

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

#### Reference Ranges

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

<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: <http://www.cdha.nshealth.ca/pathology-laboratory-medicine/blood-collection-services/location-hours-outpatient-blood-collection>

#### In-Patient and Clinic Blood Collection

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

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

## 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-laboratory-requisitions.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-laboratory-requisitions>.

### 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](#)

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.

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**17 Beta Estradiol** **see Estradiol**

Division: Clinical Chemistry – Core

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

Division: Hematopathology – Coagulation

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**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

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

Referred Out: In-Common Laboratories

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

Referred Out: In-Common Laboratories

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**72 hour Fecal Fat** **see Fat, Fecal**

Referred Out: In-Common Laboratories

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**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.

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

LIS Mnemonic: 5HIAA 24U

### 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: 17-OHPG

### 16S

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

Requisition: CD0432/ CD0433

Division: Virology-Immunology

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

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

LIS Mnemonic: 16S

### 18S

see Mycology (18S)

Referred Out: The Hospital for Sick Children

### AAA

see Adrenal Antibody

Referred Out: In-Common Laboratories

### AAT

see Alpha-1-Anti-Trypsin

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**ABL kinase domain mutation**

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

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**ABO Antibody Titre**

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

Requisition: CD0001\_05\_2019

Division: Transfusion Medicine

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

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

Alternate Names: Anti A/Anti B Titre  
Isohemagglutinin Titre

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**ABO Group and Rh Type**

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

Requisition: CD0001\_05\_2019

Division: Transfusion Medicine

Instructions: For medical purposes only

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

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

Alternate Names: Blood Group and Rh Type  
Group and Type

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**Absolute Neutrophil Count**

Division: Hematopathology – Core

Alternate Names: ANC

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**AC Blood Sugar**

see Glucose AC, Plasma

Division: Clinical Chemistry - Core

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**ACE**

see Angiotensin Converting Enzyme, Plasma

Division: Clinical Chemistry - Core

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**Acetaminophen**

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Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)  
Requisition: CD0002  
Division: Clinical Chemistry- Core  
Alternate Names: Tylenol  
LIS Mnemonic: ACET

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### 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

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### Acetylcholinesterase, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
Requisition: CD0002  
Division: Clinical Chemistry - Core  
Alternate Names: Cholinesterase  
Pseudo Cholinesterase  
LIS Mnemonic: CHE

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### Acetylsalicylic Acid see Salicylates

Division: Clinical Chemistry - Core

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### Acid Mucopolysaccharide Screen see Mucopolysaccharide Screen

Referred Out: In-Common Laboratories

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### ACTH

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) **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: Adrenocorticotrophic Hormone

LIS Mnemonic: ACTH

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### 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

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### ADAMTS13 Activity with Reflex Inhibitor

(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 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: ADAMP

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### Adenovirus

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

Requisition: CD0432/CD0433

Division: Virology-Immunology

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

LIS Mnemonic: E AD  
E RAN (for stool, tested along with norovirus and rotavirus)

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### ADH

see Copeptin

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

**Adrenal Antibody**

Tube/Specimen: 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.  
 LIS Mnemonic: ADRAB

**Adrenaline** **see Catecholamines, Total Plasma**

Referred Out: In-Common Laboratories

**Adrenocorticotrophic Hormone** **see ACTH**

Division: Clinical Chemistry - Core

**AEMA** **see Endomysial Antibody**

Division: Immunopathology

**AF4-MLL gene fusion**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 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: t(4;11) RNA

**AFP**

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, if longer.

Alternate Names: Alpha Fetoprotein

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LIS Mnemonic: AFP

**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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF ALB

### Albumin, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry – Core

LIS Mnemonic: ALB

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

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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** 4.0 mL Lavender EDTA (BD#367861). Indicate on requisition patient's position during collection; upright or lying down (supine).

Referred Out: In-Common Laboratories

Instructions: Patient Preparation: Patient should liberalize (not restrict) sodium intake. The following medications should be held for 4 weeks prior to testing or for as long as is clinically feasible: spironolactone, eplerenone, amiloride, triamterene, potassium-wasting diuretics, confectionary licorice, or chewing tobacco.  
The best collection time is before 11 am.  
Centrifuge at room temperature within 4 hours of collection; aliquot two 1.0 mL quantities of plasma and **freeze**.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals.  
As of July 19, 2022 all Aldosterone and/or Renin requests will be ordered as Aldosterone/Renin Activity Ratio.  
Send copy of requisition.

Stability: Room temperature 6 hours, refrigerated 4 hours and frozen 30 days.

LIS Mnemonic: ALDO/REN

### Aldosterone, 24-Hour Urine

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

Referred Out: In-Common Laboratories

Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Record Total Volume of the 24-hour urine on both the aliquot and requisition.  
Identify drugs administered within 2 weeks as some drugs have a low cross-reactivity in this assay.

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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: ALDO 24U

### 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 QEIL. 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

### ALK PHOS see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry – Core

### Alkaline Phosphatase, Bone see Bone Alkaline Phosphatase

Referred Out: Mayo Medical Laboratories

### Alkaline Phosphatase, Isoenzyme (Do not confuse with Bone Alkaline Phosphatase)

Tube/Specimen: 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: ALP ISO

### Alkaline Phosphatase, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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Requisition: CD0002  
Division: Clinical Chemistry - Core  
Alternate Names: ALP  
ALK  
ALK PHOS  
Phosphatase, Alkaline  
LIS Mnemonic: ALP

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**ALP** **see Alkaline Phosphatase, Plasma**

Division: Clinical Chemistry - Core

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**Alpha Fetoprotein** **see AFP**

Division: Clinical Chemistry - Core

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**Alpha Galactosidase, Whole Blood**  
**(Do not confuse with Alpha-Gal IgE)**

Tube/Specimen: One 6.0 mL Dark Green **sodium heparin** (BD#367878) or 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)  
Collect only Monday to Wednesday before noon.  
Contact Referred Out at 902-473-7237 before collection.  
Referred Out: Hospital for Sick Children, Metabolic Diseases Laboratory  
Instructions: **Do Not Centrifuge.**  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals.  
Ship at room temperature same day of collection. **Time Sensitive.**  
LIS Mnemonic: MISC REF

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**Alpha Thalassemia, DNA Testing**

Tube/Specimen: Three 4.0 mL Lavender EDTA (BD#367861)  
Referred Out: McMaster University Medical Centre  
Instructions: **Do Not Centrifuge.**  
Ship at room temperature.  
LIS Mnemonic: MISC HEM

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**Alpha Thalassemia Screen** **see Hemoglobin Electrophoresis**

Division: Hematopathology - Immunology

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

Referred Out: In-Common Laboratories

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**Alpha-1-Acid Glycoprotein**

(Do not confuse with Alpha Glycoprotein Subunit)

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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

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**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

Alternate Name: A1AT

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**Alpha-1-Antitrypsin Genotype**

Tube/Specimen: One 4.0 mL Lavender EDTA (BD#367861) **AND** One 6.0 mL Plain Red Top, no gel separator (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: AAT GENO

Alternate Name: AAT (A1AT) Mutation Analysis

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**Alpha-1-Antitrypsin Phenotype**

**See Alpha-1-Antitrypsin Genotype**

Referred Out: In-Common Laboratories

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**Alpha-1-Antitrypsin Proteotype**

**See Alpha-1-Antitrypsin Genotype**

Referred Out: In-Common Laboratories

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**Alpha-2-Anti Plasmin**

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## PLM Laboratory Test Catalogue

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common Laboratories

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: Antiplasmin  
A2AP

### ALT, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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: ALUM

### AMA

**see Anti-Mitochondrial Antibodies**

Division: Immunopathology

### AMH

**see Anti-Mullerian Hormone**

Referred Out: Mayo Medical Laboratories

### Amikacin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002A/CD0002B

Referred Out: In-Common Laboratories

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

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## PLM Laboratory Test Catalogue

Take Post blood specimen 30 minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

Alternate Names: Aminoglycoside Level

LIS Mnemonic: AMIKP (Post)  
AMIKT (Pre)  
AMIKR (Random)

### Amino Acid Quantitative Plasma

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886) **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

### 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.

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

LIS Mnemonic: AA RU  
AA 24U

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

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

Referred Out: IWK Metabolic Lab

Instructions: Specimen required: 10 mL urine aliquot from well-mixed collection.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals; send directly to IWK Metabolic Lab  
**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

## PLM Laboratory Test Catalogue

### Aminoglycoside Levels

see Gentamicin, or Tobramycin, or Vancomycin

Division: Clinical Chemistry - Core

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### Aminophylline

see Theophylline

Division: Clinical Chemistry - Core

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### Amiodarone Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: AMIO

---

### Amitriptyline Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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 Lavender EDTA (BD#367861)  
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: t(8;21) RNA

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**Ammonia, Plasma**

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

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

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**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: AMOEB

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**Amoebic Serum**

see Amoebiasis - IHA

Division: Virology-Immunology

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**Amylase and CEA, Pancreatic Cyst Fluid**

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: PCF AMY and CEA  
PCF CEA and AMY

## PLM Laboratory Test Catalogue

### Amylase, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Alternate Names: Diastase  
 LIS Mnemonic: AMY

---

### Amylase, Urine

Tube/Specimen: Timed urine collection (examples: 2-hour, 24-hour)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.  
 Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
 Comments: Random collections are only available on pancreatic transplant patients.  
 Stability: Room temperature 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.  
 LIS Mnemonic: U AMY T

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### ANA see Anti-Nuclear Antibody

Division: Immunopathology

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### Anafranil see Clomipramine

Referred Out: In-Common Laboratories

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### Anaplasma see Hem Microorganism

Division: Hematopathology-Microscopy

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### Anaplasma PCR

Tube/Specimen: 4.0 mL Gold SST (BD#367977)  
 Requisition: CD0002A/CD0002B  
 Division: Virology-Immunology  
 Instructions: Clinical data should be indicated on the requisition.  
 All Anaplasma requests will have Lyme testing completed. Anaplasma will be added by a rule upon receipt in Micro.  
 LIS Mnemonic: ANAPLASMA

## PLM Laboratory Test Catalogue

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**ANC** **see Absolute Neutrophil Count**

Division: Hematopathology - Core

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**ANCA** **see Vasculitis Panel**

Division: Immunopathology

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**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

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**Angiotensin Converting Enzyme, Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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

---

**Anion Gap, Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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 CO<sub>2</sub>.

