic: GTT2GDM

2HR GTT GDM

Glucose Tolerance Test (Non-GDM), Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: For oral glucose tolerance on everyone except pregnant females, only 2 specimens will be drawn, the fasting specimen and a specimen 120

minutes after the patient has finished glucose drink. Specimens must be labeled with collection times.

Comments: **Patient Preparation:**

Fasting and post dosage specimens are required.

Patients must be fasting 8 hours. Collect fasting specimen. Patient is given the 75 g glucose drink immediately after taking the fasting

glucose blood specimen.

Note: This test is for males and non-pregnant females. For pregnant females see Glucose Tolerance Test (GDM), Plasma.

Alternate Names: GTT

GTT2

LIS Mnemonic: GTT2

2HR GTT NON GDM

Glucose, Urine

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

Glycolic Acid see Ethylene Glycol

Division: Clinical Chemistry - Toxicology

Glycosylated Hemoglobin

see Hemoglobin A1C

Division: Clinical Chemistry - Immunology

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GM1 Ganglioside Antibody

(Do Not Confuse with GQ1B IgG Antibody)

Tube/Specimen: Plain red topped tube. 4.0 mL Gold SST (BD#367977) are **not** acceptable.

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

LIS Mnemonic: GM1AB

Gonadotropin Releasing Hormone (Gn-RH)

(Do Not Confuse with GH-RH)

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

Instructions: Aliquot 3.0 mL serum in plastic vial. Freeze immediately.

If the specimen thaws, it is unsuitable for analysis.

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

Send copy of requisition.

LIS Mnemonic: FGNRH

GP (Surface Glycoprotein Analysis-GP IbIX and IIbIIIa)

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

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.

Store and ship at room temperature.

LIS Mnemonic: MISC HEM

GQ1B IgG Antibody

 $(Do\ Not\ Confuse\ with\ GM1\ Ganglioside\ Antibody)$

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Aliquot serum and Freeze.

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

Send copy of requisition.

Stability: 21 days frozen.

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LIS Mnemonic: GQ1BAB or GQ1B IgG Antibody

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see Type and Screen (ABO/Rh and Antibody Screen) **Group and Crossmatch** Transfusion Medicine Division: **Group and Type** see ABO Group and Rh Type Division: Transfusion Medicine **Growth Hormone** see Human Growth Hormone Division: Clinical Chemistry - Core **Growth Hormone Releasing Hormone (GH-RH)** (Do Not Confuse with Gn-RH) Tube/Specimen: Two 4.0 mL Gold SST (BD#367977) Referred Out: Mayo Medical Laboratories Instructions: Aliquot 3.0 mL serum into plastic vial. Freeze immediately. If the specimen thaws, it is unsuitable for analysis. Do not accession for non-Nova Scotia Health Central Zone Hospitals Send copy of requisition. LIS Mnemonic: see Glucose Tolerance Test, Plasma GTT Division: Clinical Chemistry - Core GTT2 see Glucose Tolerance Test, Plasma Division: Clinical Chemistry - Core see Helicobacter Pylori Stool Antigen H Pylori Division: Microbiology After Nov 1, 2016 Helicobacter pylori serology will no longer be performed. Stool antigen testing is the preferred testing method. If active Note: infection is suspected please submit a fresh stool in a sterile container. H63D see Hemochromatosis Division: Molecular Diagnostics ______ Haemophilus influenza

Routine typing from sterile sites or questionable outbreaks

Tube/Specimen: Isolate, Typing

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Referred Out: IWK Microbiology Lab

Shipped as Biological Substances Category B Instructions:

Porter service for delivery

Hantavirus Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002A/CD0002B Requisition:

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO HANTA

Haptoglobin

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: **HAPTO**

HAV see Hepatitis A Testing

Division: Virology-Immunology

Hb see Profile

Division: Hematopathology - Core

HCG (Quant), Plasma

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

CD0002 Requisition:

Clinical Chemistry - Core Division:

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

Freeze and send frozen plasma, if longer.

Alternate Names: Chorionic Gonadotropin Beta-Subunit

HCG-Beta Subunit

Human Chorionic Gonadotropin

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LIS Mnemonic: HCG

BHCG QUANT

HCG Beta Subunit see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

HCO3, Plasma see Bicarbonate, Plasma

Division: Clinical Chemistry - Core

HCT see Profile

Division: Hematopathology - Core

HDL-Cholesterol, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: High Density Lipoprotein Cholesterol

LIS Mnemonic: HDL

Heart Muscle Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

Stability: Refrigerated at 2 to 8 °C 14 days and frozen 180 days.

LIS Mnemonic: HEARTAB

Alternate Names: Anti-Cardiac Muscle Antibody

Cardiac Muscle Antibody

ACMA ACA

Heat Shock Protein see F68KD

Referred Out: Mayo Medical Laboratories

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Heavy Metal Testing

see Trace Element Panels

Referred Out:

In-Common Laboratories

Heinz Bodies

4.0 mL Lavender (EDTA)

Tube/Specimen: Requisition:

CD0002

Division:

Hematopathology - Core

Helicobacter Pylori Stool Antigen

Tube/Specimen: Stool in sterile container.

Requisition: CD0432/CD0433

Referred Out: IWK Microbiology Lab

Instructions: Send to VG Microbiology lab with original requisition. Microbiology will refer tests out.

Refrigerate at 2 to 8°C.

If stool cannot be submitted to the laboratory within 72 hours, the specimen should be frozen at -20°C.

Note: As of Nov 1, 2016, Helicobacter pylori serology will no longer be performed. Stool antigen testing is the preferred testing method.

If active infection is suspected please submit a fresh stool in a sterile container as explained here.

LIS Mnemonic: IWKHP

Hem Microorganism

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

Requisition: CD0002

Division: Hematopathology – Microscopy

Comments: Analysis includes Thick & Thin Smear Review

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

Stability: EDTA specimen: 4 hours at room temperature.

Alternate Names: Anaplasma Smear

Babesia Smear Ehrlichia Smear Microfilaria Smear Trypanosoma Smear

LIS Mnemonic: Hem Microorg

Hem Microorganisms

Hematocrit see Profile

Division: Hematopathology - Core

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Hemochromatosis

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

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4 degrees Celsius. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4 degrees Celsius.

Tissue: Send in saline at 4 degrees Celsius, or frozen on dry ice. Stability - 12 hours in saline at 4 degrees Celsius, or 7 days frozen.

Requisition: CD0002 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: HLA-H

HFE

Human Leukocyte Antigen-H DNA Probe for Hemochromatosis Genetic Testing for C282Y

C282Y H63D

LIS Mnemonic: HH

Hemoglobin see Profile

Division: Hematopathology - Routine

Hemoglobin A1C

Tube/Specimen: 2.0 mL Lavender (EDTA). This tube is not to be shared.

Requisition: CD0002

Division: Clinical Chemistry – Immunology

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

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

Alternate Names: Glycosylated Hemoglobin

Hgb AIC

Hemoglobin and Hematocrit, Body Fluid

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

Requisition: CD0002

Division: Hematopathology - Core

Hemoglobin Electrophoresis

Tube/Specimen: 4.0 mL Lavender (EDTA)

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Requisition: CD0002

Division: Hematopathology – Immunology

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

Do not store at room temperature.

Hospitals outside Central Zone must send a copy of the CBC report with the specimen.

Alternate Names: Thalassemia Screen

Alpha Thalassemia Screen

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

Division: Hematopathology - Core

Hemophilia A Inversion see Hemophilia Carrier Testing

Division: Molecular Diagnostics

Hemophilia and von Willebrand's Disease Genotype

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

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

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Send specimen to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at

Queen's University.

Alternate Names: Hemophilia A inversion

Factor VIII mutation

LIS Mnemonic: 2LAVDNA

Hemophilia Carrier Testing

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

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

DNA: Stability – 3 months at $4^{\circ}C$ or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Send specimen to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at

Queen's University.

Alternate Names: Hemophilia A inversion

Factor VIII mutation

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LIS Mnemonic:	2LAVDNA

Hemosiderin, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Hematopathology – Microscopy

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

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

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

LIS Mnemonic: U Hemosid

Heparin Induced Thrombocytopenia (HIT)

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

send 4 frozen 1.0 mL aliquots of serum and 3 frozen 1.0 mL aliquots of platelet poor plasma. Send frozen on dry ice.

Both serum and plasma specimens must be platelet poor.

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

Specimens may be referred out to McMaster University HSC.

Alternate Names: HIT

Heparin XA see Anti-XA

Division: Hematopathology - Coagulation

Hepatitis A Antibody IgG see Hepatitis A Testing

Division: Virology-Immunology

Hepatitis A Antibody IgM see Hepatitis A Testing

Division: Virology-Immunology

Virology-Immunology

Hepatitis A Immune Status see Hepatitis A Testing

Hepatitis A Testing

Division:

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4.0 mL Gold SST (BD#367977) Tube/Specimen:

CD0002A/CD0002B Requisition:

Division: Virology-Immunology

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

LIS Mnemonic: HEPAG (IgG)

HEPAM (IgM)

Hepatitis B Core Antibody (Total IgG and IgM)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002A/ CD0002B Division: Virology-Immunology

LIS Mnemonic: **HBCAB**

Hepatitis B Core Antibody IgM

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

RO ROSER LIS Mnemonic:

Hepatitis B e Antigen and Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

LIS Mnemonic: HBE

Hepatitis B Genotyping

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Specify test requested on the Microbiology requisition.

Clinical data must be indicated on the requisition.

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

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LIS Mnemonic: RO ROSER

Hepatitis B Surface Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: Immunity, post vaccination or immunization

Alternate Name: HB Surface Ab

LIS Mnemonic: HBSAB

Hepatitis B Surface Antigen

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: Diagnosis, for needlestick injury or prenatal screening

Alternate Name: HB Surface Ag

LIS Mnemonic: HBSAG

Hepatitis B Viral Load

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: Quantitative
Alternate Name: HBV DNA
LIS Mnemonic: HBVVL

Hepatitis C Antibody

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: Diagnosis

Alternate Names: Anti HCV

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HCV Antibody

LIS Mnemonic: HEPC (If previous positive for HEPC a utilization rule will order HCVVL instead of HEPC)

Hepatitis C Genotype

Two 4.0 mL Gold SST (BD#367977) Tube/Specimen:

CD0002A/CD0002B Requisition:

Division: Virology-Immunology

Note: With availability of antivirals for HCV that are pan-genotypic, routine genotyping will no longer be performed. If required,

please contact CZMicrobiologist@nshealth.ca.

This test will be referred out by the laboratory if approved.

LIS Mnemonic: **HEPCGENO**

Hepatitis C Resistance

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: Laboratory Requisition Form for NON-B.C. Patients Only

Division: Virology-Immunology

Whole blood may be transported at 2 to 8°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 Shipping:

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

LIS Mnemonic: RO HEPCRES

Hepatitis C Riba

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B Division: Virology-Immunology

Comment: Confirmatory antibody testing, qualitative

Alternate Name: HCV RIBA LIS Mnemonic: **HEPCRIBA**

Hepatitis C Viral Load

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B Division: Virology-Immunology

Comment: **Quantitative**

Alternate Names: HCV PCR

HCV RNA

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HCV Viral Load

LIS Mnemonic: HCVVL (If no previous positive for Hepatitis C antibody a utilization rule will order HEPC instead of HCVVL)

Hepatitis D

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition. Patient must be HBsAG positive.

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

LIS Mnemonic: RO HEPD

Hepatitis E

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO HEPE

Her-2 neu FISH

Tube/Specimen: Tissue in paraffin block

Requisition: CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Herpes Typing by Real Time PCR

Tube/Specimen: CSF (0.5 mL sterile specimen), Swabs collected in viral transport media, sterile fluids, bronchial wash, tissues

Requisition: CD0432/ CD0433

Division: Virology-Immunology

Comments: For CSF: IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens

require a CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting

location by the Microbiology laboratory.

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Shipping: CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen.

All other specimens store at 4°C up to 3 days, if longer freeze at -70°C

LIS Mnemonic: E BFME (CSF)

HSVVZ (all other specimens)

Hexosaminidase, Beta

Tube/Specimen: MALES and Non-pregnant Females: Plain red topped tube.

Aliquot 2.0 mL serum in plastic vial. Freeze.

Unsuitable if thawed.

PREGNANT Females: Green topped heparinized tube. Do Not Centrifuge! Do Not Freeze!

Referred Out: Hospital for Sick Children Metabolic Diseases Laboratory

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

> Indicate if pregnant or on oral contraceptives. Indicate the Ethnicity/Race of the patient.

Physician must complete applicable Sick Kids requisition for referral laboratory testing.

If testing for Tay-Sachs Carrier Detection, submit completed Metabolic Diseases & Genome Diagnostics for Tay-Sachs requisition,

otherwise submit the Metabolic Disease-Lysosomal Enzyme requisition.

LIS Mnemonic: MISC REF

HFE see Hemochromatosis

Division: Molecular Diagnostics

Hgb A1C see Hemoglobin AIC

Division: Clinical Chemistry - Immunology

HGH see Human Growth Hormone

Division: Clinical Chemistry - Core

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

Division: Clinical Chemistry - Core

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

Division: Clinical Chemistry - Core

Histamine

Tube/Specimen: Lavender topped EDTA tube. Referred Out: Mayo Medical Laboratories

Instructions: Cool immediately on ice after collection.

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Centrifuge at 1500 rpm for 10 minutes at 4°C within 20 minutes of collection.

Aliquot at least 1.0 mL plasma and freeze immediately.

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

Send copy of requisition.

Stability: 28 days frozen.

LIS Mnemonic: Histamine

Histone Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Aliquot 1.0 mL serum. Freeze immediately.

Send copy of requisition.

Note: Ship frozen.

LIS Mnemonic: HISAB

Histoplasma Capsulation

see Histoplasmosis Serology

Division: Virology-Immunology

Histoplasmen

see Histoplasmosis Serology

Division: Virology-Immunology

Histoplasmosis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

Alternate Names: Histoplasma Capsulation

Histoplasmen

LIS Mnemonic: RO HISTO

HIV Genotyping and Drug Resistance

Tube/Specimen: 4.0 mL Lavender (EDTA) tube

Requisition: Laboratory Requisition Form for NON-B.C. Patients Only

Division: Virology-Immunology

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Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20

minutes. Ship one 2mL aliquot of plasma frozen.

LIS Mnemonic: RO HIVGDR

HIV Viral Load see HIV-1 Viral Load

Division: Virology-Immunology

HIV-1 Viral Load

Tube/Specimen: Two 4.0 mL Lavender (EDTA) tubes.

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20

minutes and ship two 2 mL aliquots at 2 to 8°C.

Alternate Names: HIV Viral Load

LIS Mnemonic: VLNS

HIV-1/HIV-2

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A / CD0002B

Division: Virology-Immunology

Alternate Names: AIDS Test

HTLV3

Human Immunodeficiency Virus

LIS Mnemonic: HIV

Division:

HLA-A see HLA Typing Autoimmune

Hematopathology – Histocompatibility (HLA)

HLA Antibody Testing

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

Division: Hematopathology – Histocompatibility (HLA)

Requisition: CD0004

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

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

96 hours of collection. Frozen serum specimens should be packed with sufficient dry ice/ice packs to arrive frozen.

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Specimens arriving after 3 pm on Friday will be processed the next business day.

Alternate Names: Cytotoxic Antibodies

PRA

HLA-B see HLA Typing Autoimmune

Hematopathology - Histocompatibility (HLA) Division:

HLA-B27 see HLA Typing Autoimmune

Hematopathology - Histocompatibility (HLA) Division:

HLA-B5701 see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

HLA-C see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

HLA Crossmatch – Recipient

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

Requisition:

Division: Hematopathology - Histocompatibility (HLA)

Instructions: By appointment only. Specimens must be received in the HLA laboratory by 0900 on the scheduled crossmatch date.

Specimens received after 0900 may not be processed.

Complete recipient information in the section provided on the requisition. (Multi-Organ Transplant – Recipient Clinical Information) KPD or CTR: Please indicate if recipient is part of the Kidney Paired Exchange or Canadian Transplant Registry by checking the box

provided and indicating the patient's registry number.

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

72 hours of collection.

HLA Crossmatch - Living Donor

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

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

Instructions: By appointment only. Specimens must be received in the HLA laboratory by 0900 on the scheduled crossmatch date. Specimens received after

0900 may not be processed.

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

Live Donor: Please indicate if donor is part of the Kidney Paired Exchange or Canadian Transplant Registry by checking the box provided

and indicating the patient's registry number.

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

within 72 hours of collection.

HLA Deceased Donor Typing and Crossmatch

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

2 x 4 mL EDTA (Lavender top)

2 x 500uL EDTA Microtainer and 4 x 6ml ACD (Solution B-Yellow top) for pediatric patients

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

Shipping: Transport blood specimens at room temperature and protect from freezing. Typing specimens (EDTA) should arrive in the HLA laboratory

within 7 days of collection. Crossmatch specimens (ACD) should arrive in the HLA laboratory within 72 hours of collection. Complete the

Deceased Donor information in the section provided on the requisition (Multi-Organ Transplant - Donor Information)

see HLA Typing Autoimmune HLA DQ

Division: Hematopathology - Histocompatibility (HLA)

HLA DR see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

HLA Typing-Autoimmune

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

CD0004 Requisition:

Division: Hematopathology - Histocompatibility (HLA)

Instructions: HLA B27 testing is limited to requests from rheumatologists, ophthalmologists, and orthopedics only.

HLA B5701 testing is limited to requests from the ID clinic only.