Shipping: Separate plasma within 2 hours of collection.

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## PLM Laboratory Test Catalogue

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

Division: Virology-Immunology

### 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.

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## PLM Laboratory Test Catalogue

Alternate Names: Cardio Ab  
Cardiolipin Antibodies

LIS Mnemonic: ACARD IGG

**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: ACCP

**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

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**Anti-Double Stranded DNA**

see Anti-ds DNA

Division: Immunopathology

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

Tube/Specimen: 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  
DPPX CSF

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**Anti-ds DNA**

see Anti-Nuclear AB, (ANA)

Division: Immunopathology

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**ANTI-ds DNA**

see Anti-Nuclear Ab

Division: Immunopathology

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

Tube/Specimen: 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  
GABA CSF

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**Anti-Glutamic Acid Decarboxylase (Anti-GAD)**

Tube/Specimen: 4.0 mL Gold SST (BD#367977) preferred, 6.0 mL Plain Red Top, no gel separator (BD#367815) 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: GAD

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## PLM Laboratory Test Catalogue

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**Anti-GBM Ab**

see Vasculitis Panel

Division: Immunopathology

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**Anti-Gliadin IgG or IgA**

see Anti-Tissue Transglutaminase

Division: Immunopathology

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**Anti-Glomerular Basement**

see Vasculitis Panel

Division: Immunopathology

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**Anti-HMGCR Antibodies**

see Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum

Referred Out: In-Common Laboratories

---

**Anti-Hu**

see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

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**Anti-Hu, CSF**

see Paraneoplastic Antibodies

Referred Out: In-Common Laboratories

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**Anti-Jo-1**

see Anti-Nuclear AB, (ANA)

Division: Immunopathology

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**Anti-LKM**

see Liver Kidney Microsomal Antibodies

Referred Out: In-Common Laboratories

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**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

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

Tube/Specimen: Isolate, Susceptibility testing

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## PLM Laboratory Test Catalogue

Referred Out: Antimicrobial Resistance and Nosocomial Infections (ARNI)

Instructions: Shipped as Category B.

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### Anti-Microsomal Antibodies

see Anti-thyroid Peroxidase Antibodies

Division: Clinical Chemistry – Core

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### Anti-Mitochondrial Ab

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

Requisition: CD0002

Division: Immunopathology

Alternate Names: AMA2

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### Anti-MPO

see Vasculitis Panel

Division: Immunopathology

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### Anti-Mullerian Hormone

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

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

Stability: Room temperature 48 hours, refrigerated 7 days, frozen 28 days

LIS Mnemonic: AMH

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### Anti-Mup44/NT5C1

see Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum

Referred Out: In-Common Laboratories

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

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

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: MUSKAB

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**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 QEII

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 23<sup>rd</sup>, 2024. Glutamic Acid Decarboxylase 65 Antibodies (Anti-GAD) will be ordered instead.

**Anti-Parietal Cell** **see Autoantibodies Panel**

Referred Out: In-Common Laboratories

**Anti-PC** **see Autoantibodies Panel**

Referred Out: In-Common Laboratories

**Skin Antibodies**

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

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## PLM Laboratory Test Catalogue

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: SKIN AB

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

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

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

LIS Mnemonic: PLA2R

### Anti-PLA2R

see Anti-Phospholipase A2 Receptor

Referred Out: In-Common Laboratories

### Anti-Plasmin

see Alpha-2-Anti-Plasmin

Referred Out: In-Common Laboratories

### Anti-Platelet Antibody/Platelet Typing

Tube/Specimen: **Six** 6.0 mL Yellow ACD glass (BD#364816) **or twelve** 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation Lab for processing.  
Store and ship at room temperature. Completed McMaster patient requisition must accompany sample.  
<https://transfusionresearch.healthsci.mcmaster.ca/wp-content/uploads/2025/11/Patient-Requisition-Form-v2025-11.docx>

LIS Mnemonic: Miscellaneous Hematology Referred Out

### Anti-PR3

see Vasculitis Panel

Division: Immunopathology

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**Anti-Proteinase 3**

**see Vasculitis Panel**

Division: Immunopathology

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**Anti-Retinal Autoantibody**

Tube/Specimen: **Two** 4.0 mL Gold SST (BD#367977) **or two** 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: Mayo Medical Laboratories

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

Stability: Refrigerated 7 days.

LIS Mnemonic: MS REF

---

**Anti-Ri**

**see Paraneoplastic Antibodies**

Referred Out: In-Common Laboratories

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**Anti-Ri, CSF**

**see Paraneoplastic Antibodies, CSF**

Referred Out: In-Common Laboratories

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**Anti-Ribosomal P**

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

Division: Immunopathology

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**Anti-RNP**

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

Division: Immunopathology

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**Anti-Scl-70**

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

Division: Immunopathology

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**Skeletal 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 30 days.

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## PLM Laboratory Test Catalogue

LIS Mnemonic: SKEAB

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

Division: Immunopathology

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**Anti-Smooth Muscle** **see Autoantibodies Panel**

Referred Out: In-Common Laboratories

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**Anti-SM** **see Autoantibodies Panel**

Referred Out: In-Common Laboratories

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

Division: Immunopathology

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

Division: Immunopathology

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

Division: Immunopathology

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**Anti-Streptolysin "O" Titer**

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.

Alternate Names: ASOT  
ASO Titer

LIS Mnemonic: ASOT

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**Anti-Striated Muscle Antibody** **see Autoantibodies Panel**

Referred Out: In-Common Laboratories

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**Antithrombin (III)  
(AT)**

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## PLM Laboratory Test Catalogue

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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).

LIS Mnemonic: ATIII

Alternate Names: Antithrombin Activity  
ATIII Activity

### Anti-Thyroglobulin Antibodies

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

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

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

### Anti-Thyroid Antibodies

see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

### Anti-Thyroid Peroxidase

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 days at 2 to 8°C. Freeze and send frozen serum, if longer.

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

LIS Mnemonic: ANTI-TPO

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TAB

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**Anti-Thyrotropin Receptor Antibody**                      **see Thyroid Receptor Antibody**

Referred Out:        In-Common Laboratories

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**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 IGA

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**Anti-Topoisomerase**                                      **see Anti-Nuclear Ab**

Division:            Immunopathology

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**Anti-TPO**    **see Anti-Thyroid Peroxidase Antibodies**

Division:            Clinical Chemistry - Core

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**Anti-Xa**

Tube/Specimen:     2.7 mL Light Blue buffered sodium citrate (BD#363083)

Requisition:        CD0002

Division:            Hematopathology - Coagulation

Instructions:        Requisition must indicate the type of heparin 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).  
 Send on dry ice.

LIS Mnemonic:      ANTIXA

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**Anti-Yo**    **see Paraneoplastic Antibodies**

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## PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

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### 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: APOA1

---

### Apolipoprotein B

Tube/Specimen: **Nova Scotia Health Central Zone:** 3.5 mL Light Green lithium heparin (BD#367961). **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 plasma will not be accepted.**

Alternate Names: APO B

LIS Mnemonic: APO B

---

### ARBO Virus

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.

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## PLM Laboratory Test Catalogue

**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: 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: ARS RU (for random urine) and ARS 24U (for 24hour urine)

### Arsenic, Whole Blood

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

Referred Out: In-Common Laboratories

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

LIS Mnemonic: ARS WB

**ASA** **see Salicylates**

Division: Clinical Chemistry - Core

**ASCA** **see Saccharomyces cer Antibodies**

Referred Out: In-Common Laboratories

**Ascorbic Acid Level** **see Vitamin C**

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## PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

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**ASKMA** **see Skeletal Muscle Antibodies**

Referred Out: In-Common Laboratories

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**ASOT** **see Anti-Streptolysin "O" Titer**

Division: Clinical Chemistry - Core

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**Aspartate Amino Transferase** **see AST, Plasma**

Division: Clinical Chemistry - Core

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### 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: ASPER

---

**Aspirin** **see Salicylates**

Division: Clinical Chemistry - Core

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### AST, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Aspartate Amino Transferase  
SGOT

LIS Mnemonic: AST

---

### Autoantibodies Panel

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

Referred Out: In-Common Laboratories

Instructions: Aliquot serum and **freeze**.

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LIS Mnemonic: AUTOAB

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**Autoimmune Encephalitis Panel**

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: Refrigerated 14 days and frozen 30 days.

LIS Mnemonic: AEP SP or AEP CSF

---

**Autoimmune Inflammatory Myopathy /Myositis Profile**      **see Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum**

Referred Out: In-Common Laboratories

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**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: Refrigerated 14 days and frozen 60 days.

LIS Mnemonic: ALDAB

---

**Autoimmune Muscle Disease Profile**      **see Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum**

Referred Out: In-Common Laboratories

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**Autoimmune Retinopathy Panel (ARP)**      **see Anti-Retinal Autoantibody**

Referred Out: Mayo Medical Laboratories

---

**Autoimmune Thrombocytopenia Purpura**

Tube/Specimen: **Six** 6.0 mL Yellow ACD glass (BD#364816) **or twelve** 2.7 mL Light Blue buffered sodium citrate (BD#363083).

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation Lab for processing.  
Store and ship at room temperature. Completed McMaster patient requisition must accompany sample.

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<https://transfusionresearch.healthsci.mcmaster.ca/wp-content/uploads/2025/11/Patient-Requisition-Form-v2025-11.docx>

LIS Mnemonic: Miscellaneous Hematology Referred Out  
Alternate Name(s): ITP (Idiopathic Thrombocytopenia Purpura)

---

### **Aventyl** **see Amitriptyline**

Referred Out: In-Common Laboratories

---

### **Babesia** **see Hem Microorganism**

Division: Hematopathology-Microscopy

---

### **Babesia PCR**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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: BABPCR

---

### **Babesia 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: BABSER

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### **Bacterial vaginosis/Vulvovaginal candidiasis/Trichomoniasis PCR**

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

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### Barbiturate Screen

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: BARTSER

---

### B Cell Counts

Tube/Specimen: 6.0 mL Green lithium heparin, no gel separator (BD#367886)

Requisition: CD0002C

Division: Hematopathology - Flow Cytometry

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

Shipping: Maintain specimen at room temperature.