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

7 days of collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

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

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

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

2 x buccal swabs

Requisition: CD0004

Hematopathology - Histocompatibility (HLA) Division:

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

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

collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

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For pediatric peripheral blood collections less than 4 mL, additional specimens may be requested by the laboratory if required. For difficult Notes:

collections, or when clinically warranted, the laboratory may accept lower minimum specimen requirements. Contact the laboratory for further

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

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

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

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

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

History)

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

KPD or CTR: Please indicate if recipient and donor belong to the Kidney Paired Exchange or Canadian Transplant Registry by checking the

box provided and indicating the patient's registry number.

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

collection. Specimens arriving after 3 pm on Friday will be processed the next business day.

Notes: For pediatric collections less than 4 mL, additional specimens may be requested by the laboratory if required. For difficult collections, or

when clinically warranted, the laboratory may accept lower minimum specimen requirements. Contact the laboratory for further information.

HLA Typing Tissue Bank Donor

see HLA Typing-Multi Organ Transplant

Hematopathology - Histocompatibility (HLA) Division:

In-Common Laboratories

HLA-H see Hemochromatosis

Division: Molecular Diagnostics

HMBS see Acute Intermittent Porphyria gene mutation

HMGCR Antibodies

see Anti-HMGCR Antibodies

Homocysteine

Referred Out:

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

Referred Out: In-Common Laboratories

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

Centrifuge, aliquot 2.0 mL plasma and Freeze.

Outside hospitals may be accessioned.

Patient is preferred to be fasting but is not required.

Send copy of requisition.

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

LIS Mnemonic: HOMO

Homogentisic Acid

see Organic Acid Analysis

Referred Out: IWK Metabolic Lab

HPV DNA

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

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

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

Shipping: Specimens stable for 3 months at room temperature

LIS Mnemonic: HPV

HTLV 3 see HIV-1/HIV-2

Division: Virology-Immunology

HTLV-1/HTLV-II Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

LIS Mnemonic: HTLV

see HCG (Quant), Plasma

Human Chorionic Gonadotropin

•

Division: Clinical Chemistry - Core

Human Growth Hormone

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Patient must be fasting for 8 hours prior to collection.

Centrifuge specimen within 90 minutes of collection; aliquot and freeze immediately.

Shipping: Freeze immediately and send 1.0 mL frozen serum.

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Stability: Frozen: 60 days

Alternate Names:

Growth Hormone

HGH

LIS Mnemonic: GH

Human Immunodeficiency Virus see HIV-1/HIV-2

Division: Virology-Immunology

Human Leukocyte Antigen see HLA Tissue Typing

Division: Hematopathology - Histocompatibility (HLA)

Human Leukocyte Antigen-H see Hemochromatosis

Division: Molecular Diagnostics

Hydatid Disease – IHA (Echinococcosis)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: QE 7125

Division: Microbiology-Immunology

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

Hydroxybutyrate see Beta Hydroxybutyrate

Referred Out: In-Common Laboratories

Hydroxymethylbilane Synthase Gene see Acute Intermittent Porphyria gene mutation

Hypereosinophilic Syndrome

Hypermutation

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

Referred Out: Mayo Medical Laboratories

Instructions: Hematopathology Molecular lab will process specimen.

2LAVDNA or MISC HEM (Note: MISC HEM is only to be ordered by Molecular Diagnostics technologists after approval. All other staff LIS Mnemonic:

are to order 2LAVDNA.)

see IGHV Somatic Hypermutation

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Division:	Molecular Diagnostics	
IDAT		see Type and Screen (ABO/Rh and Antibody Screen)
Division:	Transfusion Medicine	
Idiopathic Thrombocytopenia Purpura (ITP)		see Autoimmune Thrombocytopenia Purpura
Referred Out:	McMaster University HSC	
IG gene rearrangement		see B-cell lymphoid clonality
Division:	Molecular Diagnostics	
IG Heavy Chain		see B-cell lymphoid clonality
Division:	Molecular Diagnostics	
IgA		see Immunoglobulin A
Division:	Clinical Chemistry – Core	
IgD		see Immunoglobulin D
Referred Out:	In-Common Laboratories	
IgE		see Immunoglobulin E
Division:	Clinical Chemistry - Core	
IGF-1		see Insulin Like Growth Factor
Division:	Clinical Chemistry - Core	
IgG		see Immunoglobulin G
Division:	Clinical Chemistry - Core	
IgG 4 Subclas		
Tube/Specimen:	4.0 mL Gold SST (BD#367977)	
Referred Out:	In-Common Laboratories	
Instructions:	Centrifuge at room temperature. Aliquot 1.0 mL serum into plastic vial. Send copy of requisition.	Freeze at once.

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IgG 4 LIS Mnemonic:

IgG Subclasses (IgG 1, IgG 2, IgG 3, IgG 4)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum into plastic vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic:

IgG/TCR Gene Rearrangement

Division: Molecular Diagnostics

Alternate Names: TCR Gene Rearrangement

IGHV mutation status

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

IGHV Somatic Hypermutation

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: Blood/bone marrow must be kept at 4°C, accompanied by requisition. Any specimen referred from outside of Nova Scotia Health Central

Zone must also be accompanied by a printout of the CBC results, as it is important to know the white blood cell count prior to extracting the

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: CLL hypermutation

Somatic hypermutation Hypermutation

SHM

IGHV mutation status

LIS Mnemonic: 2LAVDNA

IgM see Immunoglobulin M

Division: Clinical Chemistry - Core

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IGRA

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

Requisition: CD0432/CD0433

Division: Microbiology

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

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

Send directly to 3rd floor Microbiology.

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

LIS Mnemonic: IGRA

Imipramine Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into plastic vial. Freeze.

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

Send copy of requisition.

Note: Royal Blue Trace Element SERUM tubes (BD#368380) and lavender topped EDTA (plasma) tubes are acceptable.

Must indicate specimen type on aliquot tube (serum or plasma).

LIS Mnemonic: IMIP

Immune Mediated Necrotizing Myopathy
And Statin Related Myopathy

see Anti-HMGCR

Referred Out: In-Common Laboratories

Immunodeficiency Testing

Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin

Requisition: CD0002C

Division: Hematopathology-Flow Cytometry

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

later than 14:00 on Fridays (or the day before a holiday).

The requisition must accompany the specimen to the Flow laboratory.

Shipping: Maintain specimen at room temperature.

LIS Mnemonic: CELL SM

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Immunofibrinogen (Antigen)

Tube/Specimen: 4.5 mL light blue topped Sodium Citrate tube.

Referred Out: Hamilton General Hospital

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: Miscellaneous Hematology

Immunofixation Electrophoresis (IFE), serum

see Protein Electrophoresis, Serum

Division: Clinical Chemistry - Immunology

Note: First line testing for monoclonal gammopathy should be a serum protein electrophoresis. Immunofixation Electrophoresis (IFE) will be added

on by Immunology Laboratory as a reflex test of Serum Protein Electrophoresis as needed.

Immunoglobulin A

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Separate serum within 5 hours of collection. Serum stable for 4 months at 2 to 8°C. Freeze and send frozen serum, if longer.

LIS Mnemonic: IGA

Immunoglobulin D

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into plastic vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: IGD

Immunoglobulin E

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Centrifuge and aliquot within 5 hours of collection.

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

LIS Mnemonic: IGE

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Immunoglobulin G

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Separate serum within 5 hours of collection. Serum stable for 4 months at 2 to 8°C. Freeze and send frozen serum, if longer.

LIS Mnemonic: IGG

Immunoglobulin M

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Separate serum within 5 hours of collection. Serum stable for 4 months at 2 to 8°C. Freeze and send frozen serum, if longer.

LIS Mnemonic: IGM

Immunoglobulins (GAM), Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Separate serum within 5 hours of collection. Serum stable for 4 months at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Gamma Globulins

LIS Mnemonic: IMM

Immunoglobulins, Heavy

see Immunoglobulins (GAM)

Division: Clinical Chemistry - Core

Immunoglobulins, Free Light Chain

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Immunology

Shipping: Separate serum and freeze. Send frozen serum on dry ice. Send as a separate aliquot with no other testing ordered.

Indirect Antiglobulin Test see Type and Screen (ABO/Rh and Antibody Screen)

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Division:

Transfusion Medicine

PLM Laboratory Test Catalogue

Indirect Biliru	rubin see B	ilirubin Indirect, Plasma				
Division:	Clinical Chemistry - Core					
Infectious Mo		pstein-Barr Virus				
Division:	Microbiology-Immunology					
Influenza/RSV	V/Other Viral Respiratory Testing					
Tube/Specimen:	Nasopharyngeal swab in viral transport media, Bronch wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural f					
Requisition:	CD0432/CD0433					
Division:	Virology-Immunology					
Comments:	An algorithm will be followed according to the season and patient location to determine what testing will be performed. Routine Influenza testing includes Influenza A, Influenza B and RSV. Viral respiratory testing includes Adenovirus, Parainfluenza virus 1/2/3/4, Enterovirus, Coronavirus 229E/NL63/OC43, Rhinovirus A/B/C Bocavirus and Human metapneumovirus.					
Shipping:	Specimens are stable at 2 to 8°C for 3 days, if it will be received >3 days freeze at -70°C and ship on dry ice.					
LIS Mnemonic:	FLU (influenza A, B, RSV) (for all specimen types except lung tissue and pleural fluid) E MRVP (Viral respiratory testing on all specimen types if criteria for testing met) E FLU (lung tissue, pleural fluid)					
Note:	Avian influenza requests, a microbiologist must be notified. They will direct the specimen collection type and test request.					
Inhibitor (No	on Specific) see L	upus Anticoagulant Screen				
Division:	Hematopathology - Coagulation					

Division: Hematopathology - Coagulation

see Factor VIII C Inhibitor

Inorganic Phosphorous see Phosphorous, Plasma

Division: Clinical Chemistry - Core

IND /DT\

INR (PT)

Tube/Specimen: 1.8 mL Light blue buffered sodium citrate. Must be a full draw.

Requisition: CD0002

Inhibitor (Specific)

Division: Hematopathology – Coagulation

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fluid



Alternate Names: Prothrombin Time

Insulin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Patient should be fasting 8 hours prior to collection.

Deliver specimen to lab within 60 minutes of collection. Separate serum from gel separator within 90 minutes of collection.

Separate serum from gel separator within 90 minutes of collection. Freeze and send frozen serum. Shipping:

Stability: Separated serum: 5 days at 2 to 8°C and 14 days at -20°C

LIS Mnemonic: INS

Insulin Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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

Send copy of requisition.

LIS Mnemonic: Insulin Ab

Insulin like Growth Factor-1

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

Instructions: Specimen must be centrifuged within 90 minutes.

Shipping: Separate serum and freeze immediately.

Stability: Frozen: 6 months

Alternate Names: IGF-1

Somatomedin-C

IGF-1 LIS Mnemonic:

Intact PTH see Parathyroid Hormone Intact

Division: Clinical Chemistry - Core

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Interferon-beta Neutralizing Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.
Aliquot 1.0 mL of serum. Freeze.

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

Send copy of requisition.

LIS Mnemonic: NABS

Interleukin 2 Receptor Alpha Chain

Tube/Specimen: Plain Red topped tube (avoid gel separator tubes)

Referred Out: In-Common Laboratories

Instructions: Avoid all biotin supplements for 48 hours prior to specimen collection.

Centrifuge at room temperature.

Aliquot 1.0 mL of serum. **Freeze** at once.

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

Send copy of requisition.

Stability: Room temperature unacceptable. Refrigerated 24 hours. Frozen 30 days.

Alternate Names: Soluble CD25

Soluble IL-2 receptor alpha chain

sIL-2R alpha sIL-2Ra

LIS Mnemonic: IL2R

Interleukin 6 Vitreous Fluid

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

Referred Out: In-Common Laboratories

Instructions: Freeze within 30 minutes of collection.

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

Send copy of requisition.

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

LIS Mnemonic: IL6FL

Interleukin 10 Vitreous Fluid

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

Referred Out: In-Common Laboratories

Instructions: Freeze within 30 minutes of collection.

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

Send copy of requisition.

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Stability: Room temperature 30 minutes, refrigerated unacceptable, frozen 30 days.

LIS Mnemonic: IL10FL

Intrinsic Factor Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 3.0 mL of serum into plastic vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: Intrins

INV 16 see Inversion 16

Division: Molecular Diagnostics

Inversion 16

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.

Bone marrow: 1 tube, minimum volume 1 mL. Stability - 14 days at 4° C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: INV 16

CBF beta-MYH11 gene fusion

LIS Mnemonic: 2LAVDNA

Iodine Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge ASAP! Testing <u>cannot</u> be performed on whole blood.

Aliquot plasma into plastic transfer vial. Keep refrigerated.

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

Send copy of requisition.

LIS Mnemonic: Iodine P

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Ionized Calcium, Plasma

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

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

CD0021 Requisition:

Division: Clinical Chemistry - Core

Instructions: Ideally no tourniquet should be used. Patient should not be allowed to exercise the forearm or pump fist.

Specimens should be placed on ice immediately after collection and must be centrifuged within 2 hours of collection.

Post-spun specimens should be kept cold and unopened before analysis.

If specimen cannot be analyzed immediately, it can be stored unopened at 2 to 8°C up to 3 days.

Transport spun specimens on cold pack optimally within 24 hours of centrifugation. Do not use dry ice. Do not freeze. Shipping:

Unspun specimens must be received in lab on ice within 2 hours of collection.

Alternate Names: Calcium Lvl Ionized

LIS Mnemonic: **ICA**

Iron, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names:

Iron Binding

Total Iron Binding Capacity

IRON/TIBC LIS Mnemonic:

see Iron, Plasma

Iron Binding Capacity, Plasma

Division: Clinical Chemistry - Core

Iron Level Liver RO

Tube/Specimen: Specimen may be sent cold in paraffin block, formaldehyde or other preservative. Unpreserved specimens should be stored and sent frozen.

Referred Out: In-Common Laboratories

Instructions: Send copy of requisition.

LIS Mnemonic: FE LIVER

Referred Out:

Islet Transplant Program see PRA/LAS

University of Alberta

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Isoelectric Focusing (IEF)

Tube/Specimen: 4.5 mL Lavender topped EDTA tube.

Referred Out: IWK Hematology Lab

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: Miscellaneous Hematology

Isoenzyme, Alkaline Phosphatase see Alkaline Phosphatase: Isoenzyme

Referred Out: In-Common Laboratories

Isohemagglutinin Titre see ABO Antibody Titre

Division: Transfusion Medicine

Clinical Chemistry - Toxicology

Isopropanol see Isopropyl Alcohol, Qualitative

Isopropyl Alcohol, Qualitative

Tube/Specimen: Plain Red Tube 6 or 10 mL

CD0002 Requisition:

Division:

Clinical Chemistry - Toxicology Division:

Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations. Instructions:

This test is time sensitive and requires Clinical Chemistry faculty On-call approval before sending through QEII locating at 902-473-2220. Once approved, send specimen STAT to QEII-VG Site CSA. Please contact laboratory at 902-473-5514 to transmit information about

specimen and shipment. Ensure specimen bag and transport containers are labelled as STAT.

Alternate Names: Isopropanol

METHANOL LIS Mnemonic:

FORMIC ACID

ISOPROPANOL QUANTITATION

IWK Clinical Genomics

Tube/Specimen: As per requisition

Referred Out: **IWK Clinical Genomics**

Instructions: Do not accession.

Keep specimen at room temperature.

IWK Cytogenetics Testing

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Tube/Specimen: 4.0 mL Dark green sodium heparin (BD#367871) or 6.0 mL Dark green sodium heparin (BD#367878)

Referred Out: IWK Clinical Genomics Lab

Requisition: IWK Constitutional Cytogenetic Karyotype Requisition (available at https://iwkhealth.ca/health-professionals/clinical-genomics)

Instructions: Other specimen types possible see requisition or https://iwkhealth.ca/health-professionals/clinical-genomics for more details.

IWK Molecular Testing

Tube/Specimen: 4.0 mL Lavender (EDTA) (BD#367861)

Referred Out: IWK Clinical Genomics Lab

Requisition: IWK Constitutional Molecular Requisition

Instructions: Other specimen types possible - see requisition or https://iwkhealth.ca/health-professionals/clinical-genomics for more details

Keep specimens at room temperature.

IWK Microarray Testing

Tube/Specimen: 4.0 mL Lavender (EDTA) (BD#367861)

Referred Out: IWK Clinical Genomics Lab

Requisition: IWK Postnatal Microarray Requisition (available at https://iwkhealth.ca/health-professionals/clinical-genomics)

Instructions: Other specimen types possible - see requisition or https://iwkhealth.ca/health-professionals/clinical-genomics for more details

Keep specimens at room temperature.

JAK2 (v6 7f) see Jak2 gene mutation

Division: Molecular Diagnostics

JAK2 exon 12

see Next Generation Sequencing - Myeloid panel

Division: Molecular Diagnostics

Jak2 gene mutation

Tube/Specimen: 4.0 mL Lavender (EDTA)

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4° C, or frozen on dry ice. Stability -12 hours in saline at 4° C, or 7 days frozen. Alternatively, send fixed tissue in

paraffin block.

DNA: Stability – 3 months at 4° C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health-Central Zone must also be accompanied by a printout of the CBC results, as it is

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

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If multi	ple Molecular	Diagnostics tes	sts are ordered, or	alv 2 tubes of	peripheral	blood or 1	tube of bone marroy	w are necessary.