Alternate Name: CD19 TESTING

LIS Mnemonic: Path Flow CD19 B-Cells (Pathology Flow Cytometry CD19 B-Cells)

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### B-cell lymphoid clonality

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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.

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

Alternate Names: Ig gene rearrangement  
Ig heavy chain  
Lymphoma protocol

LIS Mnemonic: B-cell DNA

### **BCL-1** see **BCL1-IGH gene fusion**

Division: Molecular Diagnostics

### **BCL1-IGH gene fusion**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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-1  
t(11;14)  
Translocation (11;14)  
Cyclin-D1 PRAD1  
Lymphoma, mantle cell

LIS Mnemonic: BCL-1 DNA

### **BCL-2** see **BCL2-IGH gene fusion**

Division: Molecular Diagnostics

### **BCL2-IGH gene fusion**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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.

## PLM Laboratory Test Catalogue

Alternate Names: BCL-2  
t(14;18)  
Translocation (14;18)  
Lymphoma, follicular

LIS Mnemonic: BCL-2 DNA

### BCR-ABL gene fusion

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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: BCRABL RNA

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

see Next Generation Sequencing-Myeloid Panel

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)

Note: Beryllium Lymphocyte Proliferation (BeLPT) test is no longer offered at NSH Central Zone.

### Beta-2-Glycoprotein Antibody

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

Referred Out: In-Common Laboratories

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## PLM Laboratory Test Catalogue

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

---

### 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: B2M RU

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### Beta-Carotene (β-Carotene) see Carotene

Referred Out: In-Common Laboratories

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### Beta-CrossLaps see C-Telopeptide

Referred Out: In-Common Laboratories

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### Beta Hydroxybutyrate, Serum

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.

## PLM Laboratory Test Catalogue

Note: Ketone ( $\beta$ -hydroxybutyrate) testing is available as point-of-care (POC) testing on Nova StatStrip meters in select acute care areas, primarily Emergency Departments and Intensive Care Units, where most patients with diabetic ketoacidosis (DKA) are managed. Capillary blood is used for this testing.  
When a broader assessment of ketosis is required (e.g., ketogenic diets, starvation, or insulin deficiency), a urinalysis may be requested. This provides a semi-quantitative measurement of urine ketones.  
If serum beta-hydroxybutyrate is still specifically required, please contact the Clinical Chemistry lab at 9024736865 to discuss.

LIS Mnemonic: BHYB

### Beta-Transferrin

#### $\beta$ -Transferrin (includes $\beta$ 1-Transferrin and $\beta$ 2-Transferrin)

Tube/Specimen: Fluid specimen; indicate source

Referred Out: In-Common Laboratories

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

LIS Mnemonic: BTRANS

### Bethesda (Factor VIII C Inhibitor)

see Factor VIII C Inhibitor

Division: Hematopathology - Coagulation

### Bethesda (Factor IX Inhibitor)

see Factor IX Inhibitor

Division: Hematopathology - Coagulation

### Bicarbonate, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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.

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## PLM Laboratory Test Catalogue

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: 3.5 mL Light Green lithium heparin (BD#367961)

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: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Indirect Bilirubin

LIS Mnemonic: BILI I

---

### Bilirubin Total, Fluids

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF BILI T

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### Bilirubin Total, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

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## PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core  
 Alternate Names: Total Bilirubin  
 Total VDB  
 LIS Mnemonic: BILI T

### Bioavailable Testosterone, Plasma/Serum

Tube/Specimen: a) Nova Scotia Health Central Zone collection: 4.0 mL Gold SST (BD#367977) & 3.5 mL Light Green lithium heparin (BD#367961)  
 OR  
 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.  
 Shipping: Outside of Nova Scotia Health Central Zone collection: Separate serum within 5 hours of collection. Serum stable for 7 days at 2 to 8°C. Freeze and send two 1.0 mL frozen serum aliquots. **DO NOT SEND FROZEN PLASMA**.  
 LIS Mnemonic: BA TEST

### Biquin Level

see Quinidine Level

Referred Out: In-Common Laboratories

### Blastomycosis

Tube/Specimen: 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: BLASTO

### Blood C&S

see Blood Cultures

Division: Microbiology

### Blood Cultures

Tube/Specimen: Refer to "Microbiology User's Manual" for collection procedures  
 Requisition: QE 7125  
 Division: Microbiology  
 Comments: Used to detect aerobic and anaerobic bacteria, fungi and mycobacteria.

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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 (BD#367861)

Division: Hematopathology - Microscopy

Instructions: Any Differential ordered will have a slide reviewed.

Order info: Powerchart - Manual Differential Requested

LIS Mnemonic: Manual Differential Requested

### Blood Gases, Arterial

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

Requisition: CD3211\_05 – 2022

Division: Clinical Chemistry - Core

Comments: Ensure 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

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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: 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

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**

## PLM Laboratory Test Catalogue

**ICE)** and deliver to Processing Area immediately. The patient's temperature and whether patient is receiving supplementary oxygen or room air must be indicated on the requisition. The Blood Gas should be analyzed within 30 minutes of collection.

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

Alternate Names: Oxygen Content  
Oxygen Saturation  
Co-Oximetry

LIS Mnemonic: VBG StdPnl

### Blood Group and Rh Type

see ABO Group and Rh Type

Division: Transfusion Medicine

### Blood Porphyrins

see Porphyrin Screen, Plasma

Referred Out: In-Common Laboratories

### Blood Sugar

see Glucose AC, Plasma

Division: Clinical Chemistry - Core

### Body Fluids

see specific test for instructions.

### Bone Alkaline Phosphatase (Bone Specific Alkaline Phosphatase)

Tube/Specimen: 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: ALP BONE

### Bone Marrow Aspiration- Bedside Collection

Tube/Specimen: See Instructions

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.

**Order Info: Powerchart -Lab Pathology Bone Marrow (Power Plan)**

## PLM Laboratory Test Catalogue

### 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 Lavender EDTA (BD#367841)

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.

Order info: Powerchart- Lab Pathology Bone Marrow (Powerplan)

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### Bone Marrow Biopsy

Division: Hematopathology - Microscopy

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

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### 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>

Division: Hematopathology-Microscopy

Instructions: QEII patients for this procedure must be booked with Hematopathology at 902-473-6667. Complete specimen type and date and time specimen collected on IWK requisition.

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### Bordetella Pertussis PCR

Tube/Specimen: Nasopharyngeal aspirate/swab (NPA/NPS)

Referred Out: IWK Microbiology Lab

LIS Mnemonic: PERT PCR

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### Bordetella Pertussis Serology

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

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

LIS Mnemonic: BORD

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### Borrelia Antibodies

see Lyme Antibodies

Division: Virology-Immunology

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**Borrelia-Lyme** **see Lyme Antibodies**

Division: Virology-Immunology

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**BR** **see CA 15-3**

Division: Clinical Chemistry - Core

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

Division: Molecular Diagnostics

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

Division: Molecular Diagnostics

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

Division: Clinical Chemistry - Core

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**Brucella Abortus Serology**

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

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

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

LIS Mnemonic: BRUC

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**BUN** **see Urea, Plasma**

Division: Clinical Chemistry - Core

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**C0** **see Cyclosporine**

Division: Clinical Chemistry - Toxicology

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**C1 Esterase Inhibitor** **see C1 Inactivator**

Division: Clinical Chemistry - Immunology

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**C1 Esterase Inhibitor “Functional”**

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083)

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## PLM Laboratory Test Catalogue

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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Immunology

Shipping: Ensure the specimen is allowed to clot for 30 minutes before centrifuging and removing the serum. Double centrifugation (after serum has been removed from plain red topped tube) is required to prevent red blood cells being present in the specimen. Two aliquot vials should be frozen and sent on dry ice.

Alternate Names: C1 Esterase Inhibitor

### C1Q Complement Component

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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.

LIS Mnemonic: C1QCOMP

### 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

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**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)  
 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)  
 Referred Out: In-Common Laboratories  
 Instructions: **Do Not Centrifuge!**  
 Refrigerate until shipping.  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Send copy of requisition.  
 LIS Mnemonic: CAD

---

**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: CAD 24U  
CAD RU

---

**Caffeine Level**

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: CAFF

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**Calcitonin**

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, 1<sup>st</sup> 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

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### Calcium, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Alternate Names: CA  
 LIS Mnemonic: CA

---

### Calcium, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination or 24-hour urine collection (preferred) in a plain container.  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: Specimen required: 4 mL aliquot of pH adjusted and well-mixed collection.  
 Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
 Record Total Volume of the 24-hour urine on both the aliquot and the requisition.  
 Refer to Appendix A for pH adjustment instructions.  
 Comments: Testing includes Urine Creatinine. Calcium/Creatinine ratio will be calculated for random urine specimens.  
 Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.  
 LIS Mnemonic: U24 CA  
 U CA

---

### Calculus Analysis

Tube/Specimen: State origin of calculus. Submit specimen in a clean container without preservative.  
 Referred Out: In-Common Laboratories  
 Instructions: Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Ship at room temperature.  
 LIS Mnemonic: STONE

---

### California Encephalitis see ARBO Virus

Division: Virology-Immunology

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### 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

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

Stability: IWK specimens: 3 days refrigerated; 30 days frozen.  
ICL specimens: 5 days refrigerated; 1 month frozen.

LIS Mnemonic: CALPRO

### CALR (Calreticulin) Mutation see Next Generation Sequencing – Myeloid panel

Division: Molecular Diagnostics

### cAMP see Cyclic AMP Urine and Serum

Referred Out: Mayo Medical Laboratories

### Cancer Associated Retinopathy Panel (CARP) see Anti-Retinal Autoantibody

Referred Out: Mayo Medical Laboratories

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

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

Instructions: **Must indicate “Epoxide” on the requisition.**  
Aliquot 2.0 mL serum. **Freeze.**  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: CARBEP

### Carbamazepine

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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 at 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 Dioxide, Plasma

see Bicarbonate, Plasma

Division: Clinical Chemistry - Core

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### Carbon Monoxide

Tube/Specimen: **6.0 mL Dark Green lithium heparin, no gel separator (BD#367886) at Room Temperature.**  
Maximum heparin ratio must be <10 IU/mL blood  
Recommended volume: Full tube

Requisition: CD3211\_05 – 2022

Division: Clinical Chemistry - Core

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

Alternate Names: Carboxyhemoglobin  
COHb

LIS Mnemonic: COHB

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### Carboxyhemoglobin

see Carbon Monoxide

Division: Clinical Chemistry - Core

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### Carcinoembryonic Antigen

see CEA

Division: Clinical Chemistry – Core

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### Cardiac Enzymes

see CK, Plasma or Lactic Dehydrogenase, Serum

Division: Clinical Chemistry – Core

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### Cardio Ab

see Anti-Cardiolipin Ab

Division: Immunopathology

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### Cardiolipin Antibodies

see Anti-Cardiolipin Ab

Division: Immunopathology

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### Carnitine Free and Total

Tube/Specimen: Collect one 4.0 mL Gold SST (BD#367977) or 6.0 mL Plain Red Top, no gel separator (BD#367815)

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.