Alternate Names: Polycythemia vera

Thrombocythemia JAK2 (v6 7f)

LIS Mnemonic: 2LAVDNA

Jo-1 see Anti-nuclear antibody

Division: Immunopathology

Joint Fluid see Synovial Analysis

Division: Hematopathology - Core

see Electrolytes (Na, K), Plasma K+

Division: Clinical Chemistry - Core

Karyotype Testing for IWK see IWK Cytogenetics Testing

Referred Out: IWK Clinical Genomics Lab

Keppra see Levetiracetam

Referred Out: In-Common Laboratories

Kidney Function Tests see Creatinine, Plasma; Urea, Plasma; Albumin, Plasma or Uric Acid,

Plasma

Division: Clinical Chemistry - Core

Kininogen see Fitzgerald Factor

Referred Out: Hamilton General Hospital

see Next Generation Sequencing-Myeloid Panel KIT Asp816Val

Kleihauer-Betke

Division:

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

Referred Out: IWK Hematology Lab

Keep whole blood refrigerated. Instructions:

Do Not Centrifuge.

Molecular Diagnostics

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Note: If specimens are from a non-Nova Scotia Health Central Zone	Hospital; Do not accession and send of	directly to the IWK Hematology
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Lab.

LIS Mnemonics: Kleih

KRAS see Next Generation Sequencing – Solid Tumor panel

Division: Molecular Diagnostics

LA see Extractable-Nuclear Antibodies

Division: Immunopathology

Lactate Dehydrogenase see LD, Serum

Division: Clinical Chemistry - Core

Lactate, Plasma

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

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: Ensure specimen is well mixed; invert minimum 8 times.

Label tube with patient information with waterproof ink, immerse in a slurry of ice and water and deliver to Processing area within 30

Shipping: Separate plasma immediately and no longer than 60 minutes from collection.

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

Alternate Names: Lactic Acid

LIS Mnemonic: VLACT

Lactate, Spinal Fluid (CSF)

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

Requisition: QE 7850_12_05

Division: Clinical Chemistry - Core

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

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

Lactic Acid Alternate Names:

LIS Mnemonic: CSF Lact Lvl

Lactic Acid

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



Division: Clinical Chemistry - Core

Lactic Dehydrogenase see LD, Serum

Clinical Chemistry - Core Division:

Lamictal see Lamotrigine

Division: Clinical Chemistry - Toxicology

Lamotrigine

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

These determinations can be done on micro specimens. Send at least 0.2 mL of serum. Instructions:

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

Specimens should not be collected until the blood concentration is at steady state (3-4 half-lives).

Alternate Names: Lamictal LIS Mnemonic: LAMOT

Latex Fixation see Rheumatoid Factor

Division: Clinical Chemistry - Core

LAV see HIV-1/HIV-2

LCMV (Lymphocytic Choriomeningitis Virus)

Virology-Immunology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ROSER

LD, Fluids

Division:

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

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CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Alternate Names: Lactate Dehydrogenase

LDH

LIS Mnemonic: BF LD

LD, Serum

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Requests for testing will only be processed if clinical details are provided in brackets next to the LD request. The term 'Do not

cancel' will not be accepted.

Lactate Dehydrogenase Alternate Names:

LDH

LIS Mnemonic: LD

LDH see LD, Serum

Division: Clinical Chemistry - Core

LDL-Cholesterol, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Cholesterol, LDL Alternate Names:

Low Density Lipoprotein Cholesterol

LIS Mnemonic: LDL D

LEAD, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions: Do Not Centrifuge!

Ship refrigerated. Do not freeze.

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

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Send copy of requisition.

Stability: 20 days at room temperature and 15 months at 2 to 8° C or frozen.

LIS Mnemonic: Lead only

Lead Level RO

Legionella

Tube/Specimen: Urine collected in dry sterile container

Requisition: CD0432/CD0433

Division: Virology-Immunology

Note: Ship at room temperature up to 24 hours or 2 to 8°C within 14 days

LIS Mnemonic: I LEGAG

Leishmaniasis - IFA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO LEISH

Leptospirosis PCR

Tube/Specimen: Urine collected in dry sterile container (no preservative), Whole blood 4.0 mL Lavender EDTA, CSF

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

LIS Mnemonic: RO LEPTOPCR

Leptospirosis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

LIS Mnemonic: RO LEPTO

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Leukemia and Lymphoma Screening – Bone Marrow

Tube/Specimen: Dark green stoppered 7.0 mL Lithium Heparin

Requisition: CD0046

Division: Hematopathology-Bone Marrow

Instructions: Specimen to be collected at the same time as Bone Marrow Aspiration.

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

later than 14:00 on Fridays (or the day before a holiday).

Maintain specimen at room temperature.

The requisition must accompany the specimen to the Flow laboratory.

Shipping: An unstained bone marrow slide, peripheral blood slide, patient diagnosis and a copy of the CBC results with differential and requisition must

accompany all specimens collected outside the QEII VG site.

Note: For specimens collected outside of the QEII VG site please notify the Flow Cytometry laboratory (902-473-5549) in advance when

requesting this test. Provide patient name, health card number and referral hospital contact information.

LIS Mnemonic: CELL SM

Leukemia and Lymphoma Screening – Lymph node, Tissue (including Fine Needle Aspirates), CSF and Body Fluids

Please note that these instructions refer only to the portion of the specimen that is being processed for cell surface marker analysis / flow cytometry testing; if the specimens need to be sent for histological, cytopathology, molecular or other specialized testing please ensure that proper collection procedures are followed as well for those tests. These instructions do not provide information on how to best partition the specimen for the different tests.

Tube/Specimen: Lymph Node/Tissue:

The portion of the lymph node or tissue specimen that is being submitted for cell surface marker / flow cytometry analysis is to be collected

and immediately placed in RPMI 1640 medium.

<u>CSF</u>:

Cerebrospinal fluid (CSF) specimens with a low number of cells can be collected without RPMI but need to be received by the Flow Cytometry Laboratory within 30 minutes after collection for adequate processing; if there is an expected delay in transport RPMI solution

should be added.

Fluids:

Other body fluids including pleural and peritoneal fluids require the addition of RPMI only if the specimen is not being sent immediately to

the laboratory.

Note: The time of collection and the time the RPMI solution is added should be indicated on the requisition. The amount of specimen and the amount of RPMI added to the fluid must be indicated on the requisition form. The requisition must accompany the specimen to the Flow

laboratory.

Requisition: CD0002C

Division: Hematopathology-Flow Cytometry

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

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

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

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

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

Specimens collected outside the QEII VG Site must be delivered to the lab as soon as possible to ensure optimal testing. Specimens should arrive no later than 24 hours after collection and be received in the laboratory no later than 14:00. The requisition and slides should accompany the specimen and the tissue type indicated on the requisition. A copy of the CBC results and differential should be sent if

available.

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

number and referral hospital contact information.

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

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

LIS Mnemonic: CELL SM

Leukemia and Lymphoma Screening - Peripheral Blood

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

Requisition: CD0002C

Division: Hematopathology-Flow Cytometry

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

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

Shipping: Maintain specimen at room temperature.

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

specimens collected outside of the QEII VG site.

Note: For specimens collected outside of the QEII VG site please notify the Flow Cytometry laboratory (902-473-5549) in advance when

requesting this test. Provide patient name, health card number and referral hospital contact information.

LIS Mnemonic: CELL SM

Levetiracetam

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 1.0 mL serum. Freeze.

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

Send copy of requisition.

LIS Mnemonic: LEVET

LH

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

Luteinizing Hormone Alternate Names:

Pituitary Gonadotropins

LIS Mnemonic:

Lipase, Plasma

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

Requisition: CD0002

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Division: Clinical Chemistry - Core

If sending specimen from outside QEII HSC transport frozen plasma on dry ice. Shipping:

LIPASE LIS Mnemonic:

Lipid Profile see Cholesterol, Plasma

Division: Clinical Chemistry - Core

Lipid Screen see Cholesterol, Plasma

Division: Clinical Chemistry - Core

.....

Lipid Testing see Cholesterol, Plasma

Division: Clinical Chemistry - Core

Lipoprotein (a) (LP(a))

(Do not confuse with APO A1 or B)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

LIS Mnemonic:

Liquid biopsy see Circulating Tumor DNA

Division: Molecular Diagnostics

Lithium

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic:

Lithium, Whole Blood

(Do not confuse with Lithium, RBC-no longer available)

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(Ordering physician must specify)

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

Referred Out: In-Common Laboratories

Instructions: **Do Not Centrifuge!** Cannot be tested on plasma.

Ship refrigerated. Do not freeze.

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

Send copy of requisition.

LIS Mnemonic: LIWB

see Iron Level Liver RO

Liver FE, Liver Iron

Referred Out: In-Common Laboratories

Liver Kidney Microsomal Antibodies (LKM)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Aliquot serum and **freeze**.

Send copy of requisition.

LIS Mnemonic: LKMAB

Long Chain Fatty Acid see Very Long Chain Fatty Acid

Referred Out: In-Common Laboratories

Low Density Lipoprotein see LDL-Cholesterol, Plasma

Division: Clinical Chemistry – Core

Ludiomil see Maprotiline Level

Referred Out: In-Common Laboratories

Lung Molecular Panel see Next Generation Sequencing – Solid Tumor panel

Division: Molecular Diagnostics

Lupus Anticoagulant Screen

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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Comments: Includes screening and confirmatory evaluations to detect Lupus Anticoagulants. This is not the same as an anticardiolipin antibody test,

which is often referred to as antiphospholipid antibody as well.

Referrals: Send 3 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Handling Information) in polypropylene vials

(12x75).

Alternate Names: Inhibitor (Non Specific)

Luteinizing Hormone

see LH

Division: Clinical Chemistry - Core

Lyme Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Alternate Names: Anti Borrelia Antibodies

Borrelia Antibodies Borrelia – Lyme

LIS Mnemonic: LYME

Lymphoma Protocol

see B-cell lymphoid clonality

Division: Molecular Diagnostics

Lymphoma Protocol

see T-cell lymphoid clonality

Division: Molecular Diagnostics

Lysosomal Acid Lipase Activity

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube. Whole Blood – **Do Not Centrifuge**.

Referred Out: In-Common Laboratories

Instructions: Send to VG CSA; will be frozen upon arrival.

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

Send copy of requisition.

LIS Mnemonic: LALAB

Lytes see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

Lytes, Stool see Fecal Electrolytes

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The electronic copy that resides on the document control system is the valid document. Any paper document labeled **Uncontrolled** must be verified against the electronic version prior to use.

Uncontrolled When Printed



Referred Out: In-Common Laboratories

L-Asparaginase, Serum

Tube/Specimen: Plain Red (Avoid gel separator tubes)

Referred Out: In-Common Laboratories

Instructions: Centrifuge and aliquot 3.0 mL serum into plastic vial.

Note: Transport on ice or frozen unless the specimen can arrive at Referred-out bench within 2 hours of collection.

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

Send copy of requisition.

Stability: Room temperature 2 hours, refrigerated at 2 to 8°C for 5 days and frozen for 6 months (at -80°C).

LIS Mnemonic: MISC REF

Macroprolactin

Tube/Specimen: One 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot serum into two separate aliquots of at least 1.0 mL each. Freeze!

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

Send copy of requisition.

LIS Mnemonic: MACPROL

MAG

see Myelin Associated Glycoprotein Antibody

Referred Out: In-Common Laboratories

Magnesium, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry – Core

LIS Mnemonic: MG

Magnesium, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from a pH adjusted and well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Refer to Appendix A for pH adjustment instructions. It is not acceptable to add preservative to an aliquot.

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

LIS Mnemonic: U24 Mg

U Mg

Malarial Parasites

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology – Microscopy

Comments: Analysis includes CBC, Manual Differential, Malarial rapid Screen, & Malarial Thick & Thin Smear Review.

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

Stability: EDTA specimen: 4 hours at room temperature.

Manganese, Plasma

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

Referred Out: In-Common Laboratories

Instructions Centrifuge ASAP!

Aliquot 3.0 mL plasma into plastic transfer vial. Freeze.

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

Send copy of requisition.

Utilization: Plasma manganese is used for potential nutritional deficiency.

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

LIS Mnemonic: MANGA P

Manganese, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions DO NOT Centrifuge!

Ship refrigerated. Do not freeze.

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

Send copy of requisition.

Utilization: Blood manganese is used for toxicity.

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

LIS Mnemonic: MANGA WB

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Maprotiline Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions Centrifuge at room temperature.

Aliquot serum into plastic vial and freeze.

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

Send copy of requisition.

Royal Blue Trace Element SERUM tubes (BD368380) and lavender topped EDTA plasma tubes are acceptable; indicate specimen type on Note:

tube.

LIS Mnemonic: MAPROT

Maternal Serum Testing

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: **IWK Laboratory**

Instructions Send directly to IWK refrigerated. Do not send to Referred-out and Research bench.

LIS Mnemonic: MATSCRN

Measles Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B Division: Virology-Immunology

Instructions: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.

Alternate Names: Rubeola

LIS Mnemonic: MEM (IgM Diagnosis)

MEG (IgG Immunity)

Measles PCR

Tube/Specimen: Urine collected in dry sterile container, nasopharyngeal swab collected in UTM or throat swab collected in UTM

Requisition: CD0432/CD0433

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 8°C for 2 days, urine is stable at 2 to 8°C for 24 hours. If longer freeze and ship frozen.

LIS Mnemonic: E MEASLES

Melanoma Associated Retinopathy Panel see Anti-Retinal Autoantibody (MARP)

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Referred Out: Mayo Medical Laboratories

Mellaril see Thioridazine Level

Referred Out: In-Common Laboratories

Mercury

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

Referred Out: In-Common Laboratories

Instructions **Do Not Centrifuge**; cannot be tested on plasma.

Do Not Freeze. Ship refrigerated.

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

Send copy of requisition.

LIS Mnemonic: Mercury

Mercury Level, Random Urine or 24-Hour Urine

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

container.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Avoid seafood consumption for 5 days prior to collection.

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

Send copy of requisition.

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

LIS Mnemonic: U Merc 24

U Merc

Metanephrines, 24 Hour Urine

Tube/Specimen: 24 hour urine collected with 25 mL of 6 mol/L (6N) HCL. Refrigerate during collection.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 50 mL urine aliquot of pH adjusted and well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Patients should be off Methyldopa for 5 days prior to and during collection. Restrict caffeine, nicotine and alcohol 24 hours prior to and

during collection.

Refer to Appendix A for pH adjustment instructions.

Send copy of requisition.

Stability: 2 to 8°C for 2 months or frozen for 90 days.

LIS Mnemonic: U24 Metan

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Metanephrines, Plasma

Tube/Specimen: Lavender topped EDTA tube.

Referred Out: In-Common Laboratories

Instructions Centrifuge at room temperature.

Aliquot at least 1.0 mL of plasma within 2 hours of collection and **freeze**. Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

LIS Mnemonic: FRMET P

Met HB see Methemoglobin

Division: Clinical Chemistry - Core

Methanol

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: Use non-alcoholic solutions such as peroxidase, saline or warm water to clean venipuncture site. Do not use alcohol preparations.

This test is time sensitive and requires Clinical Chemistry faculty On-call approval before sending through QEII locating at 902-473-2220. Once approved, send specimen STAT to QEII-VG Site CSA. Please contact laboratory at 902-473-5514 to transmit information about

specimen and shipment. Ensure specimen bag and transport containers are labelled as STAT.

Comments: Analysis includes quantitation of Formic Acid, the primary toxic metabolite of Methanol.

Alternate Names: Methyl Alcohol

Formic Acid

LIS Mnemonic: METHANOL

FORMIC ACID

ISOPROPANOL QUANTITATION

Methemoglobin

Tube/Specimen: Dark green stoppered, lithium heparinized whole blood on ice (tube must be full).

Requisition: CD3211_05 - 2022

Division: Clinical Chemistry - Core

Comments: Label barrel or tube with patient information in waterproof ink, immerse in slurry of ice and water and deliver to Processing Area within 30

minutes.

Shipping: If sending specimen from outside QEII HSC, notify Laboratory at 473-4340 when specimen is in transport and when it is expected.

Specimen must be kept cold but not frozen.

Alternate Names: Met Hb

LIS Mnemonic: METHB

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Methotrexate

Tube/Specimen: Plain Red Stoppered 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: These determinations can be done on micro specimens. Send at least 0.1 mL of serum for each.

Blood should be collected at various time intervals, according to the protocol being used.

Specimen should be protected from the light (wrap the tube in tin foil).

Stability: 72 hours at room temperature; 14 days at 2 to 8°C; 28 days frozen

Alternate Names: Celontin

LIS Mnemonic: MTX

Methyl Alcohol see Methanol

Division: Clinical Chemistry - Toxicology

Methylmalonic Acid Quantitative

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.5 mL of serum into plastic vial and **freeze at once**.

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

Send copy of requisition.

Stability: 48 days frozen.