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LIS Mnemonic: CARNI

### 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: CAROQST

### Catecholamines, Total Plasma

Tube/Specimen: Collect **two** 4.0 mL Lavender EDTA (BD#367861) 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: CAT P

### 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

Referred Out: In-Common Laboratories

Instructions: Refer to instructions on dietary restrictions and collection instructions in the provided pamphlet.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Record the Total Volume of the 24-hour urine on both the aliquot and the requisition.  
Refer to Appendix A for pH adjustment instructions.

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

Alternate Names: Urinary Catecholamines

LIS Mnemonic: CATS 24U

### CBC see Profile, AutoDiff

Division: Hematopathology - Core

### CBF beta-MYH11 gene fusion see Inversion 16

Division: Molecular Diagnostics  
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**CCP** **see Anti-Cyclic Citrullinated Peptide**

Division: Immunopathology

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**CD4 Cells, CD4 Cell Marker** **see T Cell Subsets**

Division: Hematopathology- Flow Cytometry

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**CD19 TESTING** **see B Cell Counts**

Division: Hematopathology- Flow Cytometry

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**CD34 TESTING** **see Stem Cell Enumeration**

Division: Hematopathology- HLA

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**CD55/59 TESTING** **see Paroxysmal Nocturnal Hemoglobinuria**

Division: Hematopathology – Flow Cytometry

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### CEA

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: Carcinoembryonic Antigen

LIS Mnemonic: CEA

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### CEA and Amylase, Pancreatic Cyst Fluid

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Stability: 72 hours refrigerated

LIS Mnemonic: PCF CEA and AMY  
Or  
PCF AMY and CEA

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**Celiac Screen/Disease** **see Anti-Tissue Transglutaminase**

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## PLM Laboratory Test Catalogue

Division: Immunopathology

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**CellCept** see **Mycophenolate**

Division: Clinical Chemistry - Toxicology

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**Cell-free DNA** see **Circulating Tumor DNA**

Division: Molecular Diagnostics

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**Cell Surface Markers** see **Leukemia and Lymphoma Screening**

Division: Hematopathology-Flow Cytometry

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**Celontin** see **Methotrexate**

Division: Clinical Chemistry - Core

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### Cerebrospinal Fluid

Tube/Specimen: Sterile plastic screw-top tubes

Requisition: QE 7850\_12\_05

Division: Hematopathology - Core

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

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

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**CH50** see **Complement CH50**

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## PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

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**CHIC-2** **see Hypereosinophilic Syndrome**

Referred Out: Mayo Cytogenetics Laboratory

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**Chicken Pox Titre** **see Varicella Zoster Immune Status**

Division: Virology-Immunology

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**Chikungunya Virus** **see ARBO Virus**

Division: Virology-Immunology

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### Chimerism Analysis for BMT

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C  
 Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C  
 Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen  
 DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Alternate Names: Pre-BMT Donor  
 Pre-BMT Recipient  
 Post-BMT  
 Post-BMT Recipient  
 STR  
 Short Tandem Repeats  
 VNTR  
 Variable Number Tandem Repeats

LIS Mnemonic: PostBMT DNA for Post-BMT  
 PreBMT-D DNA for pre-BMT donor  
 PreBMT-R DNA for pre-BMT recipient

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### 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

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## PLM Laboratory Test Catalogue

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 vaginal swab due to the decreased sensitivity of female urine.

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: 3.5 mL Light Green lithium heparin (BD#367961)

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: Cl-

LIS Mnemonic: CL

### Chloride, Stool

see Fecal Chloride

Referred Out: In-Common Laboratories

### Chloride, Random Urine or 24-Hour Urine

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

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U CL

**Cholesterol, Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.  
 Alternate Names: Cholesterol Screen  
 Lipid Profile  
 Lipid Screen  
 Lipid Testing  
 LIS Mnemonic: CHOL

**Cholesterol Crystals**

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

**Cholesterol Screen** **see Cholesterol, Plasma**

Division: Clinical Chemistry - Core

**Cholesterol, HDL** **see HDL-Cholesterol, Plasma**

Division: Clinical Chemistry - Core

**Cholesterol, LDL** **see LDL-Cholesterol, Plasma**

Division: Clinical Chemistry – Core

**Cholinesterase** **see Acetylcholinesterase, Plasma**

Division: Clinical Chemistry – Core

**Cholinesterase Phenotyping  
(CHE Phenotyping)**

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815). If patient has had surgery, collect specimen at least 24 hours post-surgery.

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Referred Out: In-Common Laboratories

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

LIS Mnemonic: CHEP

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

Division: Clinical Chemistry - Core

### Chrithidia Lucillae **see Anti-Nuclear AB (ANA)**

Division: Immunopathology

### Chromium 24 Hour Urine

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

Referred Out: In-Common Laboratories

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

LIS Mnemonic: CR 24U

### 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: CR P

### Chromium, Random Urine

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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: CR RU

### 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

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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: CHRA

### 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>)

## PLM Laboratory Test Catalogue

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: 3.5 mL Light Green lithium heparin (BD#367961) **or** 4.0 mL Gold SST (BD#367977) **or** 6.0 mL Plain Red Top, no gel separator (BD#367815)

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

### Citrate, 24-Hour Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot from well-mixed collection.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Patient must follow special diet provided by the Stone Clinic.  
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.

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

Alternate Names: Citric Acid

LIS Mnemonic: U24 CIT  
U CIT R [IWK specimens only]

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### Citrate for Platelet

see Profile, AutoDiff with Citrate for Platelet

Division: Hematopathology – Core

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### Citric Acid

see Citrate, Urine

Division: Clinical Chemistry – Core

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### CK, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry – Core

Alternate Names: Creatine Kinase  
CPK

LIS Mnemonic: CK

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### 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.

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### CL

see Chloride, Plasma

Division: Clinical Chemistry - Core

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

Tube/Specimen: Isolate for identification/typing

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Category B

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### CLL hypermutation

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

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### CLL MLPA

Tube/Specimen: Two 4.0 mL Lavender EDTA (BD#367861) and one 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)  
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.

## PLM Laboratory Test Catalogue

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 DNA

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### Clobazam and Metabolite

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) (avoid gel separator tubes)

Referred Out: In-Common Laboratories

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  
Desmethyloclobazam  
Norclobazam

LIS Mnemonic: CLOB

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### Clomipramine Level

Tube/Specimen: 6.0 mL Royal Blue Trace Element **Serum** (BD#368380) preferred  
6.0 mL Plain Red Top, no gel separator (BD#367815) or 4.0 mL Lavender EDTA (BD#367861) is acceptable. Must indicate specimen type on tube.

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.

LIS Mnemonic: CLOMI

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### Clonazepam (Clonazepine)

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: CLONA

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### Clostridium difficile

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## PLM Laboratory Test Catalogue

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: CDIFF PCR

### Clozapine (Clozaril)

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (BD#368381) or 6.0 mL Royal Blue Trace Element Serum (BD#368380)

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: CLOZA

### 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  
CMV IGM

### CMV Antigen

see CMV PCR

Division: Virology-Immunology

## PLM Laboratory Test Catalogue

### 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

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### CMV Blood Culture

see CMV PCR

Division: Virology-Immunology

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### CMV PCR

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 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: CMV PCR

---

### 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: CMV

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### CMV Titre

see CMV Antibody Screen

Division: Virology-Immunology

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### CO2, Plasma

see Bicarbonate, plasma

## PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

### Coagulation Factor Assays

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw

Requisition: CD0002

Division: Hematopathology - Coagulation

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

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

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

### 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: COB P

### 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)

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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: COCCIDIO

### COHb see Carbon Monoxide

Division: Clinical Chemistry - Core

### Cold Agglutinin Test see Cold Agglutinin Titre

Division: Transfusion Medicine

### Cold Agglutinin Titre

Tube/Specimen: One 6.0 mL Plain Red Top, no gel separator (BD#367815) (or 10 mL plain red top) or one 4.0 mL Lavender EDTA (BD#367861), collected at 37°C

Requisition: CD0001\_05\_2019

Division: Transfusion Medicine

Instructions: Specimens must remain at 37°C throughout the procedure until they arrive in Transfusion Medicine. If specimen cannot arrive in the laboratory at 37°C then spin and separate serum or plasma before sending. Serum or plasma must be separated within 24 hours. Testing is batched and will be performed once per week. If required STAT, please call Transfusion Medicine.

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

### Complement Serum (C3 and C4)

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Indicate on requisition, which Complement is requested.

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

Alternate Names: C3 C4

LIS Mnemonic: C3  
 Complement C3  
 C3 Complement  
 C4  
 Complement C4  
 C4 Complement  
 Complement  
 C3C4

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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

**Coombs Test** **see Direct Antiglobulin Test or Indirect**

Division: Transfusion Medicine

**Co-Oximetry** **see Blood Gases**

Division: Clinical Chemistry - Core

**Copeptin**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 Referred Out: In-Common Laboratories  
 Instructions: Centrifuge.  
 Aliquot 1.0 mL plasma into a plastic transfer vial. **Freeze at once.**  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Send copy of requisition.  
 LIS Mnemonic: COPEP

**Copper, Plasma**

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (BD368381)  
 Referred Out: In-Common Laboratories  
 Instructions: Centrifuge **ASAP.**  
 Aliquot approximately 3.0 mL plasma into a plastic transfer vial. **Freeze.**  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Send copy of requisition.  
 Utilization: Plasma copper is used for potential nutritional deficiency or in diagnosis of Wilson's disease.

## PLM Laboratory Test Catalogue

Stability: Room temperature 14 days, refrigerated 21 days and frozen 3 months.