LIS Mnemonic: MMAS

MHA-TP see Syphilis Serology

Division: Virology-Immunology

Microalbumin, Urine see Albumin, Urine

Division: Clinical Chemistry - Core

Microarray Testing for IWK see IWK Molecular Testing

Referred Out: IWK Clinical Genomics Lab

Microfilaria see Hem Microorganism

Division: Hematopathology-Microscopy

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Microglobulin, Beta 2, Urine		see Beta 2 Microglobulin, Urine
Referred Out:	In-Common Laboratories	
Microsatellite	Instability Testing	see MSI
Division:	Molecular Diagnostics	
Microsomal A	Antibodies	see Anti-Thyroid Peroxidase Antibodies
Division:	Clinical Chemistry - Core	
Mitotane		
Tube/Specimen:	Plain Red tube.	
Referred Out:	In-Common Laboratories	
Instructions:	Centrifuge at room temperature. Aliquot 1.0 mL of serum into plastic vial. Do not accession for non-Nova Scotia Health <i>Central Zone</i> Hospitals Send copy of requisition.	
Stability:	7 days at 2 to 8°C; 6 months froze	n.
LIS Mnemonic:	MITOTANE	
Mix (50-50)		see PT 50% Mix or PTT 50% Mix
Division:	Hematopathology - Coagulation	
MLPA		see CLL MLPA
Division:	Molecular Diagnostics	
MMF		see Mycophenolate
Division:	Clinical Chemistry - Toxicology	
Mofetil		see Mycophenolate
Division:	Clinical Chemistry - Toxicology	
Molecular Testing for IWK		see IWK Molecular Testing
Referred Out:	IWK Clinical Genomics Lab	

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Mono

PLM Laboratory Test Catalogue

see Epstein-Barr Virus

Division: Microbiology-Immunology Monosialoganglioside GM1 (IgM) see GM1 Ganglioside Antibody Referred Out: In-Common Laboratories Monospot see Epstein-Barr Virus Division: Microbiology-Immunology **MPA** see Mycophenolate Division: Clinical Chemistry - Toxicology MPL see Next Generation Sequencing - Myeloid panel Division: Molecular Diagnostics MPL exon 10 mutation see Next Generation Sequencing - Myeloid panel Division: Molecular Diagnostics **Mpox Virus PCR**

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

Requisition: CD0432/CD0433

Division: Virology-Immunology

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

LIS Mnemonic: E MKPX

MSI

Tube/Specimen: Tissue in paraffin block.

Requisition: CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Alternate Names: Microsatellite instability testing

MTHFR gene mutation

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Requisition: **IWK Clinical Genomics**

Instructions: Do not accession; send directly to IWK Clinical Genomics lab.

Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the IWK Clinical Genomics lab to prevent delay in

results.

Alternate Names: Methylenetetrahydrofolate reductase

LIS Mnemonic: None

Mucopolysaccharide Screen, Urine (Polysaccharide Screen) (Acid Mucopolysaccharide)

Tube/Specimen: Collect a random urine specimen; first morning collection preferred.

Referred Out: In-Common Laboratories

Instructions: Aliquot 5 mL of well mixed urine; freeze.

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

Send copy of requisition.

Stability: Not stable at room temperature; 2 to 8°C for 1 week and frozen >1 week.

Note: Provide age, gender and clinical history to facilitate interpretation of analytical findings and recommendation for further testing or

consultation.

LIS Mnemonic: U MUCO

Mumps Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

LIS Mnemonic: MPSG (IgG Immunity)

MPSM (IgM Diagnosis)-only performed upon request from Public Health, all others will be canceled and be tested for Mumps IgG

Mumps PCR

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

CD0432/CD0433 Requisition:

Division: Virology-Immunology

Swabs are stable at 2 to 8°C for 2 days, urine is stable at 2 to 8°C for 24 hours. If longer freeze and ship frozen. Shipping:

LIS Mnemonic: E MPS

Muscle Autoimmune Myositis Panel

see Autoimmune Myopathy/Myositis Profile

Referred Out: In-Common Laboratories

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Mutation analysis of BCR-abl transcripts see Next Generation Sequencing-Myeloid Panel (BCR-ABL Mutation,

ABL Kinase domain mutation)

Division: Molecular Diagnostics

MYC FISH

Tube/Specimen: Tissue in paraffin block

Requisition: CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Mycobacteriology Referred-out Identification, M. leprae request, Susceptibility, Genotyping Services

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

Referred Out: National Reference Centre for Mycobacteriology (NRCM)

Instructions: Susceptibility, Genotyping Services M. tuberculosis (MTB) shipped with Category A requirements

Non MTB shipped as Biological Substances Category B

Remaining shipped as Exempt Human Specimens

National Reference Centre for Mycobacteriology (NRCM) requisition

Mycobacteriology Referred-out specimens for Mycobacterium leprae (skin scraping slides and or Tissue on slide or block)

Tube/Specimen: Skin scraping slides and or tissues on slide or block

Referred Out:

Instructions: Shipped as Exempt Human Specimens

National Hansen's Disease Programs (NHDP) requisition

LIS Mnemonic:

Mycology (Sporothrix, Coccidioides immitis, Cryptococcus, Histoplasma capsulatum, Blastomyces dermatitidis,

Tube/Specimen: Isolate

Aspergillosis)

Referred Out: National Centre for Mycology

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

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

Mycology (18S)

Tube/Specimen: Isolate

Referred Out: The Hospital for Sick Children

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

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

Mycophenolate

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: This determination can be done on micro specimens when necessary.

Centrifuge at room temperature within 2 hours of collection and aliquot a minimum of 0.2 mL of plasma into a plastic vial.

Stability: Plasma: 1 week at 2 to 8 °C and frozen for 6 months.

Whole Blood: 2 hours at room temperature. Refrigerated and frozen specimens are not acceptable.

Comments: Pre-dose specimen is required.

Alternate Names: MPA

MMF CellCept Mofetil

LIS Mnemonic: MYCO

Mycoplasma genitalium

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

Requisition: CD0432/CD0433

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 30°C for 60 days, urine is stable at 2 to 30°C for 24 hours.

LIS Mnemonic: MYGEN

Mycoplasma PCR

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

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO ROSER

MYD88 see Next Generation Sequencing – Myeloid panel

Division: Molecular Diagnostics

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Myelin Associated Glycoprotein (MAG) Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum and **freeze**.

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

Send copy of requisition.

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

LIS Mnemonic: MAG

Myelin Oligodendrocyte Glycoprotein (MOG) Antibody

see Neuromyelitis Optica (NMO_IgG)

Referred Out: In-Common Laboratories

Myeloma Screen, Serum & Plasma see Protein Electrophoresis, Serum

Division: Clinical Chemistry - Immunology

Mysoline see Primidone Level

Referred Out: In-Common Laboratories

N-Acetylprocainamide see Procainamide/NAPA Level

In-Common Laboratories

N-Methylhistamine, 24-Hour Urine

Referred Out:

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

collection.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection.

Record Total Volume on both the aliquot and the requisition. Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHISU24

N-Methylhistamine, Random Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination.

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Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection.

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

Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHIS U

Na+ see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

NAAT testing for Microbiology Donor Transplant

Tube/Specimen: Two 4.0 mL EDTA Lavender topped tubes.

Requisition: CD0002A/CD0002B Division: Virology-Immunology

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

rejected.

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

accessioning.

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

Send whole blood to 4^{th} floor Microbiology for processing. Send copy of requisition.

LIS Mnemonic: NAAT

Referred Out:

NABS see Interferon beta Neutralizing Antibodies

Nasopharyngeal aspirate for Bordetella pertussis (Culture or PCR)

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

Instructions: Shipped as Biological Substances B.

In-Common Laboratories

Neonatal Autoimmune Thrombocytopenia

Tube/Specimen: From Mother and Father: Seven (7.0 mL) yellow topped ACD tubes or nine (4.5 mL) light blue topped sodium citrate tubes and one plain

red topped tube.

From Baby: One (2.0 mL) lavender topped EDTA tube.

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: Miscellaneous Hematology

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Neoral see Cyclosporine

Division: Clinical Chemistry - Toxicology

Neuromyelitis Optica (NMO_IgG), CSF

Tube/Specimen: Minimum 1.0 mL CSF.

Referred Out: In-Common Laboratories

Instructions: Aliquot in plastic vial. Freeze at once.

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

Send copy of requisition.

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

LIS Mnemonic: NMOFC

Neuromyelitis Optica (NMO_IgG), Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL serum into plastic vial. Freeze.

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

Send copy of requisition.

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

LIS Mnemonic: NMO

Referred Out:

Neurontin see Gabapentin Level

Referred Out: In-Common Laboratories

Neutrophil Oxidative Burst see Dihydrohodamine (DHR)

Next Generation Sequencing - Myeloid Panel

Mayo Medical Laboratories

Tube/Specimen: 4.0 mL EDTA Lavender stoppered tube

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

ABL Kinase domain mutation Alternate Names:

BCR-ABL Mutation

CALR JAK2 exon 12 KIT Asp816Val

MPL

MPL exon 10 mutation

Mutation Analysis of BCR-abl transcripts

MYD88 NGS

QBCRA-Mutation Analysis

TP53 mutation

LIS Mnemonic: 2LAVDNA

Next Generation Sequencing - Solid Tumor Panel

Tube/Specimen: Tissue in paraffin block.

Requisition: CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Alternate Names: **BRAF**

Referred Out:

KRAS

Lung Molecular Panel

NGS see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

see Vitamin B3 Niacin

Referred Out: In-Common Laboratories

Nicotinic Acetylcholine Receptor Antibody see Acetylcholine Receptor Antibodies

NMDA (NR1) Receptor Antibody, Serum or CSF

In-Common Laboratories

4.0 mL Gold SST (BD#367977) or 3.0 mL CSF Tube/Specimen:

Referred Out: In-Common Laboratories

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

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

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Send copy of requisition.

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

LIS Mnemonic: NMDA

NMDA CSF

Noradrenaline see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

Nordoxepin see Doxepin Level

Referred Out: In-Common Laboratories

Norepinephrine see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

Norepinephrine, Urine see Catecholamines, 24 Hour Urine

Division: In-Common Laboratories

Norfluoxetine see Fluoxetine Level

Referred Out: In-Common Laboratories

Norovirus PCR

Tube/Specimen: Stool collected in dry sterile container.

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: Assay tests for Rotavirus and Adenovirus as well.

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

LIS Mnemonic: E RAN

Nortriptyline see Amitriptyline

Referred Out: In-Common Laboratories

NT-ProBNP

Tube/Specimen: Light Green 4.5 mL Lithium heparin gel separator tube/plasma (2.0 mL)

Requisition: CD0002A or CD0002B

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Division: Clinical Chemistry - Core

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

Shipping from other zones: Serum; aliquot 2.0 mL into a plastic vial. Store and send at -20°C

Stability: 6 days at 2 to 8°C; 1 year at -20°C

Comments: The test will be canceled if a repeat request is made within 6 months of previous, unless for specific clinical reasons, "Do not cancel NT-

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

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

LIS Mnemonic: BNP

NT-BNP

Nuclear Factor

see Anti-Nuclear Antibody

Division: Immunopathology

Occult Blood, Stool

Tube/Specimen: Random stool collection

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Amount Required: Smear of stool on hemoccult card

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

follow a high fiber diet for 3 days prior to and during collection. All meats, turnip, horseradish, gravy, meat drippings, iron pills and vitamin

C preparations should be restricted.

LIS Mnemonic: ST OB

Oligoclonal Bands

Tube/Specimen: Minimum 1.0 mL CSF and a minimum 1.0 mL of serum (plain red or gold topped tube), ideally collected at the same time, but no more than

48 hours apart.

Both specimens are required for testing.

Referred Out: In-Common Laboratories

Instructions: CSA (VG & HI sites): Centrifuge, aliquot and freeze serum in the CSA receiving area.

Centrifuge, aliquot and freeze at least 1.0 mL serum.

Freeze at least 1.0 mL CSF.

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

Testing includes immunoglobulins.

Send copy of requisition.

LIS Mnemonic: Oligo

Organic Acid Analysis, Urine

Tube/Specimen: 10.0 mL random urine. Collection should be a "clean catch" technique to minimize bacterial contamination.

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Referred Out: IWK Metabolic Lab

Instructions:

Timed specimens are accepted (8-hour, 12-hour or 24-hour collections)

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to the IWK Metabolic Lab

LIS Mnemonic:

Osmolality, Fecal

Tube/Specimen: 5.0 mL random stool specimen in naturally liquid form.

Referred Out: In-Common Laboratories

Instructions: Formed stool not acceptable.

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

Send copy of requisition.

LIS Mnemonic: OSMO F

Osmolality, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: **OSMO**

Osmolality, Random or 24-Hour Urine

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

collection in a plain container.

CD0002 Requisition:

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

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

Stability: Room temperature for 3 hours, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

U OSMO LIS Mnemonic:

U24 OSMO

Osteocalcin

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature within 4 hours of collection.

Aliquot at least 1.0 mL serum and freeze.

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

Send copy of requisition.

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The electronic copy that resides on the document control system is the valid document. Any paper document labeled Uncontrolled must be verified against the electronic version prior to use.

Uncontrolled When Printed



Stability: Ambient 8 hours, refrigerated 3 days, frozen 3 months.

LIS Mnemonic: OSTEO

Ovarian Cancer Antigen see CA125

Division: Clinical Chemistry - Core

Oxalate, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container. Refrigerate during collection.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot of pH adjusted and well-mixed collection.

Record Total Volume of the 24-hour urine on both the specimen aliquot and requisition. Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.

Patients should refrain from taking excessive amounts of Vitamin C or from consuming Vitamin C rich food for at least 48 hours prior to urine

collection.

Refer to Appendix A for pH adjustment instructions. Random Oxalate specimens require a pH <8.0.

Stability: Room temperature for 1 hour, 2 to 8°C (preferred) for 7 days (pH<3.0) and frozen for 2 weeks (pH<3.0).

LIS Mnemonic: U24 OXA

U OXA R [IWK specimens only]

Oxygen Content see Blood Gases

Division: Clinical Chemistry - Core

Oxygen Saturation see Blood Gases

Division: Clinical Chemistry - Core

Pancreatic Cyst Fluid for Amylase and CEA see Amylase and CEA, Pancreatic Cyst Fluid and

CEA and Amylase, Pancreatic Cyst Fluid and

Division: Clinical Chemistry - Core

Pancreatic Polypeptide

Tube/Specimen: Two lavender topped EDTA tubes. Keep cold on ice!

Patient must be fasting 8 hours prior to collection unless instructed otherwise by the ordering physician.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge (refrigerated centrifuge is not required), aliquot 3.0 mL plasma in plastic vial and **freeze immediately**.

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

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Send copy of requisition.

LIS Mnemonic:

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

Tube/Specimen: Minimum 2.0 mL CSF

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

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

PNP CSF LIS Mnemonic:

Paraneoplastic Antibodies, Serum (Includes anti Ri, Yo, Hu)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 3.0 mL serum into plastic vial. Freeze at once.

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

Send copy of requisition.

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

LIS Mnemonic: PNP Ab

Parasite Identification

Tube/Specimen: Organism for identification

Referred Out: Nova Scotia Museum of Natural History

Instructions: Shipped as Category B.

Parasite Screening

Tube/Specimen: Stool collected in SAF fixative

Requisition: CD0432/CD0433

Division: Virology-Immunology

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

> immunosuppression, worm seen in stool, or for children under 16. Ordering physician to indicate relevant information on the requisition; relevant (travel country, immigration country, immunosuppressed, clinical information indicating worms or other parasites, public health

request) added as Order Note by person entering test into LIS.

Shipping: Specimen in SAF fixative can be shipped at room temperature within 7 days

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LIS Mnemonic: PARSCR (EIA screen)

M PAR (if any of the information above is indicated)

Parathyroid Hormone Intact

2.0 mL Lavender (EDTA). This tube is not to be shared. Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Overnight fasting (8 hours) is preferred. Please indicate fasting status.

Plasma can be stored for 48 hours at 2 to 8°C. Freeze and send frozen plasma, if longer. Shipping:

Alternate Names: Intact PTH

PTH Intact

LIS Mnemonic: PTH

Parathyroid Hormone Related Peptide Parathyroid Hormone Related Protein

see PTH Related Peptide

Referred Out: In-Common Laboratories

Paroxetine Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into plastic vial and freeze.

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

Send copy of requisition.

Note: Royal Blue Trace Element SERUM tube (BD368380) and lavender topped EDTA plasma tubes also acceptable. Indicate specimen type on

aliquot tube.

LIS Mnemonic: **PAROX**

Paroxysmal Nocturnal Hemoglobinuria

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002C

Division: Hematopathology - Flow Cytometry

Specimen must arrive in Flow Cytometry within 24 hours of collection and no later than 14:00 on Fridays (or day before Holiday). Instructions:

The requisition must accompany the specimen to the Flow laboratory.

Please notify Flow Cytometry lab at 902-473-5549 when requesting this test. Note:

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Alternate Names: PNH

CD55/59 Testing

LIS Mnemonic: SM PNH

Partial Thromboplastin Time see PTT

Division: Hematopathology - Core

Parvovirus B19 Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Comments: In investigating a viral exanthem, rubella and measles serology should also be requested.

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

LIS Mnemonic: PARVG (IgG Immunity)

PARVM (IgM Diagnosis)

Parvovirus PCR

Tube/Specimen: One 4.0 mL Lavender (EDTA) tube

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20

minutes and ship one 2 mL aliquot at 2 to 8°C.

LIS Mnemonic: RO PARVOPCR

PBG, Random Urine

Paxil see Paroxetine Level

Referred Out: In-Common Laboratories

see Porphyrin Precursors, Random Urine

Referred Out: In-Common Laboratories

PBG Deaminase see Porphobilinogen Deaminase

Referred Out: In-Common Laboratories

PCP (Pneumocystis jirovecii) PCR

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

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Requisition: CD0432/CD0433

Division: Virology-Immunology/Bacteriology

Comments: Positive or indeterminate PCR specimens will have DFA testing performed.

Shipping: Specimens are stable at 2 to 8°C for 3 days for PCR. However, they must be received in the Central Zone microbiology laboratory within 24

hours for slide preparation.

LIS Mnemonic: E PCP

Peripheral Smear

Division: Hematopathology - Microscopy

Comments: Can be done with Profile

PFA see Platelet Function Assay

Division: Hematopathology - Coagulation

pH, Body Fluid

Tube/Specimen: Body Fluid collected anaerobically in a pre-heparinized Blood gas syringe on ice.

Maximum heparin ratio must be <10 IU/mL fluid

Recommended volume: 1 mL Minimum volume: 0.7 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Do not transport with needle attached. Label barrel with patient information in waterproof ink, immerse in a slurry of ice water and deliver to

see Urinalysis (including microscopic examination if required)

Processing Area immediately. Indicate fluid type on requisition.

Shipping: Specimen must be kept cold but not frozen.

LIS Mnemonic: BF PH

Division: Clinical Chemistry - Core

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

Phenobarbital

pH, Urine

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

Specimens should not be collected until the blood concentration is a steady state (3-4 half-lives).

LIS Mnemonic: PHENO

Phenytoin

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Specimens should not be collected until the blood concentration is at a steady state (3-4 half-lives).

Alternate Names: Dilantin

LIS Mnemonic: PHENY

Phenytoin, Free

(Do Not Confuse with Phenytoin)

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

Referred Out: In-Common Laboratories

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

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

Send copy of requisition.

Molecular Diagnostics

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

LIS Mnemonic: FRDII

Division:

Division:

see BCR/abl Translocation (RT PCR)

Philadelphia Chromosome

Phosphatase, Alkaline see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

Phosphate see Phosphorous, Plasma

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Phosphorous Inorganic see Phosphorous, Plasma

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Phosphorous, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Inorganic Phosphorous

Phosphate

Phosphorus, Inorganic

PO4

LIS Mnemonic: PHOS

Phosphorous, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from pH adjusted and well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Refer to Appendix A for pH adjustment instructions.

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

Alternate Names: Inorganic Phosphorous

Phosphate

Phosphorus, Inorganic

PO4

LIS Mnemonic: U24 PHOS

U PHOS

PI Typing see Alpha-1-Antitrypsin Phenotyping

Referred Out: Mayo Medical Laboratories

Pituitary Gonadotropins see LH

Clinical Chemistry - Core

Plasma Hemoglobin

Division:

Tube/Specimen: Dark green stoppered lithium heparin tube

Requisition: CD0002

Division: Hematopathology - Core

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Shipping: Send whole blood to the laboratory within three hours of collection. If shipping is delayed, double-spin and freeze the plasma. Send the frozen

specimen on dry ice.

Plasminogen

Tube/Specimen: Light Blue topped Sodium Citrate tube.

Referred Out: Hamilton General Hospital

Instructions: Send copy of requisition and specimen to Hematopathology Coagulation lab for processing.

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

delay in results.

LIS Mnemonic: Plasminogen

Plasminogen Activator Inhibitor

Tube/Specimen: Light Blue topped Sodium Citrate tube. Patient should not be on anticoagulant therapy.

Referred Out: Mayo Medical Laboratories

Instructions: Send copy of requisition and specimen to Hematopathology Coagulation lab for processing.

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

delay in results.

LIS Mnemonic: PAI

Platelet Aggregation

Tube/Specimen: 7 x 2.7 mL Light Blue Sodium Citrate tubes. Collection must follow a non-additive tube.

Requisition: CD0002

Division: Hematopathology – Coagulation

Instructions: Prior arrangements for analysis must be made with Hematology Lab phone 902-473-4059 by an approved Hematologist.

Blood is taken under supervision of Advanced Coagulation Technologist. Lab must know all patients' medication for past 10 days.

Stability: Keep specimens at room temperature.

LIS Mnemonic: PLT AGG

Platelet Count see Profile

Division: Hematopathology - Core

Platelet Function Assay

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

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

Division: Hematopathology - Coagulation

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

Test is available Monday to Friday until 1600 hours.

Comments: Patient medications and bleeding/bruising history should be listed on separate lab questionnaire indicated below.

The VG AC Platelet Function Analyzer Questionnaire Form 5972 must be entirely completed and must accompany the specimens.

Alternate Names: PFA

Platelet Function Studies

see Platelet Aggregation

Division: Hematopathology - Coagulation

Platelet Typing

see Anti-Platelet Antibody

Referred Out: McMaster University Health Sciences Centre

PML-RAR gene fusion

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4° C, or frozen on dry ice. Stability – 12 hours in saline at 4° C, or 7 days frozen.

RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: RAR alpha

> Retinoic acid receptor Translocation (15; 17)

t (15;17)

LIS Mnemonic: 2LAVDNA

Pneumococcal Immunity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

LIS Mnemonic: RO PNEUMO

Pneumococcal Typing

(Blood, CSF, Sterile site isolates)

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Tube/Specimen:	Blood, CSF, sterile site isolates.

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Category B.

PNH see Paroxysmal Nocturnal Hemoglobinuria

Division: Hematopathology – Flow Cytometry

PNP Antibodies PNP Antibodies, CSF see Paraneoplastic Antibodies, Serum and Paraneoplastic Antibodies, CSF

Referred Out: In-Common Laboratories

PO4 see Phosphorus, Plasma

Division: Clinical Chemistry - Core

Polycythemia Vera see Jak2 gene mutation

Division: Molecular Diagnostics

Polyoma PCR

Tube/Specimen: One 4.0 mL Lavender (EDTA) tube

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20

minutes and ship one 2 mL aliquot at 2 to 8°C.

LIS Mnemonic: POLY

Polysaccharide Screen

see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

Porphobilinogen Deaminase

(ALA Dehydratase, Uro-1-Synthetase, Hydroxymethylbilane Synthase (Do Not Confuse with Hydroxymethylbilane Synthase Gene))

Tube/Specimen: Dark green topped Lithium Heparin tube wrapped in foil to **protect from light** and a lavender topped EDTA tube.

Referred Out: In-Common Laboratories

Instructions: Send dark green topped heparinized tube wrapped in foil to the Referred-out bench; Do Not Centrifuge!

Send lavender topped EDTA tube to Hematopathology – Core lab for a hematocrit.

Do not freeze.

Do not accession for non-Nova Scotia Health ${\it Central\ Zone}$ Hospitals

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Send copy of requisition.

LIS Mnemonic: PBGD

Porphyrins, Blood

see Porphyrin Screen, Plasma

Referred Out: In-Common Laboratories

Porphyrin Precursors, Random Urine or 24-Hour Urine (Do Not Confuse with PBGD)

Tube/Specimen: **Protect from light and refrigerate!**

Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection in a container

with 5g Sodium Carbonate.

Referred Out: In-Common Laboratories

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

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

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

Send copy of requisition.

Stability: Refrigerated 2 days; frozen 1 month

Alternate Names: Delta-Aminolevulinic Acid

Porphobilinogen

LIS Mnemonic: PBGRU

PBG

Porphyrin Screen, 24-Hour Urine

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

Protect from light and refrigerate during and after collection!

Referred Out: In-Common Laboratories

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

Record total volume.

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

Preservative MUST be added, and specimen frozen within 2 days of collection.

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

Send copy of requisition.

Stability: Refrigerated 2 days; frozen 1 month (Apr 26/16)

LIS Mnemonic: PORPHS U

Porphyrin Screen, Plasma

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature and aliquot 2.0 mL plasma. Protect from light and freeze immediately. Avoid hemolysis.

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Store and send frozen.

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

Send copy of requisition.

Stability: Frozen: 2 months

LIS Mnemonic: MISC REF

Porphyrin Screen, Fecal

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

Protect from light!

Referred Out: In-Common Laboratories

Instructions: Freeze.

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

Send copy of requisition.

LIS Mnemonic: ST Porph

Post-BMT see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Post-BMT recipient see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Post Transfusion Purpura

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.

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

Potassium, Fluids

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF K

Potassium, Plasma

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The electronic copy that resides on the document control system is the valid document. Any paper document labeled **Uncontrolled** must be verified against the electronic version prior to use.

Uncontrolled When Printed

see Electrolytes (Na, K), Plasma



Division: Clinical Chemistry - Core

Potassium, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

Potassium, Random Urine or 24-Hour Urine

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

container

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

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

LIS Mnemonic: U24 K

UΚ

PRA see HLA Antibody Screening

Division: Hematopathology – Histocompatibility (HLA)

PRA/LAS

(Islet Transplant Program ONLY)

Tube/Specimen: Two 5.0 mL Red topped tubes.

Referred Out: University of Alberta

Instructions: **Do Not Accession.**Centrifuge 15 minutes at 3000 rpm.

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

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

PRAD1 see BCL1-IGH gene fusion

Division: Molecular Diagnostics

Prealbumin, Serum

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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LIS Mnemonic: **PREALB**

Pre-BMT donor see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Pre-BMT recipient see Chimerism Analysis for BMT

Division: Molecular Diagnostics

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

Prekallikrein see Fletcher Factor

Referred Out: Hamilton General Hospital

Prenatal Testing Collection

Lavender (EDTA) Tube/Specimen:

Referred Out: **IWK**

Instructions: Send directly to IWK refrigerated. Do not send to Referred-out and Research bench.

Alternate Names: Maternal Antibodies

LIS Mnemonic: **PRENAT**

Primidone Level

Tube/Specimen: Plain Red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 0.5 mL of serum into a plastic vial. Freeze.

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

Send copy of requisition.

LIS Mnemonic: Prim

Procainamide/NAPA Levels

Tube/Specimen: Plain Red topped tube. Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into a plastic vial. Freeze.

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

Send copy of requisition.

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LIS Mnemonic: Proc/NAPA

Profile, AutoDiff

2.0 mL Lavender (EDTA) Tube/Specimen:

Requisition: CD0002

Division: Hematopathology - Core

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

Note: Differentials are automatically performed on every profile. If there are concerns then a manual differential will be performed.

LIS Mnemonic:

CBC Auto Diff CBC WAM Profile Auto Diff Profile, P

Profile, AutoDiff with Citrate for Platelet

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

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

Division: He matopathology-Core

Instructions: DO NOT CENTRIFUGE

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

CBC with AutoDiff testing is completed on EDTA specimen. If platelet clumping is present, the platelet count will be enumerated from the Note:

Citrate specimen.

LIS Mnemonic: CITRATE

Profile, Manual Differential

Tube/Specimen: 4.0 mL Lavender (EDTA)

CD0002 Requisition:

Division: Hematopathology - Microscopy

Comments: Testing includes CBC.

LIS Mnemonic: PM

Profile, No Diff

2.0 mL Lavender (EDTA) Tube/Specimen:

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Requisition: CD0002

Division: Hematopathology - Core

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

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

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

Progesterone

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Shipping: Separate serum within 5 hours of collection. Serum stable when removed from gel separator for 10 days at 2 to 8°C. Freeze and send frozen

serum, if longe

Progesterone specimen must be poured off from gel barrier primary SST tubes into an aliquot tube. Serum remaining in gel barrier SST tubes

have shown decreases in progesterone levels.

LIS Mnemonic: PROG

Proinsulin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at 4°C.

Aliquot 1.0 mL of serum into a plastic vial. Store and send frozen.

Send copy of requisition.

LIS Mnemonic: Proinsulin

Prolactin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

see PSA

LIS Mnemonic: PROL

Prostatic Specific Antigen

Division: Clinical Chemistry - Core

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Protein C Activity

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

vials (12x75).

Protein Electrophoresis, Serum

Tube/Specimen: a) Nova Scotia Health Central Zone collection: 4.0 mL Gold SST (BD#367977) & Light Green 4.5 mL Lithium heparin and gel for plasma

separation.

OR

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

Requisition: CD0002

Division: Clinical Chemistry - Immunology

Comments: Testing includes Total Protein and Protein Electrophoresis.

Shipping: Outside of Nova Scotia Health Central Zone collection: Separate and send 2 frozen aliquots of serum from Gold Stoppered SST.

Do Not Send Frozen Plasma

Alternate Names: Serum Protein Electrophoresis

Protein S (Free)

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

vials (12x75).

Protein Total, Fluids

Tube/Specimen: Submit only one of the following specimens:

Spinal Fluid: 1.0 mL Spinal Fluid collected in sterile plastic screw top tube

Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes.

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: TP

LIS Mnemonic: CSF TP

BF TP

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Protein Total, Plasma

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Blood must be collected with minimum stasis.

Alternate Names: TP

Total Protein

LIS Mnemonic: TP

Protein Total, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection

Record Total Volume of 24-hour urine on both the aliquot and the requisition.

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

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

Alternate Names: U PCR

LIS Mnemonic: U24 TP

U PCR

Prothrombin gene mutation

Tube/Specimen: 4.0 mL EDTA Lavender stoppered - One tube sufficient for both FV and PT mutation

Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C. Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

As per hereditary thrombophilia best practice testing guidelines, Prothrombin gene mutation testing is restricted to hematologists, medical

geneticists, neurologists, and general internists for both adult and pediatric populations.

Alternate Names: PT 20210 mutation

LIS Mnemonic: 2LAVDNA

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Prothrombin Time see INR (PT)

Division: Hematopathology - Core

Protoporphyrin, Erythrocyte/Free

(Do Not Confuse with Zinc Protoporphyrins)

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

Referred Out: In-Common Laboratories

Instructions: Do Not Centrifuge!

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

Refrigerate

Send copy of requisition.

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

LIS Mnemonic: MISC REF & CBC

Protriptyline Level

Tube/Specimen: Plain red topped tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into plastic vial and freeze.

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

Send copy of requisition.

Note: Royal Blue Trace Element SERUM tube (BD368380) and lavender topped EDTA plasma tubes also acceptable. Indicate specimen type on

aliquot tube.

LIS Mnemonic: PROTR

Proviral HIV DNA V3 Genotyping

Tube/Specimen: 4.0 mL Lavender topped EDTA tube.

Referred Out: BC Centre for Excellence

Requisition: Laboratory Requisition Form for NON-B.C. Patients Only

Shipping: Whole blood may be transported at 2 to 25°C to be received within 24 hours. **Do not centrifuge specimen!**

LIS Mnemonic: RO HIVPROVIRAL

Prozac see Fluoxetine Level

Referred Out: In-Common Laboratories

PSA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

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Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 24 hours at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Prostate Specific Antigen

LIS Mnemonic: PSA

PSA, Free

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 24 hours at 2 to 8°C. Freeze and send frozen serum, if longer.

Include age of patient.

Alternate Names: Free Prostate Specific Antigen

LIS Mnemonic: FPSA

Pseudocholinesterase

see Acetylcholinesterase, Plasma

Division: Clinical Chemistry – Core

Pseudocholinesterase Phenotyping

notyping see Cholinesterase Phenotyping

Referred Out: In-Common Laboratories

PT see INR (PT)

Division: Hematopathology - Core

PT 20210 mutation

see Prothrombin Gene Mutation

Division: Molecular Diagnostics

PT 50% Mix

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

Requisition: CD0002

Division: Hematopathology - Coagulation

Instructions: This test is done only when the INR (PT) is abnormal.

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Division:

PLM Laboratory Test Catalogue

PTH Intact see Parathyroid Hormone Intact

PTH Related Peptide

Tube/Specimen: 10 mL Army Green - Glass Sodium Heparin (BD#366480). Lithium Heparin tubes are NOT acceptable.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL plasma into plastic vial and freeze at once.

Record primary tube type (i.e. Sodium Heparin) on the aliquot label. Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

Clinical Chemistry - Core

Stability: Room temperature and refrigerated – 7 days; frozen – 28 days.

LIS Mnemonic: PTHRP

PTP Antibody Testing

see Post Transfusion Purpura

Referred Out: McMaster University HSC

PTT

Tube/Specimen: 1.8 mL Light blue buffered sodium citrate. Must be a full draw.

Requisition: CD0002

Division: Hematopathology - Core

Instructions: Indicate on requisition if patient is on any anticoagulants.

Alternate Names: Partial Thromboplastin Time

PTT 50% Mix

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

Requisition: CD0002

Division: Hematopathology - Coagulation

Instructions: This test is done only when the PTT is abnormal.

PTT Dade

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

Requisition: CD0002

Division: Hematopathology - Coagulation

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

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vials (12x75).

Alternate Names: DADE

Pyridoxal Phosphate Pyridoxic Acid

see Vitamin B6 Level

Pyridoxine

Referred Out: In-Common Laboratories

Pyruvate

(Do Not Confuse with Pyruvate Kinase)

Collectors MUST call Clinical Chemistry (VG 473-4340; HI 473-4843) for instructions prior to collection. Tube/Specimen:

Specimens must be collected at QEII and received at either the HI Stat Lab or VG Core Lab within 30 minutes of collection.

Green topped Lithium Heparin whole blood tube. Place on ice!

Referred Out: In-Common Laboratories

Instructions: Clinical Chemistry must make a filtrate from the specimen before sending it to the Referred-out bench; untreated specimens are not suitable

for analysis.

Freeze: if the specimen thaws, it is not suitable for analysis.

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

Send copy of requisition.

LIS Mnemonic: Pyruvate

Pyruvate Kinase, Whole Blood

Yellow topped ACD tube. Keep refrigerated! Tube/Specimen:

Referred Out: Mayo Medical Laboratories

Instructions: 6.0 mL Lavender topped EDTA tube is also acceptable.

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

Send copy of requisition.

Stability: Refrigerated - up to 20 days.

LIS Mnemonic: Pyr Kin

Q-Fever

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

Alternate Names: Coxiella Burnetii

RO QFEVER LIS Mnemonic:

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QBCRA – Mutation Analysis see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

QuantiFERON®-TB Gold see IGRA

Referred Out: St. John Regional Hospital

Quantitative BCR/abl see BCR-ABL gene fusion

Quinidine Level

Division:

Tube/Specimen: Plain Red topped tube.

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL of serum into a plastic vial.

Send copy of requisition.