LIS Mnemonic: CU P

### Copper, Random Urine or 24-Hour Urine

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

Referred Out: In-Common Laboratories

Instructions: Specimen required: 13 mL urine aliquot from well-mixed collection.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Record Total Volume of the 24-hour urine on both the aliquot and the requisition.  
Avoid mineral supplements for 5 days.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

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

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

LIS Mnemonic: CU 24U  
CU RU

### Copper, Whole Blood

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (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 14 days, refrigerated 28 days and frozen 28 days.

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.

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## PLM Laboratory Test Catalogue

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]

### Coxiella Burnetii see Q-Fever

Division: Microbiology-Immunology

### C-Peptide

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

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

LIS Mnemonic: CPEP

### CPK see CK, Plasma

Division: Clinical Chemistry - Core

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

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry – Core

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## PLM Laboratory Test Catalogue

Alternate Names: CRP  
High Sensitive CRP

LIS Mnemonic: CRP

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

Division: Clinical Chemistry - Core

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

Tube/Specimen: Submit both plasma and urine specimens (no preservative) as follows:  
Plasma: Collect blood in 3.5 mL Light Green lithium heparin (BD#367961) within +/- 12 hours of a 24-hour urine collection.

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

LIS Mnemonic: U24 CRCL (SI Units)  
U CRCL T (SI Units) (Timed 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: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: CREAT

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### 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

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: CJD

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### 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

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### Cryofibrinogen

Tube/Specimen: **One** 10.0 mL plain red top (or **two** 6.0 mL Plain Red Top, no gel separator (BD#367815)) at 37°C **and two** 4.0 mL Lavender EDTA (BD#367861) at 37°C.

Referred Out: Hamilton General Hospital

Instructions: Send to Esoteric Immunology Lab for processing.  
Keep specimens at 37°C during transport.

## PLM Laboratory Test Catalogue

LIS Mnemonic: MISC HEM

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### Cryoglobulins at 37°C

Tube/Specimen: **Four** 6.0 mL Plain Red Top, no gel separator (BD#367815) **or** **Two** Plain Red Top (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.

Requisition: QE 7125

Division: Microbiology

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

---

### CSF Lactate

**see Lactate, Spinal Fluid**

Referred Out: IWK Laboratory

---

### C-Telopeptide (CTX)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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

---

### Culture & Sensitivity

**see Blood Cultures**

Division: Microbiology

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

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## PLM Laboratory Test Catalogue

### CYA see Cyclosporine

Division: Clinical Chemistry - Toxicology

---

### Cyanide (Do not confuse with Thiocyanate)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Referred Out: In-Common Laboratories

Instructions: **Do Not Centrifuge!**  
**Do Not Freeze!** Keep refrigerated.  
Send specimen in original collection tube.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: CYAN

---

### Cyclic AMP Urine and Serum

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

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### Cyclic-Citrullinated Peptide see Anti-Cyclic Citrullinated Peptide

Division: Immunopathology


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### Cyclin-D1 see BCL1-IGH gene fusion

Division: Molecular Diagnostics

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### Cyclosporine

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

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.

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Alternate Names: Neoral  
Sandimmune IV  
CYA  
Cyclosporine A  
C0 (Trough)  
C2 (Peak)

LIS Mnemonic: CYA  
CYA 0 (Trough)  
CYA 2 (Peak)

### 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: CYSTI

### Cystine, Random Urine or 24-Hour Urine

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

Referred Out: IWK Metabolic Lab

### Cytogenetic Testing for IWK

see IWK Cytogenetics Testing

Referred Out: IWK Cytogenetics Lab

### Cytomegalovirus Antibody

see CMV Antibody Screen

## PLM Laboratory Test Catalogue

Division: Virology-Immunology

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**Cytomegalovirus IgM** **see CMV Antibody Screen**

Division: Virology-Immunology

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**Cytomegalovirus Viral Load** **see CMV PCR**

Division: Virology-Immunology

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**Cytotoxic Antibodies** **see HLA Antibody Testing**

Division: Hematopathology - Histocompatibility (HLA)

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**DADE** **see PTT Dade**

Division: Hematopathology - Coagulation

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**DAT** **see Direct Antiglobulin Test**

Division: Transfusion Medicine

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### D-Dimer

Tube/Specimen:  1.8 mL Light Blue buffered sodium citrate (BD#363080). 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).

LIS Mnemonic: DDIMER

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**Deaminated gliadin peptide IgG or IgA** **see Anti-Tissue Transglutaminase**

Division: Immunopathology

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**Dehydroepiandrosterone** **see DHEA-S**

Division: Clinical Chemistry - Core

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**Delta 4 Androstenedione** **see Androstenedione**

## PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

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**Dengue Virus** see **ARBO Virus**

Division: Virology-Immunology

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**Depakene** see **Valproate**

Division: Clinical Chemistry - Core

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**Desethylamiodarone** see **Amiodarone Level**

Referred Out: In-Common Laboratories

---

**Desipramine** see **Imipramine Level**

Referred Out: In-Common Laboratories

---

**Desmethyclomipramine** see **Clomipramine Level**

Referred Out: In-Common Laboratories

---

**Desmethyldoxepin** see **Doxepin Level**

Referred Out: In-Common Laboratories

---

**Dexamethasone Suppression Test (DST)** see **Cortisol, Serum**

Division: Clinical Chemistry - Core

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**DHEA-Unconjugated  
(Dehydroepiandrosterone unconjugated)**

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) or 4.0 mL Gold SST (BD#367977)

Referred Out: Mayo Medical Laboratories

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

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

LIS Mnemonic: MS REF

---

**DHEA-S**

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

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## PLM Laboratory Test Catalogue

Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: DHEA-S is a replacement test for urinary 17-Ketosteroids.  
 Shipping: Separate serum within 5 hours of collection. Serum stable for 8 days at 2 to 8°C. Freeze and send frozen serum, if longer.  
 Alternate Names: Dehydroepiandrosterone Sulphate  
 LIS Mnemonic: DHEAS

### Diabetes Mellitus Type 1 Panel

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)  
 Referred Out: In-Common Laboratories  
 Instructions: Centrifuge 2 gold SST tubes at room temperature.  
 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 7 days, Refrigerated 7 days, Frozen 28 days.  
 Note: 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: DIABT1AB

### Dialysate Fluid

**see specific test for instructions.**

Division: Clinical Chemistry - Core

### Diastase

**see Amylase**

Division: Clinical Chemistry - Core

### DIC Screen

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

Division: Hematopathology - Core

### Differential WBC Count

**see Profile**

Division: Hematopathology - Core

### Differential, Manual

**see Blood Film, Differential, Manual**

Division: Hematopathology - Microscopy

### Digoxin

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Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: For informative results specimen should be taken just prior to medication, or 8 hours after the drug has been administered.  
 LIS Mnemonic: DIG

### Dihydrohodamine (DHR)

Tube/Specimen: 6.0 mL Dark Green sodium heparin (BD#367878) **AND** one 6.0 mL Dark Green sodium heparin (BD#367878) 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: MS 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.  
 Stability: 7 days at 2 to 8°C and 3 months frozen.  
 LIS Mnemonic: DHTSM

### Dilantin see Phenytoin

Division: Clinical Chemistry - Core

### Diphenylhydantoin see Phenytoin, Free

Referred Out: In-Common Laboratories

### Diphtheria Antitoxin

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

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## PLM Laboratory Test Catalogue

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: DIPHTH

---

### Direct Antiglobulin Test

Tube/Specimen: 6.0 mL Lavender EDTA (BD#367863)  
Requisition: CD0001\_05\_2019  
Division: Transfusion Medicine  
Instructions: Indicate on requisition date and time required.  
Comments: NSHA CL-BP-040 Venipuncture for Blood Specimen Collection  
Alternate Names: DAT  
Coombs Test

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### Direct Bilirubin

see Bilirubin Direct, Plasma

Division: Clinical Chemistry - Core

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### 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 (BD#367861)  
Requisition: CD0002C  
Division: Hematopathology - Flow Cytometry  
Instructions: Specimens must arrive in the Flow Cytometry lab within 24 hours of collection and by 14:00 hours on Friday (or the day before a holiday).  
The volume of product collected is required on the requisition.  
The requisition must accompany the specimen to the Flow laboratory.  
Shipping: Maintain specimen at room temperature.  
LIS Mnemonic: T CELL SUB

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### Dopamine, Urine

see Catecholamines, 24 Hour Urine

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## PLM Laboratory Test Catalogue

Division: In-Common Laboratories

### Doxepin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: 4.0 mL Lavender EDTA (BD#367861) tubes are also acceptable; must indicate specimen type on tube.

LIS Mnemonic: DOX

### Drug Levels

(Micro Mycobacteriology)

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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

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

**E+** see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

**E2** see Estradiol

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## PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

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### Eastern Equine Encephalitis see ARBO Virus

Division: Virology-Immunology

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### EB Virus see Epstein - Barr Virus Antibodies

Division: Virology-Immunology

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### EBV PCR

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0002

Division: Virology-Immunology

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

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

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

LIS Mnemonic: EBV PCR

---

### Echinococcosis

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: ECHINO

---

### eGFR, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Age and gender must be included.

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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)  $\geq$  3 mg/mmol for >3 months are diagnostic criterion for Chronic Kidney Disease (CKD).  
For more information, refer to the latest Kidney Disease: Improving Global Outcomes (KDIGO) guidelines.  
Reported eGFR is based on the CKD-EPI 2021 equation that does not use a race coefficient.

Alternate Names: Estimated Glomerular Filtration Rate

LIS Mnemonic: eGFR

---

### **Ehrlichia** **see Hem Microorganism**

Division: Hematopathology-Microscopy

---

### **Ehrlichia PCR**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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: 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: EHRSER

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### **Elastase, Stool** **see Fecal Elastase**

Referred Out: In-Common Laboratories

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### **Electrolytes (Na, K), Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry – Core

## PLM Laboratory Test Catalogue

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

Shipping: Separate plasma within 2 hours of collection.

Alternate Names: E+  
Lytes

LIS Mnemonic: LYTES (NA, K)

### Electrolytes, Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

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

LIS Mnemonic: U24 LYTES  
U LYTES

### Electrophoresis of Protein

see Protein Electrophoresis, Serum

Division: Clinical Chemistry - Immunology

### Emerging Bacterial Pathogens/ Pathogenic Neisseria, Syphilis, and Vaccine Preventable Bacterial Diseases

(Neisseria meningitides, Neisseria gonorrhoeae,  
Haemophilus influenza, Bordetella)

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

Referred Out: National Microbiology Laboratory

Instructions: Shipped as Biological Substances Category B

### 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

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.

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### Enteric Diseases Program:

#### Salmonella species

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

Referred Out: National Microbiology Laboratory

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

---

### Enteric Diseases Program:

#### Shigella species

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

Referred Out: National Microbiology Laboratory

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

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### Enterohemorrhagic Ecoli requests

Referred Out: IWK-Microbiology Lab

Instructions: Shipped as Biological Substance Category B.

---

### 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.

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

LIS Mnemonic: ME PANEL (CSF)  
 RMICRO (Stool/throat/respiratory)

### Eosinophil Count

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0002

Division: Hematopathology – Core

Alternate Names: Total Eosinophil Count

### Eosinophil, Nasal Smear

Tube/Specimen: Nasal smear

Division: Hematopathology - Microscopy

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

Order info: Powerchart- Eosinophil Smear Nasal

LIS Mnemonic: EOS NS

### Eosinophil, Sputum

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

Division: Hematopathology - Microscopy

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

Order info: Powerchart- Eosinophil Smear Sputum

LIS Mnemonic: EOS SS

### 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.

Division: Hematopathology – Microscopy

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

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

Order info: Powerchart- Eosinophil Smear Urine

LIS Mnemonic: EOS RU

## PLM Laboratory Test Catalogue

### Epinephrine

see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

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### Epinephrine, Urine

see Catecholamines, 24 Hour Urine

Division: In-Common Laboratories

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### Epival

see Valproate

Division: Clinical Chemistry - Core

---

### EPO

see Erythropoietin

Division: Clinical Chemistry - Core

---

### Epoxide Level 10, 11

see Carbamazepine-10, 11 Epoxide

Referred Out: In-Common Laboratories

---

### Epstein - Barr Virus

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

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

Comments: Clinical data should be indicated on the requisition.

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

LIS Mnemonic: EBNA

---

### Erythropoietin

Tube/Specimen: 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

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## PLM Laboratory Test Catalogue

LIS Mnemonic: EPO

---

### ESR

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: ETHOS

---

### Ethyl Alcohol see Alcohol, Serum

Division: Clinical Chemistry - Core

---

### Ethylene Glycol

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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## PLM Laboratory Test Catalogue

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/URGENT to QEII-VG Site CSA. Please contact laboratory at 902-473-5514 to transmit information about sample and shipment. Ensure specimen bag and transport containers are labelled as STAT. If Routine testing, order and send on the next routine run to the QEII.

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

Alternate Names: Glycolic Acid

LIS Mnemonic: ETH GLY

### **ETOH** **see Alcohol, Serum**

Division: Clinical Chemistry - Core

### **Extractable-Nuclear Antibodies** **see Anti-nuclear Antibody**

Division: Immunopathology

### **F68KD (hsp-70)**

Tube/Specimen: One 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: HSP

### **Factor Assays II, V, VII, X, VIII, IX, XI, XII**

Tube/Specimen: Single assay - One 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw.  
Multiple assays - Three 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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.**

## PLM Laboratory Test Catalogue

### Factor Assay Chromogenic VIII

Tube/Specimen:	Single assay - One 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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:	<b>Chromogenic FVIII is only available to be ordered by Hematologists-all other orders will be cancelled.</b>
Alternate Names:	Chrom Factor VIII Chrom FVIII
LIS Mnemonic:	Chrom VIII CFVIII

---

### Factor Assay Chromogenic IX

Tube/Specimen:	<b>Two</b> 2.7 mL Light Blue buffered sodium citrate (BD#363083). 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 FIX

---

### Factor V Leiden Mutation

Tube/Specimen:	4.0 mL Lavender EDTA (BD#367861) - 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: FVL DNA

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### Factor VIII C Inhibitor

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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.

LIS Mnemonic: FVIII INHIB  
Factor VIII Inhibitor Assay

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

---

### Factor VIII Chromogenic Inhibitor

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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 Bethesda (Factor 8)  
Chromogenic Bethesda (Factor VIII C)

LIS Mnemonic: Chrom VIII Inhib  
CFVIII INH  
Factor VIII Inhibitor Chromogenic

---

### Factor IX Inhibitor

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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.

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LIS Mnemonic: FIX INHIB  
Factor IX Inhibitor Assay

Alternate Names: Bethesda (Factor IX) Assay  
Bethesda (Factor IX) Inhibitor

---

### Factor VIII Mutation

see Hemophilia Carrier Testing

Division: Molecular Diagnostics

---

### Factor XIII Antigen or Activity

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common Laboratories

Instructions: Send to Hematopathology Coagulation Lab for processing.

LIS Mnemonic: Miscellaneous Hematology Referred Out

---

### Factor XIII Activity

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common Laboratories (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: FXIIIACT  
Factor XIII Activity

Comment: **FXIII (Factor 13) is not performed at the QEII. Referring hospitals, outside of Central Zone, are to send specimens directly to In-Common Laboratories.**

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### Farmer's Lung

see Aspergillosis/Farmer's Lung

Division: Virology-Immunology

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### 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: RMICRO

---

**Fat, Fecal** **see Fecal Fat 72 Hour**

Referred Out: In-Common Laboratories

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**Fe** **see Iron, Plasma**

Division: Clinical Chemistry - Core

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**FE, Liver** **see Iron Level Liver RO**

Referred Out: In-Common Laboratories

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**Fecal Calprotectin** **see Calprotectin, Fecal**

Referred Out: In-Common Laboratories

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**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: CL FEC

---

**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: ELASF

---

**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: ELYTES F (K FEC for Potassium fecal; NA FEC for Sodium fecal)

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### Fecal Fat Timed

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, 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: FATQ

---

### 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 (Hgb F)

see Hemoglobin Electrophoresis


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 (BD#363080). 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.

LIS Mnemonic: FIB, Fibrinogen, Fibrinogen Assay

## PLM Laboratory Test Catalogue

### Fibrosis-4

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) **and** 3.5 mL Light Green lithium heparin (BD#367961).

Requisition: CD0002

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

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: FILARIAS

### FIP1P1/PDGFR $\alpha$

see Hypereosinophilic Syndrome

Referred Out: Mayo Medical Laboratories

### Fitzgerald Factor (HMWK)

Tube/Specimen: **One** 2.7 mL Light Blue buffered sodium citrate (BD#363083)


Referred Out: In-Common Laboratories

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: HWMK, Kininogen (HMW), Fitzgerald Factor

### FK 506

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: Trough whole blood should be collected before medication.

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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.

Note: This determination can be done on micro specimens when necessary.

Alternate Names: Tacrolimus  
Tacro

LIS Mnemonic: TACRO

---

### Fletcher Factor (Prekallikrein)

Tube/Specimen: Two 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common Laboratories

Instructions: Send to Hematopathology Coagulation Lab for processing.

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

LIS Mnemonic: Fletcher Factor, Prekallikrein, PREK

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### Flow Crossmatch

Referred Out: Immunology and Genetics Laboratory

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### Flow Cytometry

see Leukemia and Lymphoma Screening

Division: Hematopathology – Flow Cytometry

---

### FLT3

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.  
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.  
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.  
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

LIS Mnemonic: FLT-3 DNA

### Fluoxetine Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

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

Note: Royal Blue Trace Element SERUM tube (BD368380) and Lavender topped EDTA plasma tubes are also acceptable. Must indicate specimen type on tube.

LIS Mnemonic: FLUOXN

---

### Folate, Red Cell

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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: RBCFOL

---

### 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

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**Follicle Stimulating Hormone**

see FSH

Division: Clinical Chemistry - Core

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**Formic Acid**

see Methanol

Division: Clinical Chemistry - Toxicology

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**FRDIL**

see Phenytoin, Free

Referred Out: In-Common Laboratories

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**Free Erythrocyte Protoporphyrins**

see Protoporphyrin, Erythrocyte

Referred Out: In-Common Laboratories

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**Free Phenytoin**

see Phenytoin, Free

Referred Out: In-Common Laboratories

---

**Free Prostate Specific Antigen**

see PSA, Free

Division: Clinical Chemistry - Core

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**Free T3**

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 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

---

## PLM Laboratory Test Catalogue

### **Frisium**

see **Clobazam and Metabolite**

Referred Out: In-Common Laboratories

---

### **Fructosamine**

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: FRUCAM

---

### **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

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### **FSH MD**

see **Facioscapulohumeral Dystrophy**

Referred Out: Molecular Genetics Diagnostic Laboratory

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### **FV G1691 A Mutation**

see **Factor V Leiden Mutation**

Division: Molecular Diagnostics

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### **FV Gene Mutation**

see **Factor V Leiden Mutation**

Division: Molecular Diagnostics

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### **FXIII**

see **Factor XIII Assay**

Referred Out: Hamilton General Hospital

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### **G6PD**

see **Glucose-6-Phosphate Dehydrogenase**

Referred Out: In-Common Laboratories

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### Gabapentin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.  
Aliquot 2.0 mL serum in plastic referred-out tube. **Freeze** at once.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: GABA

---

### 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: GALAC

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### Gamma Globulins see Immunoglobulins (GAM)

Division: Clinical Chemistry - Core

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### Gamma Glutamyl see Gamma GT, Plasma

Division: Clinical Chemistry - Core

---

### Gamma GT, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

Alternate Names: Gamma Glutamyl Transpeptidase  
Gamma Glutamyltransferase  
GGT

## PLM Laboratory Test Catalogue

LIS Mnemonic: GGT

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

Referred Out: In-Common Laboratories

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**Ganglioside GQ1B IgG Antibody** see **GQ1B IgG Antibody**

Referred Out: In-Common Laboratories

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### Gastrin

Tube/Specimen: 4.0 mL Gold SST (BD#367977) **on ice**  
Patient must be fasting (12 hours or longer). Unknown or Not Fasting status will not be processed.

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Stability: Frozen: 30 days

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

LIS Mnemonic: GAST

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

Division: Molecular Diagnostics

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

Division: Molecular Diagnostics

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**Genetic Testing for IWK** see **IWK Molecular Testing**

Referred Out: IWK Clinical Genomics Lab

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**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.