Molecular Diagnostics

Stability: Room temperature 14 days, Refrigerated 14 days, Frozen 28 days

LIS Mnemonic: Quinid

RA Titre see Rheumatoid Factor

Division: Clinical Chemistry - Core

Rabies Immunity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

RO RABIES LIS Mnemonic:

Rapamycin see Sirolimus

Division: Clinical Chemistry - Toxicology

RAR alpha see PML-RAR gene fusion

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Division: Molecular Diagnostics

RARa see PML – RAR gene fusion

Division: Molecular Diagnostics

RAST Tests (Allergy Testing)

Tube/Specimen: 4.0 mL Gold SST (BD#367977). A copy of the RAST requisition MUST accompany the specimen.

Referred Out: **IWK**

Instructions: Centrifuge at room temperature.

Aliquot at least 2.0 mL of serum into a plastic vial.

A copy of the RAST requisition MUST accompany the specimen.

Do Not Freeze.

Do not accession for non-Nova Scotia Health Central Zone Hospitals; send directly to IWK lab.

LIS Mnemonic: **RAST Tests**

RBC Folate see Folate, Red Cell

Referred Out: In-Common Laboratories

see Syphilis Serology **Reagin Screen Test**

Division: Virology-Immunology

Red Blood Cell Folate see Folate, Red Cell

Red Cell Count see Profile

Division: Hematopathology - Core

In-Common Laboratories

Red Cell Folate see Folate, Red Cell

Referred Out: In-Common Laboratories

Red Cell Survival

Referred Out:

Division: Molecular Diagnostics

This determination is done by Nuclear Medicine. Phone 902-473-7510 to make arrangements.

Reducing Substances, Stool

Tube/Specimen: 3g of random, loose stool.

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Referred Out: Mayo Medical Laboratories

Instructions: Freeze immediately!

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

Send copy of requisition.

Note: Specimens from timed collections (24, 48, and 72 hour) or formed stool are <u>not acceptable</u>.

Stability: Frozen – 7 days

LIS Mnemonic: ST Reduce

Reptilase Test

Tube/Specimen: Light blue topped Sodium Citrate tube.

Referred Out: Hamilton General Hospital

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: REPTILASE

Reticulocyte Count

Tube/Specimen: 2.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology - Core

Comments: Profile must be ordered with test.

Retinoic Acid Receptor see PML-RAR gene fusion

Division: Molecular Diagnostics

Retinoic Acid Receptor Alpha see PML – RAR gene fusion

Division: Molecular Diagnostics

Retinol see Vitamin A

Referred Out: In-Common Laboratories

Reverse T3 (Reverse Triiodothyronine, RT3, T3 Reverse)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions Aliquot 2.0 mL serum. Freeze.

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

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Stability: Frozen - 28 days; room temperature/refrigerated - 7 days.

LIS Mnemonic: REVT3

RF Quantitative

see Rheumatoid Factor, Quantitative

Division: Clinical Chemistry - Core

Rheumatoid Factor, Quantitative

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Separate serum within 5 hours of collection.

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

Alternate Names: RF Quantitative

LIS Mnemonic: RFQ

Riboflavin see Vitamin B2

Referred Out: In-Common Laboratories

Rickettsia

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Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition. Indicate specific test request (spotted fever or typhus group).

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

LIS Mnemonic: RO ROSER

Rivotril see Clonazepam

Referred Out: In-Common Laboratories

RNP see Anti-Nuclear Antibody (ANA)

Division: Immunopathology

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see Anti-Nuclear Antibody (ANA

Division: Immunopathology

ROS1 FISH

Tube/Specimen: Tissue in paraffin block

Requisition: CD2573

Molecular Diagnostics Division:

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Rotavirus PCR

Tube/Specimen: Stool collected in dry sterile container

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: Assay tests for Norovirus and Adenovirus as well.

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

LIS Mnemonic: E RAN

Routine typing of Haemophilus influenza (From sterile sites or questionable outbreaks)

Tube/Specimen: Isolate, typing

Referred Out:

Instructions: Porter service for delivery.

Shipped as Category B.

RPR see Syphilis Serology

Division: Virology-Immunology

RST see Syphilis Serology

Division: Virology-Immunology

Rubella

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002A/ CD0002B Requisition: Division: Virology-Immunology

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Note: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.

LIS Mnemonic: RUBG (IgG) RUBM (IgM)

Rubeola see Measles Antibody

Division: Virology-Immunology

Saccharomyces cer. Antibodies

S. cerevisiae Antibodies

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions Centrifuge at room temperature.

Aliquot at least 1.0 mL serum.

Ship frozen.

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

Send copy of requisition.

Stability: Refrigerated 7 days, frozen >7 days

LIS Mnemonic: ASCA

Salicylates

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: SAL

Sandimmune IV see Cyclosporine

Division: Clinical Chemistry - Toxicology

SARS-CoV-2 PCR

Tube/Specimen: Nasopharyngeal swab in viral transport media, nose/throat Aptima Multitest swab, throat gargle, bronchial wash, nasopharyngeal aspirate,

endotracheal aspirate, sputum, lung tissue, pleural fluid.

Requisition: CD0432/CD0433

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 8°C for 4 days. Gargle specimens are stable at 2 to 30°C for 2 days. Bronchial wash and sputum specimens are stable

at 2 to 8°C for 3 days.

LIS Mnemonic: NCOV (routine request)

E NCOVST (stat request)

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Schillings Test

Division: Molecular Diagnostics

Comments: Patient is sent to Nuclear Medicine 3rd Floor, ACC Building.

Schistosomiasis-IFA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition. Refer to "Microbiology User's Manual" for collection procedures.

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

LIS Mnemonic: RO SCHISTO

SCL-70 see Anti-Nuclear Antibody (ANA)

Division: Immunopathology

Sedimentation Rate see ESR

Division: Hematopathology - Core

Selenium Level

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge ASAP!

Aliquot 3.0 mL plasma into plastic transfer vial. **Freeze at once!** Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

Utilization: Plasma selenium is used for potential nutritional deficiency.

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

LIS Mnemonic: Selenium

Serotonin Level

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum and freeze ASAP!

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A low tryptophan diet is recommended for 48 hours prior to collection.

During this period, patient must abstain from avocados, bananas, coffee, plums, pineapple, tomatoes, walnuts, hickory nut,

Mollusks, eggplant, and medications such as aspirin, corticotropins, MAO inhibitors, phenacetin, catecholamines, reserpine and nicotine.

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

Send copy of requisition.

Stability: Room temperature 48 hours, refrigerated 1 month, frozen 3 months.

LIS Mnemonic:

Serotonin, 24 Hour Urine

Tube/Specimen: 24-hour urine collected in a container with 30 mL 6N HCL as a preservative. Do Not Use Boric acid.

Referred Out: In-Common Laboratories

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

Record Total Volume of 24-hour urine on both the aliquot and the requisition.

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

A low tryptophan diet is recommended for 48 hours prior to collection.

During this period, patient must abstain from avocados, bananas, coffee, plums, pineapple, tomatoes, walnuts, hickory nut,

Mollusks, eggplant and medications such as aspirin, corticotropins, MAO inhibitors, phenacetin, catecholamines, reserpine and nicotine.

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

Send copy of requisition.

Stability: Room temperature 48 hours, refrigerated 1 month, frozen 3 months.

LIS Mnemonic: U24 SERO

Serum Folate see Folate Serum

Division: Clinical Chemistry - Core

Sex Hormone Binding Globulin

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

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

SHBG LEVEL LIS Mnemonic:

Sezary Cells

Tube/Specimen: 4.0 mL Lavender (EDTA)

CD0002 Requisition:

Division: Hematopathology - Microscopy

Comments: Analysis must include a CBC, Auto Differential, and Manual Differential.

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SGOT, Plasma see Aspartate Aminotransferase (AST), Plasma

Division: Clinical Chemistry - Core

SGPT, Plasma see Alanine Aminotransferase (ALT), Plasma

Division: Clinical Chemistry - Core

SHM see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

Short Tandem Repeats (STR)

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Sickle Cell Screen

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology - Core

Sinequan see Doxepin Level

Referred Out: In-Common Laboratories

Sirolimus

2.0 mL Lavender (EDTA) Tube/Specimen:

CD0002 Requisition:

Division: Clinical Chemistry - Toxicology

Instructions: Results are available same day for specimens received by 1200. This determination can be done on micro specimens when necessary.

Comments: Pre-dose specimen is required.

Specimens can be stored at 2 to 8°C for 24 hours; if over 24 hours, mix whole blood, transfer to a plastic tube, freeze and send frozen whole Shipping:

blood on dry ice.

Alternate Names: Rapamycin

LIS Mnemonic: SIRO

SMsee Autoantibodies Panel

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Division: Immunopathology

Sodium, Fluids

Tube/Specimen: Submit only one of the following specimens:

10.0 mL Dialysate Fluid collected in sterile plastic screw top tubes.

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: DF NA

BF NA

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

Division: Clinical Chemistry - Core

Sodium, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

Sodium, Random Urine or 24-Hour Urine

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

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

Record Total Volume of 24-hour urine on both the aliquot and the requisition.

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

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

LIS Mnemonic: U24 NA

Requisition:

U NA

Somatic BRCA mutation in ovarian tumor

CD0046 or CD2573

Tube/Specimen: Tissue in paraffin block

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Alternate names: BRCA 1/2 in ovarian cancer

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LIS mnemonic:	2LAVDNA		
Somatic hype	rmutation	see IGHV Somatic Hypermutation	
Division:	Molecular Diagnostics		
Somatomedin	-C	see Insulin Like Growth Factor-1	
Division:	Clinical Chemistry - Core		
Specific Grav	ity, Fluid		
Tube/Specimen:	10.0 mL Body Fluid collected in sterile plastic screw top tubes		
Requisition:	CD0002		
Division:	Clinical Chemistry - Core		
Shipping:	If sending specimen from outside QEII HSC, transport at room temperature.		
LIS Mnemonic:	BF SG		
Specific Grav	ity, Random Urine	see Urinalysis (including microscopic examination if required)	
Division:	Clinical Chemistry – Core		
Comments:	Urine Specific Gravity is available	ole by dipstick analysis as part of routine urinalysis.	
Spinal Fluid		see specific test for instructions.	
Division:	Hematopathology - Core		
Spinal Fluid I	Lactate	see Lactate, Spinal Fluid	
Referred Out:	In-Common Laboratories		
SSA		see Anti-Nuclear Antibody (ANA)	
Division:	Immunopathology		
SSB/LA		see Anti-Nuclear AB (ANA)	
Division:	Immunopathology		
ST OB		see Occult Blood, Stool	

Clinical Chemistry - Core

Division:

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Stem Cell Enumeration - Peripheral Blood, Apheresis Product and BM Harvest

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002C

Division: Hematopathology - HLA

Instructions: Specimens should be received within 30 minutes or less after collection to ensure optimal results.

The HLA laboratory (902-473-7841) should be notified in advance when requesting this test. The volume of product collected is required on the requisition (exception; Peripheral Blood).

Unrelated Donor (MUD) specimens arriving after 16:00 hours are to be stored at 4°C overnight and will be tested the following day.

The requisition must accompany the specimen to the Flow laboratory.

Shipping: Maintain specimen at room temperature.

Alternate Name: CD34 TESTING

LIS Mnemonic: Peripheral Blood – CD34 PRE

Apheresis Product – CD34 HARV

Stone see Calculus Analysis

Referred Out: In-Common Laboratories

Stool Chloride see Fecal Chloride

Referred Out: In-Common Laboratories

Referred Out:

Referred Out:

Stool Electrolytes see Fecal Electrolytes

In-Common Laboratories

In-Common Laboratories

Stool Fat see Fat, Fecal

Referred Out: In-Common Laboratories

Stool for Calprotectin see Calprotectin, Fecal

STR see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Streptococcus, Group B

Tube/Specimen: Vaginal or rectal swabs for culture

Referred Out: IWK

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Shipped as Biological Substance Category B. Instructions:

Strongyloidiasis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: **RO STRONG**

Sugar PC see Glucose PC, Plasma

Division: Clinical Chemistry - Core

Sulfonylurea

Tube/Specimen: Random urine; keep refrigerated.

Referred Out: Mayo Medical Laboratories

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

Send copy of requisition.

Room temperature for 72 hours, refrigerated for 14 days (preferred), frozen for 180 days. Stability:

FSLFU LIS Mnemonic:

Surmontil see Trimipramine Level

Referred Out: In-Common Laboratories

Synovial Analysis

Synovial Fluid Tube/Specimen:

Requisition: CD0002

Division: Hematopathology - Core

Instructions: Amount required: 5 mL aliquot of synovial fluid collected in 4.0 mL Lavender (EDTA) tube.

Comments: Indicate on requisition the site of aspiration and which test is requested. Options for testing include Gram Stain, Cell Count, and Crystals.

Tests that are not individually requested will not be performed. Send immediately to Laboratory Client Support Services, 1st floor Mackenzie

Building.

Should be processed within 4 hours of collection.

Alternate Names: Joint Fluid

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LIS Mnemonic: SF CT

SF CRY

ED SYNOVIAL [Emergency department careset]

Syphilis Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Alternate Names: RPR

 $\begin{array}{l} MHA-TP \\ RST \end{array}$

Reagin Screen Test

Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

Molecular Diagnostics

4.0 mL Gold SST (BD#367977)

VDRL TPPA

LIS Mnemonic: SYPH

Division:

Division:

Division:

Division:

Division:

T3, Free

t(11:14) see BCL1-IGH gene fusion

Division: Molecular Diagnostics

t(14:18) see BCL2-IGH gene fusion

T(15:17) see PML-RAR gene fusion

t(2:5) see ALK-NPM gene fusion

-

t(4:11) see AF4-MLL gene fusion

t(8:21) see AML1-ETO gene fusion

See Hill 210 gene rusion

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CD0002 Requisition:

Division: Clinical Chemistry - Core

Separate serum within 5 hours of collection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer Shipping:

Alternate Names: Free Triiodothyronine

LIS Mnemonic: FT3

T3 FREE

T4, Free see Thyroxine, Free

Clinical Chemistry - Core Division:

T790M see Circulating Tumor DNA

Division: Molecular Diagnostics

see Anti-Thyroid Peroxidase Antibodies TAB (MA)

Division: Clinical Chemistry - Core

TAB (TA) see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

see FK 506 Tacro

Clinical Chemistry - Toxicology

Tacrolimus see FK 506

Division: Clinical Chemistry - Toxicology

Taeniasis

Division:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: QE 7125

Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

T Cell Subsets

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Tube/Specimen: 4.0 mL Lavender (EDTA)

CD0002C Requisition:

Division: Hematopathology - Flow Cytometry

This test is offered Monday to Friday except Holidays. Blood must arrive in the Flow Cytometry laboratory within 24 hours of collection and Instructions:

by 14:00 hours on Friday (or the day before a holiday).

A requisition must accompany specimens collected outside Central Zone to the Flow Cytometry laboratory.

Shipping: Maintain specimen at room temperature.

A copy of the CBC report (including WBC and lymphocyte percent/absolute count), patient diagnosis and requisition must accompany the

specimen when collected outside of the QEII VG site.

Alternate Names: CD4 Cells

CD4 Cell Marker CD8 counts

T CELL SUB LIS Mnemonic:

T-cell Gene Rearrangement

see T-cell lymphoid clonality

Division: Molecular Diagnostics

T-cell lymphoid clonality

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

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.

Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.

Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. Alternatively, send fixed tissue in paraffin block.

DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Any specimen referred from outside of Nova Scotia Health Central Zone must also be accompanied by a printout of the CBC results, as it is

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

If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

T-cell gene rearrangement Alternate Names:

TCR beta chain Lymphoma protocol

LIS Mnemonic: 2LAVDNA

TCR beta chain see T-cell lymphoid clonality

Division: Molecular Diagnostics

TCR Gene Rearrangement

see IgG/TCR Gene Rearrangement Study

Division: Molecular Diagnostics

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Tegretol see Carbamazepine

Division: Clinical Chemistry - Core

see Carbamazepine-10, 11 Epoxide

Tegretol Epoxide

Testosterone

Referred Out:

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

In-Common Laboratories

CD0002 Requisition:

Division: Clinical Chemistry - Core

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

LIS Mnemonic: **TESTOS**

Tetanus Immunity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO TET

Division:

Thalassemia see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

Thalassemia Screen see Hemoglobin Electrophoresis

Thallium, Random Urine or 24-Hour Urine

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

collection in a plain container.

Hematopathology - Immunology

Referred Out: In-Common Laboratories

Specimen required: 15 mL urine aliquot from well-mixed collection. Instructions:

Record Total Volume of 24-hour urine on both the aliquot and the requisition.

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

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

Send copy of requisition.

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

LIS Mnemonic: U24 Thal

U THAL

Thallium, Whole Blood

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

Referred Out: In-Common Laboratories

Instructions: **Do not centrifuge!** Test cannot be performed on plasma.

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

Send copy of requisition.

LIS Mnemonic: Thallium

Theophylline

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: These determinations can be done on micro specimens, send at least 0.5 mL of serum for each. Blood should be collected just prior to next

dose and after a steady state concentration has been achieved (4-5 half-lives).

Alternate Names: Aminophylline

LIS Mnemonic: THEO

Thermal Amplitude

see Cold Agglutinin Titre

Division: Transfusion Medicine

Thiamine (Vitamin B1), plasma

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube. Wrap in tinfoil within 1 hour of collection to protect from light.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze immediately!

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

Unsuitable if thawed. Send copy of requisition.

Stability: 6 months

LIS Mnemonic: Thiam

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Thiamine Whole Blood (Vitamin B1)

Tube/Specimen: One 4.0 mL Lavender topped EDTA tube collected after 12 to 14 hour fast. Wrap in tinfoil within 1 hour of collection to protect from

Referred Out: In-Common Laboratories

Instructions: Freeze whole blood!