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## PLM Laboratory Test Catalogue

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### Gentamicin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

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

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### 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.

LIS Mnemonic: Misc. Referred-Out

---

### Globulin see Protein Total and Albumin Plasma

Division: Clinical Chemistry - Core

---

### Glucagon

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## PLM Laboratory Test Catalogue

Tube/Specimen: Collect two **pre-chilled** 4.0 mL Lavender EDTA (BD#367861) **or** one **pre-chilled** 6.0 mL Lavender EDTA (BD#367863). **Chill filled tube(s) in wet ice for 10 minutes and then centrifuge.**  
Fasting is recommended by the testing site for best results, however not required.

Referred Out: In-Common Laboratories

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

LIS Mnemonic: GLP

---

### Glucose-6-Phosphate Dehydrogenase (G6PD)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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: 3.5 mL Light Green lithium heparin (BD#367961)

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: 3.5 mL Light Green lithium heparin (BD#367961)

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

---

## PLM Laboratory Test Catalogue

LIS Mnemonic: 1 HR GCT  
TRUTOL

---

### Glucose, Fluids

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: CSF GLU  
DF GLU  
BF GLU

---

### Glucose PC, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

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.

Alternate Names: Sugar PC

LIS Mnemonic: GLU PC  
GLU PC 2HR

---

### Glucose Profile, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: GLU AC  
GLU PC 2HR

---

### Glucose Random, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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## PLM Laboratory Test Catalogue

Requisition: CD0002  
Division: Clinical Chemistry - Core  
LIS Mnemonic: GLU R

---

### Glucose Tolerance Test (GDM), Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
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: 3.5 mL Light Green lithium heparin (BD#367961)  
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.  
For ages 16 and below please refer patient to IWK for GTT testing.  
For ages 17 and above please proceed with GTT testing.  
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

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**Glycolic Acid**

see Ethylene Glycol

Division: Clinical Chemistry - Toxicology

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**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: 6.0 mL Plain Red Top, no gel separator (BD#367815). Gel separator tubes are **not** acceptable.

Referred Out: In-Common Laboratories

Instructions: Transfer 1.0 mL serum in each of two plastic vials. **Freeze immediately.**  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

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: GNRH

---

**GP (Surface Glycoprotein Analysis-GP I<sub>b</sub>X and II<sub>b</sub>III<sub>a</sub>)**

Tube/Specimen: **Two** 2.7 mL Light Blue buffered sodium citrate (BD#363083) or one 6.0 mL Yellow ACD glass (BD#364816).

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.  
Store and ship at room temperature.  
**Note: Contact Lab prior to collection. Two 2.7mL light blue buffered sodium citrate or one yellow ACD glass tube MUST be collected from a normal control (immediately before or after patient collection) and sent together with patient sample or sample will not be processed.**  
**Completed McMaster patient requisition must accompany sample.**  
<https://transfusionresearch.healthsci.mcmaster.ca/wp-content/uploads/2025/11/Patient-Requisition-Form-v2025-11.docx>

LIS Mnemonic: Miscellaneous Hematology Referred Out

---

**GQ1B IgG Antibody**

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## PLM Laboratory Test Catalogue

**(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.

LIS Mnemonic: GQ1B

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

Division: Transfusion Medicine

**Group and Type** **see ABO Group and Rh Type**

Division: Transfusion Medicine

**Growth Hormone** **see Human Growth Hormone**

Division: Clinical Chemistry - Core

**Growth Hormone Releasing Hormone (GH-RH)**  
**(Do Not Confuse with Gn-RH)**

Tube/Specimen: Two 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: GHRH

**GTT** **see Glucose Tolerance Test, Plasma**

Division: Clinical Chemistry - Core

**GTT2** **see Glucose Tolerance Test, Plasma**

Division: Clinical Chemistry - Core

**H Pylori** **see Helicobacter Pylori Stool Antigen**

Division: Microbiology

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## PLM Laboratory Test Catalogue

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

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### H63D see Hemochromatosis

Division: Molecular Diagnostics

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### Haemophilus influenzae Routine typing from sterile sites or questionable outbreaks

Tube/Specimen: Isolate, Typing

Referred Out: IWK Microbiology Lab

Instructions: Shipped as Biological Substances Category B  
Porter service for delivery

---

### Hantavirus 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: HANTA

---

### Haptoglobin

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: HAPTO

---

### HAV see Hepatitis A Testing

Division: Virology-Immunology

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### Hb see Profile

Division: Hematopathology - Core

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## PLM Laboratory Test Catalogue

### HCG (Quant), Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

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

LIS Mnemonic: HCG  
BHCG QUANT

---

### HCG Beta Subunit

see HCG (Quant), Plasma

Division: Clinical Chemistry - Core

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### HCO3, Plasma

see Bicarbonate, Plasma

Division: Clinical Chemistry - Core

---

### HCT

see Profile

Division: Hematopathology - Core

---

### HDL-Cholesterol, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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.

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## PLM Laboratory Test Catalogue

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

### Heavy Metal Testing

see Trace Element Panels

Referred Out: In-Common Laboratories

### Heinz Bodies

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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 (BD#367861) or 4 Thick and 4 Thin Smears

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.

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## PLM Laboratory Test Catalogue

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

Order info: Powerchart- Hematology Microorganisms

LIS Mnemonic: HEM MORG

### Hematocrit see Profile

Division: Hematopathology - Core

### Hemochromatosis

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) (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 (BD#367841). 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 A1C

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### Hemoglobin and Hematocrit, Body Fluid

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) Jackson Pratt Drain or JP Drain  
Requisition: CD0002  
Division: Hematopathology - Core

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### Hemoglobin Electrophoresis

Tube/Specimen: 4.0 mL Lavender EDTA  
Requisition: CD0002  
Division: Hematopathology – Immunology  
Instructions: Specimens must be analyzed within 7 days and stored between 2 to 8 degrees.  
Do not store at room temperature.  
Hospitals outside Central Zone must send a copy of the CBC report with the specimen.  
Alternate Names: Thalassemia Screen  
Alpha Thalassemia Screen

---

### 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 Lavender EDTA (BD#367861).  
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: F8/VWD DNA

---

### Hemophilia Carrier Testing

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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## PLM Laboratory Test Catalogue

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: Hemophilia Carrier

### 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.

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.

Order Info: Powerchart- Hemosiderin Stain Urine or Hemosiderin Urine

LIS Mnemonic: HSID RU

### Heparin Induced Thrombocytopenia (HIT)

Tube/Specimen: **Two** 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw (plasma), and **two** 5.0 mL Gold SST (BD#367986).

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 4 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 In-Common Laboratories.

LIS Mnemonic: HIT

### Hepatitis A Antibody IgG

see Hepatitis A Testing

Division: Virology-Immunology

### Hepatitis A Antibody IgM

see Hepatitis A Testing

Division: Virology-Immunology

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### Hepatitis A Immune Status

see Hepatitis A Testing

Division: Virology-Immunology

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### Hepatitis A Testing

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

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

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

LIS Mnemonic: HEPA IGG (IgG)  
HEPA IGM (IgM)

---

### Hepatitis B Core Antibody (Total IgG and IgM)

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

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

LIS Mnemonic: HEPB CAB

---

### Hepatitis B Core Antibody IgM

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: RMICRO

---

### Hepatitis B e Antigen and Antibody

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

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

LIS Mnemonic: HEPBE

---

### Hepatitis B Genotyping

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

Requisition: CD0002A/CD0002B

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## PLM Laboratory Test Catalogue

Division: Virology-Immunology  
Instructions: Specify test requested on the Microbiology requisition.  
Clinical data must be indicated on the requisition.  
Comments: This test will be referred out by the laboratory.  
LIS Mnemonic: RMICRO

---

### 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: HEPB SAB

---

### 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: HEPB SAG

---

### 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: 4.0 mL Gold SST (BD#367977)

## PLM Laboratory Test Catalogue

Requisition: CD0002A/CD0002B  
Division: Virology-Immunology  
Comments: Diagnosis  
Alternate Names: Anti HCV  
HCV Antibody  
LIS Mnemonic: HEPC AB

---

### Hepatitis C Genotype

Tube/Specimen: Two 4.0 mL Gold SST (BD#367977)  
Requisition: CD0002A/CD0002B  
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 (BD#367861)  
Requisition: Laboratory Requisition Form for NON-B.C. Patients Only  
Division: Virology-Immunology  
Shipping: Whole blood may be transported at 2 to 8°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes. Ship one 2mL aliquot at 2 to 8°C if it will be received within 48 hours otherwise ship plasma frozen.  
LIS Mnemonic: 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

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Division: Virology-Immunology  
Comment: Quantitative  
Alternate Names: HCV PCR  
HCV RNA  
HCV Viral Load  
LIS Mnemonic: 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: 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: 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

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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)  
EHSVZ (all other specimens)

### Hexosaminidase, Beta

Tube/Specimen: MALES and Non-pregnant Females: 6.0 mL Plain Red Top, no gel separator (BD#367815).  
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 A1C

Division: Clinical Chemistry - Immunology

### HGH see Human Growth Hormone

Division: Clinical Chemistry - Core

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

Division: Clinical Chemistry - Core

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

Division: Clinical Chemistry - Core

### Histamine

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Referred Out: Mayo Medical Laboratories

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

Stability: 28 days frozen.

LIS Mnemonic: HIST

---

### 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: HISTAB

---

### Histoplasma Capsulation

see Histoplasmosis Serology

Division: Virology-Immunology

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### Histoplasmen

see Histoplasmosis Serology

Division: Virology-Immunology

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### 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: HISTO

---

## PLM Laboratory Test Catalogue

### HIV Genotyping and Drug Resistance

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: Laboratory Requisition Form for NON-B.C. Patients Only

Division: Virology-Immunology

Shipping: Whole blood may be transported at 2 to 25°C if it will be received within 24 hours. If not, separate plasma by centrifugation at 3000g for 20 minutes. Ship one 2mL aliquot of plasma frozen.