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

For deficiency testing Send copy of requisition.

Stability: 14 days

LIS Mnemonic: VITB1 WB

Thiocyanate Level

(Do not confuse with Cyanide)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot at least 2.0 mL serum. Keep refrigerated.

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

Send copy of requisition.

LIS Mnemonic: THIOCY

Thiopurine Metabolites

(TPMT Metabolite; Prometheus Thiopurine Metabolites)

(Do not confuse with Thiopurine Methyltransferase Phenotyping or Genotype)

Tube/Specimen: One 6.0 mL Lavender topped EDTA tube.

Referred Out: Mayo Medical Laboratories

Instructions: Do not centrifuge.

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

Send copy of requisition.

Stability: Room temperature for 72 hours, refrigerated for 8 days.

LIS Mnemonic: MISC REF

Thiopurine Methyltransferase: Genotype

(TPMT Genotyping)

(Do not confuse with Thiopurine Methyltransferase Phenotyping or

Thiopurine Metabolite)

Blood Collection: Collect MONDAY ONLY!!

Requisition MUST specify "Genotype", otherwise order Thiopurine Methyltransferase: Phenotyping (TPMT).

Notify Referred-out bench at 902-473-7237 that specimen is being collected. Patients have been directed to arrive at blood collection during the following times:

BLBC: 7-10 am Monday Only

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BRBC: 7-10 am Monday Only

Cobequid: Collected to meet 10 am run Monday Only Dartmouth: Collected to meet 10 am run Monday Only Hants: Collected to meet 9:30 am run Monday Only

HICS: 7-10 am Monday Only SCCS: 7-10 am Monday Only

STMB: Collected to meet 10 am run Monday Only

VGCS: 7-10 am Monday Only

WLBC: Book appointment 7-9 am Monday Only

Tube/Specimen: One Lavender topped EDTA tube.

Referred Out: In-Common Laboratories

Instructions: Do not centrifuge.

Send copy of requisition.

Stability: Specimen must be received at the referral lab within 7 days of collection.

LIS Mnemonic:

Thiopurine Methyltransferase: Phenotyping

(TPMT Phenotyping)

(Do not confuse with Thiopurine Methyltransferase Genotype or Thiopurine Metabolite)

Blood Collection: Collect MONDAY ONLY!!

Notify Referred-out bench prior to collection at 902-473-7237; leave a message if necessary.

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

BLBC: 7-10 am Monday Only BRBC: 7-10 am Monday Only

Cobequid: Collected to meet 10 am run Monday Only **Dartmouth:** Collected to meet 10 am run Monday Only Hants: Collected to meet 9:30 am run Monday Only

HICS: 7-10 am Monday Only SCCS: 7-10 am Monday Only

STMB: Collected to meet 10 am run Monday Only

VGCS: 7-10 am Monday Only

WLBC: Book appointment 7-9 am Monday Only

Tube/Specimen: 4.0 mL Lavender topped EDTA tube only (6.0 mL Lavender topped EDTA tube will be rejected.)

Referred Out: In-Common Laboratories

Instructions: A separate lavender topped EDTA tube should be collected for CBC testing.

Do not centrifuge.

Do not freeze! Keep refrigerated.

Send specimen in original container; do not transfer to polypropylene transfer vial.

Tubes with multiple overlaying labels or tubes and caps wrapped with parafilm will be rejected.

The specimen must be accompanied by a hemoglobin (included in CBC result) result determined on the same collection day.

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

Send copy of requisition.

LIS Mnemonic: **TPMT**

Thioridazine Level

Tube/Specimen: Plain red topped tube.

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Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot at least 3.0 mL serum into plastic transfer vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: Thioridaz

Thrombin Time

1.8 mL Light Blue buffered sodium citrate. Must be a full draw. Tube/Specimen:

Requisition: CD0002

Division: Hematopathology - Core

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

Thrombocythemia see Jak2 gene mutation

Molecular Diagnostics Division:

Thrombopoietin

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

Instructions: Centrifuge at room temperature.

Aliquot at least 1.0 mL serum. Freeze.

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

Send copy of requisition.

Stability: 30 days frozen.

LIS Mnemonic: **FFTPO**

Thrombotic Thrombocytopenia Purpura see Adams-13 Testing

Referred Out: London HSC-Victoria Hospital

Thyrocalcitonin see Calcitonin

Clinical Chemistry - Core

Thyroglobulin High Sensitivity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division:

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Division: Clinical Chemistry - Core

Comments: Nova Scotia Health Central Zone: Thyroglobulin requests are automatically also assayed for TGAB and TSH.

All other Nova Scotia Health Zones: Thyroglobulin requests are automatically also assayed for TGAB.

Separate serum within 5 hours of collection. Prepare two aliquots. Shipping:

Stability: Serum stable for 48 hours at room temperature and 72 hours at 2 to 8°C. Prepare two aliquots, freeze and send frozen serum, if longer.

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

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

Thyroglobulin Antibodies

see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

Thyroid Antibodies

see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

Thyroid Antibodies

see Anti-Thyroglobulin Antibodies

Clinical Chemistry - Core Division:

see TSH

Thyroid Function Tests

Division:

Thyroid Receptor Antibody

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum into plastic transfer vial and freeze.

Indicate thyroid status of patient including presence of exophthalmos.

Lipemic or hemolyzed specimens are not acceptable.

Send copy of requisition.

Clinical Chemistry - Core

Stability: Refrigerated 3 days, frozen 2 months

Alternate Names: Thyrotropin Binding Inhibitory Ig TBII

Thyrotropin Receptor Antibody Long Acting Thyroid Stimulator LATS

LIS Mnemonic: TRAB

Thyroid Stimulating Hormone see TSH

Division: Clinical Chemistry - Core

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Thyroid Stimulating Immunoglobulin (TSI)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum into plastic transfer vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: **TSIQST**

Thyroxine Binding Globulin

(TBG)

(Do not confuse with Thyrotropin Binding Inhibitory Ig-TBII)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum into plastic transfer vial. Freeze at once.

Send copy of requisition.

LIS Mnemonic: TBG

Thyroxine, Free

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection. Serum stable for 6 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: T4 Free

Free T4

FT4 LIS Mnemonic:

T4 FREE

Tissue Transglutaminase

see Anti-Tissue Transglutaminase

Division: Immunopathology

Tobramycin Level

Doc#: 19453

Tube/Specimen: Plain Red Tube 6 or 10 mL

Requisition: CD0002

Division: Clinical Chemistry - Core

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Comments: Tobramycin may be administered using 2 dosing strategies:

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

specimen 6 hours before next dose is administered.

If tobramycin is administered more often (q8 - 12 hours), both pre and post specimens are required. Take Post (peak) blood specimen 30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. Take Pre (trough) blood specimen 30

minutes before next dose is administered.

The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

For information call the laboratory at 902-473-6886.

Alternate Names: Aminoglycoside Level

TOB PRE LIS Mnemonic:

Division:

Division:

Division:

Division:

TOB POST TOB TNS

Tofranil see Imipramine Level

Referred Out:

In-Common Laboratories

Clinical Chemistry - Core

Hematopathology - Core

Clinical Chemistry - Core

Clinical Chemistry - Core

Total Bilirubin

see Bilirubin Total, Plasma

Total CO2, Plasma see Bicarbonate, plasma

Clinical Chemistry - Core Division:

Total Eosinophil Count see Eosinophil Count

Total Iron Binding Capacity see Iron, Plasma

Total Protein, Plasma see Protein Total, Plasma

Total VDB see Bilirubin Total, Plasma

Division: Clinical Chemistry - Core

Toxocariasis IFA & IHA

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

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Division: Virology-Immunology

Instructions: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: RO TOXOC

Toxoplasmosis

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

Note: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.

LIS Mnemonic: TOXOG (IgG)

TOXOM (IgM)

Toxoplasmosis Avidity

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSER

Toxoplasmosis PCR

Tube/Specimen: Amniotic Fluid (minimum 1 mL), CSF (minimum 1 mL), 4.0 mL EDTA Lavender stoppered tube (minimum 3 mL), Pleural Fluid

 $(minimum\ 1\ mL),\ Vitreous\ Fluid\ (minimum\ 1\ mL),\ Bronchio-alveolar\ lavage\ (minimum\ 10\ mL),\ Tissue$

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition. For amniotic fluid presence of IgM

and IgG in the mother must be confirmed first.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSER

TP see Protein Total, Plasma

Division: Clinical Chemistry - Core

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TP53 mutation		see Next Generation Sequencing – Myeloid Panel	
Division:	Molecular Diagnostics		
TPMT Genot	yping	see Thiopurine Methyltransferase: Genotype	
Referred Out:	In-Common Laboratories		
TPMT Metab	oolite	see Thiopurine Metabolites	
Referred Out:	Mayo Medical Laboratories		
TPMT Pheno	typing	see Thiopurine Methyltransferase: Phenotyping	
Referred Out:	In-Common Laboratories		
TPPA		see Syphilis	
Division:	Virology-Immunology		
Trace Elemen	nt Panels		
Referred Out:	In-Common Laboratories		
Notes:	Trace elements are not offered as a panel – Physicians need to specify individual elements to be tested on the requisition.		
Transferrin			
Tube/Specimen:	4.0 mL Gold SST (BD#367977)		
Requisition:	CD0002		
Division:	Clinical Chemistry - Core		
Shipping:	Separate serum within 5 hours of collection.		
Stability:	Serum stable for 3 days at 2 to 8°C. Freeze and send frozen serum, if longer		
LIS Mnemonic:	TRF		
Translocation	n (11:14)	see BCL1-IGH gene fusion	
Division:	Molecular Diagnostics		
Translocation	n (14:18)	see BCL2-IGH gene fusion	
Division:	Molecular Diagnostics		

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Translocation (15:17)		see PML-RAR gene fusion	
Division:	Molecular Diagnostics		
Translocation	n (2:5)	see ALK-NPM gene fusion	
Division:	Molecular Diagnostics		
Translocation		see AF4-MLL gene fusion	
Division:	Molecular Diagnostics		
Translocation	n (8:21)	see AML1-ETO gene fusion	
Division:	Molecular Diagnostics		
Translocation		see BCR-ABL gene fusion	
Division:	Molecular Diagnostics		
Trichinellosis			
Tube/Specimen:	4.0 mL Gold SST (BD#367977)		
Requisition:	CD0432/ CD0433		
Division:	Microbiology-Immunology		
Instructions:	Clinical data should be indicated on the requisition.		
Note:	This test will be referred out by the laboratory.		
LIS Mnemonic:	RO TRICH		
Tricyclic Scre	een (TCA)	Physician must specify name of drug(s)	
Triglycerides			
Tube/Specimen:	Miscellaneous Body Fluid: 10.0 mL Body Fluid collected in sterile plastic screw top tubes.		
Requisition:	CD0002		
Division:	Clinical Chemistry - Core		
Shipping:	If sending specimen from outside QEII HSC, transport at room temperature.		
LIS Mnemonic:	BF TRIG		
Triglycerides	, Plasma		

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Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.

LIS Mnemonic: TRIG

Triiodothyronine, Free see T3, Free

Division: Clinical Chemistry - Core

Trimipramine Level

Tube/Specimen: Royal Blue topped Trace Element SERUM tube (BD368380)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum into plastic transfer vial. Freeze.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Note: Plain red topped tubes and lavender topped EDTA tubes are acceptable. Indicate serum or plasma on aliquot tube.

LIS Mnemonic: TRIMI

Triptil see Protriptyline Level

Referred Out: In-Common Laboratories

Tropheryma Whipplei

Tropheryma vemppler

Tube/Specimen: Whole blood: 4.0 mL EDTA Lavender stoppered tube (2 mL) or bone marrow: 4.0 mL EDTA Lavender stoppered tube

CSF (0.5 mL), biopsy or tissue - frozen at time of collection and shipped on dry ice.

Requisition: CD0432/CD0433

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSER

Troponin T-HS (High Sensitivity), Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

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Division: Clinical Chemistry – Core

Note: A separate specimen tube is required for Troponin T-HS analysis.

Failure to provide a separate specimen may prolong test turn-around time.

Shipping: Plasma stable for 72 hours at 2 to 8°C. Freeze and send frozen plasma, if longer.

LIS Mnemonic: TROP T HS

Trypanosoma see Hem Microorganism

Division: Hematopathology-Microscopy

Trypanosomiasis

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition including whether American or African Trypanosoma is requested.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO TRYP

Tryptase

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

To assess anaphylaxis, collect specimen between 15 to 180 minutes after suspected anaphylactic event. To assess systemic mastocytosis or mast cell activation syndrome the specimen may be collected at any time.

Referred Out: In-Common Laboratories

Instructions: Centrifuge as soon as possible.

Aliquot 1.0 mL serum into plastic transfer vial.

Send copy of requisition.

Stability: 7 days at 2 to 8°C and 30 days frozen.

LIS Mnemonic: Tryptase

TSH

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Shipping: Separate serum within 5 hours of collection.

Stability: Serum stable for 7 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Thyroid Stimulating Hormone

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TSH Receptor Antibody see Thyroid Receptor Antibody

Referred Out: In-Common Laboratories

TSI see Thyroid Stimulating Immunoglobulin

Referred Out: In-Common Laboratories

TTG see Anti-Tissue Transglutaminase

Division: Immunopathology

Referred Out:

see Adams-13 Testing TTP Assay

Tularemia (Francisella tularensis)

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Instructions: Clinical data should be indicated on the requisition.

London HSC-Victoria Hospital

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ROSER

Tylenol see Acetaminophen

Division: Clinical Chemistry - Core

Type and Crossmatch see Type and Screen (ABO/Rh and Antibody Screen)

Division: Transfusion Medicine

Type and Screen (ABO/Rh and Antibody Screen)

Tube/Specimen: Lavender Stoppered 6.0 mL EDTA (BD# 367863)

CD0001_05_2019 Requisition:

Division: Transfusion Medicine

Indicate on requisition date and time required, the planned procedure, transfusion, and pregnancy history. Send copy of patient's antibody Instructions:

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card if patient has known antibodies.

Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection

Note: Inpatient Extended Type and Screen protocol testing valid for 21 days unless patient is transfused platelets/red cells then testing valid for 96

hours only.

Pre-admission protocol Type and Screen testing valid for crossmatching until 2 days post of scheduled surgical date. NOTE: If date unknown

the specimen can be held for a surgery date up to 42 days from the specimen draw date.

Outpatient Type and Screen testing valid for 96 hours.

Do not send specimens from patients who have not consented to transfusion (i.e. Jehovah Witness).

Alternate Names: Group and Crossmatch

Crossmatch

Type and Crossmatch

Unbound Calcium

see Ionized Ca

Division: Clinical Chemistry - Core

Urate, 24-Hour Urine

Tube/Specimen: 24-hour urine collection in a plain container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: pH entire 24 hour collection to >8.0 with 1N NaOH upon receipt; it is not acceptable to add preservative to an aliquot.

Specimen required: 4 mL urine aliquot from a pH adjusted and well-mixed collection.

Refer to Appendix A for pH adjustment instructions when multiple tests are required from the same 24-hour collection.

Record Total Volume of 24-hour urine on both the specimen aliquot and the requisition. Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.

Stability: Room temperature for 1 hour, 2 to 8°C (preferred) for 7 days (pH>8.0) and frozen for 2 weeks (pH>8.0).

Alternate Names: Uric Acid Urine

LIS Mnemonic: U24 URIC ACID

U24 URATE

Urea Nitrogen, Plasma

see Urea, Plasma

Division:

Clinical Chemistry - Core

Urea Nitrogen, Urine

see Urea, Urine

Division:

Clinical Chemistry - Core

Urea, Fluids

Tube/Specimen: Submit only one of the following specimens:

Dialysate Fluid: 10.0~mL Dialysate Fluid collected in sterile plastic screw top tubes. Miscellaneous Body Fluid: 10.0~mL Body Fluid collected in sterile plastic screw top tubes

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Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: DF UREA

BF UREA

Urea, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: BUN

Urea Nitrogen

LIS Mnemonic: UREA

Urea, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain

container.

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.

Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.

Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

Alternate Names: Urea Nitrogen, Urine

LIS Mnemonic: U24 UREA

U UREA

Uric Acid, Plasma

Tube/Specimen: Light Green 4.5 mL Lithium heparin and gel for plasma separation

Requisition: CD0002

Division: Clinical Chemistry – Core

Stability: 7 days at 2 to 8°C; 90 days frozen

LIS Mnemonic: URIC

URIC ACID

Uric Acid, Plasma on Ice (Rasburicase protocol)

Tube/Specimen: Pre-chilled Light Green 4.5 mL Lithium heparin and gel for plasma separation

The specimen must be promptly placed on ice and analyzed within 2 hours to prevent ex-vivo metabolism of uric acid by Rasburicase. stem\PLM\General\PLM Website\General\Test Catalogue\ Version: 169.0 Current

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Deliver to lab within 1 hour of collection to allow for preanalytical processing time.	TO 11 . 1 1 1/11 1	1 6 11	11 C 1	
	Lieliver to lab within	hour of collection to	allow for preanal	Vitical processing time

CD0002 Requisition:

Division: Clinical Chemistry - Core

Comments: Rasburicase protocol for Uric Acid is for the determination of uric acid levels in patients treated with Rasburicase.

A pre-chilled Light Green 4.5 mL Lithium heparin and gel for plasma separation will be collected and promptly placed on ice. The iced specimen and its accompanying requisition will be sent to LCSC to be entered into LIS using the orderable: Uric Acid on Ice. The specimen will be spun in a refrigerated centrifuge; once centrifuged, the labeled tube will be placed back on ice and sent to appropriate

laboratory for analysis.

LIS Mnemonic: URIC ACID ON ICE

Uric Acid Rasburicase protocol

Uric Acid, Urine see Urate, Urine

Division: Clinical Chemistry - Core

Urinalysis (including microscopic examination if required)

10 to 50 mL random urine collected in sterile plastic screw top container Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Urine will be initially examined only for color, clarity, and chemical analysis (by dipstick). Microscopic analysis will only be performed if

urine is cloudy, turbid or if chemical analysis demonstrates an abnormality in color, blood, protein, leukocyte esterase or nitrite. Note that

only microscopic elements that reach the threshold for reporting will be displayed. Deliver to Laboratory within 2 hours of collection. Keep at room temperature.

Urinalysis will be cancelled on specimens that are >8 hours from collection time to the point of analysis.

LIS Mnemonic:

Urinary Catecholamines

see Catecholamines, 24 Hour Urine

Division: In-Common Laboratories

see C-Telopeptide

Urinary Cross Links

(Pyridinium Telopeptide and other

Peptides)

Referred Out: In-Common Laboratories

Urine HCG, Qualitative Qualitative urine HCG (urine pregnancy) testing will no longer be offered as of Feb 4, 2019

Uro-1-Synthetase see Porphobilinogen Deaminase

Referred Out: In-Common Laboratories

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Uroporphyrin, 24-Hour Urine see Porphyrin Screen, 24-Hour Urine

Referred Out: In-Common Laboratories

VWFsee VonWillebrand Workup

Division: Hematopathology - Coagulation

see VonWillebrand Workup V W F Activity

Division: Hematopathology - Coagulation

Hematopathology - Coagulation

V W F Antigen see VonWillebrand Workup

Valproate

Division:

Plain Red Tube 6 or 10 mL Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: These determinations can be done on micro specimens; send at least 0.1 mL of serum.

Comments: There is a poor correlation between serum concentration of Valproate and efficacy as an anticonvulsant drug.

Alternate Names: **Epival**

Depakene

VAL LIS Mnemonic:

Valproic Acid see Valproate

Division: Clinical Chemistry - Core

Vancomycin Level

Plain Red Tube 6 or 10 mL Tube/Specimen:

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Take Pre (trough) blood specimen immediately before dose is administered. Take Post (peak) blood specimen 2 hours after dose is

administered. The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

Comments: Post (peak) Vancomycin levels are only required in certain circumstances (e.g. changing renal function, poor response to therapy, resistant

organism, and pharmacokinetic analysis).

For information call the laboratory at 902-473-6886.

Aminoglycoside Level Alternate Names:

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LIS Mnemonic: VAN PRE

VAN POST VAN TNS

Variable Number Tandem Repeats (VNTR)

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

Varicella Zoster Immune Status

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Instructions: Requisition must indicate immune status.

Alternate Names: Chicken Pox Titre

LIS Mnemonic: VZI

Varicella Zoster PCR

Tube/Specimen: CSF (0.5 mL sterile specimen), swabs collected in viral transport media, sterile fluids, bronchial wash, tissues

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: For CSF: IWK, PEI, Cape Breton, ID (infectious disease) and ICU are automatically approved for testing. All other specimens

require a CSF PCR approval form to be filled out. If the specimen is received without the form, it will be faxed to the requesting

location by the Microbiology laboratory.

Shipping: CSF: Store at room temperature up to 1 day, 4°C up to 7 days, if longer freeze at -20°C and ship frozen.

All other specimens store at 4°C up to 3 days, if longer freeze at -70°C.

LIS Mnemonic: E BFME (CSF)

E HSVVZ (all other specimens)

Vascular Endothelial Growth Factor

Tube/Specimen: Lavender topped K2EDTA tube.

Referred Out: In-Common Laboratories

Instructions: Centrifuge and aliquot 1 mL plasma within 4 hours of collection. Refrigerate or freeze at once.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: Room temperature 4 hours, refrigerate 48 hours, frozen 1 year.

Alternate name: VEGF-D

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LIS	Mnemonic:	MISC REF

Vasculitis Panel

(ANCA)

(Includes Anti-MPO, Anti-PR3, Anti-GBM)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Microbiology Immunology

Synonyms: ANCA, Anti-Neutrophil Cytoplasmic Antibody, Anti-GBM, Anti-Glomerular Basement Membrane, Anti-MPO, Anti-Myeloperoxidase,

Anti-PR3, Anti-Proteinase 3

LIS Mnemonic: Vasc Pnl

Vasoactive Intestinal Polypeptide

(VIP)

Tube/Specimen: Lavender topped EDTA tube. Patient fasting status is preferred as levels may be increased otherwise.

Referred Out: In-Common Laboratories

Instructions: Centrifuge and aliquot minimum 1 mL plasma into a plastic vial. Freeze at once.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: Room temperature 4 hours, refrigerated 24 hours, frozen 6 months.

LIS Mnemonic: VIP

Vasopressin

see Copeptin

ADH (Anti-Diuretic Hormone/Vasopressin) testing is no longer available at the QEII laboratory or any of the referral laboratories. Please refer to Copeptin testing as a surrogate for ADH.

VDB

see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

VDRL

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Tube/Specimen: CSF minimum 200 µL

Requisition: CD0432/CD0433

Division: Virology-Immunology

Comments: For serum specimens see Syphilis Serology

Shipping: Ship at 2 to 8°C up to 2days, if longer freeze at -70°C.

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LIS Mnemonic: I VDRL

Very Long Chain Fatty Acid

Tube/Specimen: Lavender topped EDTA tube.

Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot 2.0 mL of plasma into plastic vial. Freeze at once.

Serum from 4.0 mL Gold SST (BD#367977) tube is acceptable; indicate specimen type on aliquot.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: VLCFA

VIP see Vasoactive Intestinal Polypeptide

Referred Out: Mayo Medical Laboratories

Viscosity, Serum

Tube/Specimen: Plain red topped tube kept at 37°C.

Referred Out: In-Common Laboratories

Instructions: Send to Esoteric Immunology Laboratory to be processed.

Keep serum cold. Do not freeze.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

LIS Mnemonic: VISC Serum

Vitamin A Level

Tube/Specimen: Plain red topped tube. Protect from light!

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot serum, **wrap in tinfoil to protect from light! Freeze!**Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

LIS Mnemonic: VIT A RO

Vitamin B1, Whole Blood

see Thiamine, Whole Blood

Referred Out: In-Common Laboratories

Vitamin B2 (Riboflavin)

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Tube/Specimen: Lavender topped EDTA tube. Protect from light!

Referred Out: In-Common Laboratories

Instructions: Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze immediately!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

VITB2 LIS Mnemonic:

Vitamin B3 (Niacin)

One 4.0 mL Lavender topped EDTA tube. Wrap in tinfoil within 1 hour of collection to protect from light. Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: Frozen - 56 days

LIS Mnemonic: NIACIN

Vitamin B6 Level (Pyridoxic Acid)

Tube/Specimen: Two Lavender topped EDTA tubes. Wrap in tinfoil immediately to protect from light!

Note: Specimen must be centrifuged and frozen within 1 hour of collection.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze.

Unsuitable for analysis if thawed.

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: Vit B6

Vitamin B12

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

CD0002 Requisition:

Division: Clinical Chemistry - Core

Separate serum within 5 hours of collection. Shipping:

Stability: Serum stable at 2 to 8°C for 7 days. Freeze and send frozen serum, if longer.

LIS Mnemonic: B12

VIT B12

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Vitamin C

Tube/Specimen: Dark green topped Lithium Heparin tube. Wrap in tinfoil to protect from light.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature

Aliquot 2.0 mL of plasma into plastic vial. Wrap in tinfoil to protect from light! Freeze at once!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Note: Light green topped Lithium Heparin PST tube is acceptable

LIS Mnemonic: VIT C

Vitamin D Level, Serum

(Do not confuse with Vitamin D (1, 25 dihydroxy) Level)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Assay measures both D2 and D3

Note: Vitamin D (1, 25 Dihydroxy) Level is a separate procedure that is referred out to In-Common Laboratories.

Stability: Serum is stable for 3 days at room temperature and 12 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: Vitamin D (25 Hydroxy)

25 OH Vitamin D

Calcidiol Vit D Level Vit D 25 Level Vitamin D3

LIS Mnemonic: VIT D 25 LEVEL

VIT D 250H VIT D LEVEL

Vitamin D (1, 25-dihydroxy) Level

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 1.0 mL serum into plastic transfer vial. **Freeze at once!** Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

LIS Mnemonic: VIT D 1, 25

Vitamin E Level

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Tube/Specimen: 4.0 mL Gold SST (BD#367977). Wrap in tinfoil to protect from light.

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

Aliquot 2.0 mL serum into plastic transfer vial. Protect from light! Freeze at once!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: VIT E

see Chimerism Analysis for BMT VNTR

Division: Molecular Diagnostics

Voltage-gated Calcium Channel Antibody

4.0 mL Gold SST (BD#367977) Tube/Specimen:

Referred Out: In-Common Laboratories

Instructions: Aliquot at least 1.0 mL serum. Freeze!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

LIS Mnemonic: VGCC

Voltage-gated Potassium Channel Antibody (VGKC)

Tube/Specimen:

4.0 mL Gold SST (BD#367977)

Referred Out:

In-Common Laboratories

Instructions:

Aliquot at least 1.0 mL serum. Freeze!

Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability:

Room temperature 4 days; refrigerated at 2 to 8 °C for 7 days and frozen >6 months.

LIS Mnemonic:

Von Willebrand Disease Genotype

Tube/Specimen:

4.0 mL Lavender topped EDTA tube(s).

Peripheral blood: Preferably 2 tubes, minimum volume 1 mL.

DNA

Requisition:

CD0046 or CD2573

Division:

Molecular Diagnostics

Instructions:

Blood must be kept at 4°C or frozen and must be accompanied by the requisition.

Send specimen to Hematopathology Molecular lab who will refer it out to the National Inherited Bleeding Disorder Genotyping Laboratory at

Queen's University.

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Stability: Peripheral blood: 5 days at 4°C or frozen

DNA: 3 months at 4°C or frozen

Alternate Names: VWD genotype
LIS Mnemonic: 2LAVDNA

Von Willebrand Factor Multimer Assay

Tube/Specimen: Light blue topped sodium citrate tube.

Referred Out: Mayo Medical Laboratories

Instructions: Send specimen and copy of requisition to Hematopathology Coagulation lab for processing.

Comment: Test is not performed at the QEII. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent

delay in results.

LIS Mnemonic: VWF Multimer Assay

VonWillebrand Factor Multimer Assay

Von Willebrand Workup

Tube/Specimen: 3 Light Blue Stoppered 2.7 mL buffered NA (sodium) citrate, must be a full draw

Requisition: CD0002

Division: Hematopathology - Coagulation

Comments: Testing includes VWF Ristocetin Cofactor, VWF Antigen, and Factor VIII.

Referrals: Send 3 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene

vials (12x75).

Alternate Names: VWF

VWF Antigen VWF Activity

Voriconazole Level

Tube/Specimen: Dark green topped (Lithium heparin) tube.

Requisition: CD0002

Division: Microbiology-Immunology

Instructions: A trough specimen should be drawn into a dark green topped lithium heparin tube.

Minimum 1.0 mL plasma is required.

The specimen can be centrifuged at 4000g for 10 minutes, plasma separated and shipped frozen if it will not arrive within 24 hours.

The time specimen was collected (pre) should be indicated on the requisition and tubes.

Note: This test will be referred out by the Microbiology lab.

LIS Mnemonic: RO VORI

Water Deprivation Test

see Anti-Diuretic Hormone

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	Referred Out:	In-Common Laboratories
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WBC see Profile

Division: Hematopathology - Core

WBC Count and Differential, Body Fluid

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002

Division: Hematopathology - Core

Shipping: If sending specimen from outside QEII HSC, transport at room temperature.

West Nile Virus IgM Antibody

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO WNV

West Nile Virus PCR

Tube/Specimen: 4.0 mL Lavender (EDTA)

Requisition: CD0002A/CD0002B Division: Virology-Immunology

Note: PCR testing done primarily for the purpose of Donor Screening. For diagnosis, please consult a Microbiologist.

Instructions: Separate plasma by centrifugation at 3000g for 20 minutes. Ship plasma frozen.

LIS Mnemonic: WNV

Western Equine Encephalitis see ARBO Virus

Division: Virology-Immunology

Xylose Absorption Test see D'Xylose Tolerance Test

Zarontin see Ethosuximide Level

Referred Out: In-Common Laboratories

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Zika Virus PCR

Tube/Specimen: 4.0 mL Gold SST (BD#367977)/Urine collected in a dry sterile container

Requisition: CD0432/ CD0433

Division: Microbiology-Immunology

Required Info: Travel history, travel dates, date of onset and clinical symptoms.

Zika Clinical Information Data Sheet must be completed and submitted with the specimen.

Note: This test will be referred out by the laboratory.

Zika Virus serology (IgM/IgG) no longer available. PCR testing will be performed if criteria for testing met.

LIS Mnemonic: RO ZIKA

Zika Virus Serology

Tube/Specimen: 4.0 mL Gold SST (BD#367977)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Required Info: Travel history, travel dates, date of onset and clinical symptoms.

Zika Clinical Information Data Sheet must be completed and submitted with the specimen.

Note: This test will be referred out by the laboratory.

LIS Mnemonic: RO ZIKA

Zinc, Whole Blood

Tube/Specimen: Royal Blue Trace Element K2 EDTA tube (BD368381)

Referred Out: In-Common Laboratories

Instructions: Centrifuge ASAP!

Aliquot plasma into plastic transfer vial. **Freeze immediately!**Do not accession for non-Nova Scotia Health *Central Zone* Hospitals

Send copy of requisition.

Utilization: Plasma zinc is used for potential nutritional deficiency. Cannot be tested on whole blood.

Stability: 20 days at room temperature and 14 months at 2 to 8° C or frozen.

LIS Mnemonic: Zinc

Zinc Level RO

Zinc Protoporphyrin

(Do not confuse with Free Erythrocyte Protoporphyrin)

Tube/Specimen: Royal Blue Trace Element K2 EDTA tube (BD368381).

Referred Out: In-Common Laboratories

Instructions: Do Not Centrifuge!

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Do not accession for non-Nova Scotia Health Central Zone Hospitals

Send copy of requisition.

Stability: 2 weeks refrigerated.

ZPP LIS Mnemonic:

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APPENDIX A

1. 24 hour Urine processing for Calcium, Oxalate, Magnesium, Phosphorous

Step	Action
1.1	Mix specimen by inversion a minimum of ten times.
1.2	Aliquot all tests other than calcium, oxalate, magnesium, phosphorous and uric acid.
1.3	If uric acid is also ordered, divide the specimen into two equal parts. Use one part for the remainder of this procedure and place the other half aside for use with procedure 2.
1.4	Add 25mL of 6N HCl to the collection container. Add half if urine is halved.
1.5	Mix specimen by inversion a minimum of ten times and allow to sit for five minutes.
1.6	Measure urine pH.
1.7	If urine pH is less than or equal to 3, aliquot specimen.
	If urine pH is greater than 3, add 3 drops 6N HCl (and mix specimen by inversion a minimum of ten times. Measure pH. Repeat this step until a pH of less than 3 has been reached.
1.8	If uric acid is also ordered, proceed to Procedure 2: Processing for Uric Acid, using the
	other half of the specimen set aside in step 1.3.

2. 24 hour Urine processing for Uric Acid

	nour office processing for other Acid		
Step	Action		
2.1	Mix specimen by inversion a minimum of ten times.		
2.2	Aliquot all tests other than calcium, magnesium, phosphorous, oxalate and uric acid.		
2.3	If calcium, magnesium, phosphorous and/or oxalate are also ordered, divide the specimen into two equal parts. Use one part for the remainder of this procedure and place the other half aside for use with <i>Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous.</i>		
2.4	Add 25mL of 1N NaOH to the collection container. Add half if urine is halved.		
2.5	Mix specimen by inversion a minimum of ten times and allow to sit for five minutes.		
2.6	Measure urine pH.		
2.7	If urine pH is greater than or equal to 8, aliquot specimen. If urine pH is less than 8, add 3 drops 1N NaOH and mix specimen by inversion a minimum of ten times. Measure pH. Repeat this step until a pH of greater than 8 has been reached.		
2.8	If calcium, magnesium, phosphorous and/or oxalate are also ordered, proceed to <i>Procedure 1: Processing for Calcium, Oxalate, Magnesium, Phosphorous,</i> using the other half of the specimen set aside in step 2.3.		

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3. 24 hour Urine processing for catecholamine, 5-Hydroxyindole acetic acid (5HIAA) and/or Metanephrine

	ictare prime		
Step	Action		
3.1	Mix specimen by inversion a	minimum of ten times.	
3.2	Aliquot specimen.		
3.3	Measure urine pH.		
3.4	If:	Then:	
	pH <2	Adjust pH by slowly adding 6N NaOH, one drop at a time, until the pH is between 2 and 4.	
	pH >4 <u>and</u> ≤6 <u>and</u> received in original 24- hour acidified container <u>within</u> 8 hours from the end of collection pH >4 <u>and</u> ≤6 <u>but</u> received	Adjust pH by adding one drop of 6N HCL until the pH is between 2 and 4. Note: For catecholamine and metanephrine only: If the urine being tested is received in the original plain 24-hour container within 8 hours from the end of the collection time: it is acceptable to adjust the pH. The test will be cancelled automatically by the system upon	
	greater than 8 hours from the end of collection pH >6	verification of the pH results. The test will be cancelled automatically by the system upon	
		verification of the pH results.	

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