LIS Mnemonic: HIVGDR

---

### HIV Viral Load see HIV-1 Viral Load

Division: Virology-Immunology

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### HIV-1 Viral Load

Tube/Specimen: Two 4.0 mL Lavender EDTA (BD#367861)

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

---

### HLA-A see HLA Typing Autoimmune

Division: Hematopathology – Histocompatibility (HLA)

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### HLA-A29 see HLA Typing Autoimmune

Division: Hematopathology – Histocompatibility (HLA)

## PLM Laboratory Test Catalogue

**HLA-B** **see HLA Typing Autoimmune**

Division: Hematopathology – Histocompatibility (HLA)

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**HLA-B1502** **see HLA Typing Autoimmune**

Division: Hematopathology - Histocompatibility (HLA)

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**HLA-B27** **see HLA Typing Autoimmune**

Division: Hematopathology - Histocompatibility (HLA)

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**HLA-B51** **see HLA Typing Autoimmune**

Division: Hematopathology - Histocompatibility (HLA)

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**HLA-B5701** **see HLA Typing Autoimmune**

Division: Hematopathology - Histocompatibility (HLA)

---

**HLA-C** **see HLA Typing Autoimmune**

Division: 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. Specimens arriving after 3 pm on Friday will be processed the next business day.

Alternate Names: Cytotoxic Antibodies  
PRA

---

**HLA Crossmatch – Recipient**

Tube/Specimen: 4 x 6.0 mL Yellow ACD glass (BD#364816) (Solution B) and 1 x 6 mL serum (Red top or aliquot)

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.

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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.

LIS Mnemonic: H M RCXM

### HLA Crossmatch - Living Donor

Tube/Specimen: 4 x 6.0 mL Yellow ACD glass (BD#364816) (Solution B)

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.

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

Tube/Specimen: 8 x 6.0 mL Yellow ACD glass (BD#364816) (Solution B)  
 2 x 4.0 mL Lavender EDTA (BD#367861)  
 2 x 500uL EDTA Microtainer and 4 x 6.0 mL Yellow ACD glass (BD#364816) (Solution B) 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)

### HLA DQ see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

### HLA DR see HLA Typing Autoimmune

Division: Hematopathology - Histocompatibility (HLA)

### HLA Typing-Autoimmune

Tube/Specimen: 2 x 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0004

Division: Hematopathology - Histocompatibility (HLA)

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**Instructions:** HLA B5701 testing is limited to requests from the ID clinic only.

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

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

**Tube/Specimen:** 2 x 4.0 mL Lavender EDTA (BD#367861)  
2 x 500 µL EDTA Microtainer tubes for pediatric patients under 1 year of age  
2 x buccal swabs

**Requisition:** CD0004

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

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

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

**Notes:** For pediatric peripheral blood collections less than 4 mL, additional specimens may be requested by the laboratory if required. For difficult collections, or when clinically warranted, the laboratory may accept lower minimum specimen requirements. Contact the laboratory for further information.

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

**Tube/Specimen:** 2 x 4.0 mL Lavender EDTA (BD#367861)  
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.

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

**Notes:** 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

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

### HLA-H see Hemochromatosis

**Division:** Molecular Diagnostics

---

**HMBS**

see Acute Intermittent Porphyrin gene mutation

---

**HMGCR Antibodies**

see Anti-HMGCR Antibodies

Referred Out: In-Common Laboratories

---

**Homocysteine**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861). Patient should be fasting.

Referred Out: In-Common Laboratories

Instructions: **Note: Specimen must be spun and separated within 1 hour of collection!**  
Centrifuge, aliquot 2.0 mL plasma and **Freeze**.  
Outside hospitals may be accessioned.  
Patient is preferred to be fasting but is not required.  
Send copy of requisition.

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

LIS Mnemonic: HOMO

---

**Homogentisic Acid**

see Organic Acid Analysis

Referred Out: IWK Metabolic Lab

---

**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

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LIS Mnemonic: HTLV

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

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.

Stability: Frozen: 60 days

Alternate Names: GH  
Growth Hormone  
HGH

LIS Mnemonic: GH

---

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

Division: Virology-Immunology

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**Human Leukocyte Antigen**                      **see HLA Tissue Typing**

Division: Hematopathology – Histocompatibility (HLA)

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**Human Leukocyte Antigen-H**                      **see Hemochromatosis**

Division: Molecular Diagnostics

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**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.

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**Hydroxybutyrate**                      **see Beta Hydroxybutyrate**

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## PLM Laboratory Test Catalogue

Referred Out: In-Common Laboratories

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**Hydroxymethylbilane Synthase Gene**                      **see Acute Intermittent Porphyrria gene mutation**

---

**Hypereosinophilic Syndrome (Molecular)**  
**(Do not confuse with Hypereosinophilic Syndrom (Flow Cytometry))**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) (whole blood) or bone marrow specimen.

Referred Out: Mayo Medical Laboratories

Instructions: Hematopathology Molecular lab will process specimen.

LIS Mnemonic: HES DNA or MS HM RF (Note: Miscellaneous Hematology Referred Out (MS HM RF) is only to be ordered by Molecular Diagnostics technologists after approval. All other staff are to order HES DNA.)

---

**Hypereosinophilic Syndrome (Flow Cytometry)**  
**(Do not confuse with Hypereosinophilic Syndrom (Molecular))**

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886) **and** 4.0 mL Lavender EDTA (BD#367861) for CBC and Auto Differential

Division: Hematopathology-Flow Cytometry

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

Shipping: Maintain specimen at room temperature.  
 An unstained peripheral blood slide, copy of the CBC results with differential, patient diagnosis 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: Path flow HES (Pathology Flow Cytometry HES (Hyper Eosinophilic Syndrome))

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**Hypermutation**    **see IGHV Somatic Hypermutation**

Division: Molecular Diagnostics

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

Division: Transfusion Medicine

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**Idiopathic Thrombocytopenia Purpura (ITP)**    **see Autoimmune Thrombocytopenia Purpura**

Referred Out: McMaster University HSC

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**IG gene rearrangement**                                      **see B-cell lymphoid clonality**

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Division: Molecular Diagnostics

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**IG Heavy Chain** **see B-cell lymphoid clonality**

Division: Molecular Diagnostics

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**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 Subclass**

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: IgG4SC

---

**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: IgGSC

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## PLM Laboratory Test Catalogue

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### IgG/TCR Gene Rearrangement

Division: Molecular Diagnostics  
 Alternate Names: TCR Gene Rearrangement

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### IGHV mutation status

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

---

### IGHV Somatic Hypermutation

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 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.  
 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: NGS IGHV

---

### IgM

see Immunoglobulin M

Division: Clinical Chemistry - Core

---

### IGRA

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)

Requisition: CD0432/CD0433

Division: Microbiology

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

Instructions: Minimum acceptable volume = 5mL.  
 Send directly to 3<sup>rd</sup> floor Microbiology.  
 Initial processing will be done by the Microbiology lab-3<sup>rd</sup> floor Mackenzie.  
 Assay testing will be performed by the Microbiology Lab-4<sup>th</sup> floor Mackenzie.

## PLM Laboratory Test Catalogue

LIS Mnemonic: IFNG

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### Imipramine Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: IMI

---

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

Referred Out: In-Common Laboratories

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### Immunodeficiency Testing

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)

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: Path Flow Immunodeficiency (Pathology Flow Cytometry Immunodeficiency Testing)

---

### 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

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## PLM Laboratory Test Catalogue

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

---

### 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.  
 Alternate Names: Free Kappa  
 Free Lamda  
 LIS Mnemonic: Ig FLC

**Indirect Antiglobulin Test** **see Type and Screen (ABO/Rh and Antibody Screen)**

Division: Transfusion Medicine

**Indirect Bilirubin** **see Bilirubin Indirect, Plasma**

Division: Clinical Chemistry - Core

**Infectious Mononucleosis** **see Epstein-Barr Virus**

Division: Microbiology-Immunology

**Influenza/RSV/Other Viral Respiratory Testing**

Tube/Specimen: Nasopharyngeal swab in viral transport media, Bronch wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural fluid  
 Requisition: CD0432/CD0433  
 Division: Virology-Immunology

## PLM Laboratory Test Catalogue

**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:** RESP PCR (influenza A, B, RSV) (for all specimen types except lung tissue and pleural fluid)  
 MRVP (Viral respiratory testing on all specimen types if criteria for testing met)  
 FLUNAAT (lung tissue, pleural fluid)

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

### Inhibitor (Non Specific)

see Lupus Anticoagulant Screen

**Division:** Hematopathology - Coagulation

### Inhibitor (Specific)

see Factor VIII C Inhibitor


**Division:** Hematopathology - Coagulation

### Inorganic Phosphorous

see Phosphorous, Plasma

**Division:** Clinical Chemistry - Core

### INR (PT)

**Tube/Specimen:**  1.8 mL Light Blue buffered sodium citrate (BD#363080). Must be a full draw.

**Requisition:** CD0002

**Division:** Hematopathology – Core

**Alternate Names:** Prothrombin Time

**LIS Mnemonic:** PT  
 INR

### 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.

**Shipping:** Separate serum from gel separator within 90 minutes of collection. Freeze and send frozen serum.

**Stability:** Separated serum: 5 days at 2 to 8°C and 14 days at -20°C

**LIS Mnemonic:** INS

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**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: INSAB

**Insulin like Growth Factor-1**

Tube/Specimen: 4.0 mL Gold SST (BD#367977)  
 Requisition: CD0002  
 Division: Clinical Chemistry – Core  
 Instructions: Specimen must be centrifuged within 90 minutes.  
 Shipping: Separate serum and freeze immediately.  
 Stability: Frozen: 6 months  
 Alternate Names: IGF-1  
 Somatomedin-C  
 LIS Mnemonic: IGF-1

**Intact PTH**

**see Parathyroid Hormone Intact**

Division: Clinical Chemistry - Core

**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: 6.0 mL Plain Red Top, no gel separator (BD#367815) (avoid gel separator tubes)  
 Referred Out: In-Common Laboratories  
 Instructions: Avoid all biotin supplements for 48 hours prior to specimen collection.

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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: IL6 VF

### Interleukin 10 Vitreous Fluid

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

Referred Out: In-Common Laboratories

Instructions: Freeze within 30 minutes of collection.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Room temperature 30 minutes, refrigerated unacceptable, frozen 30 days.

LIS Mnemonic: IL10 VF

### 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: INFAB

### INV 16

see Inversion 16

## PLM Laboratory Test Catalogue

Division: Molecular Diagnostics

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### Inversion 16

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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: Inv 16 RNA

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### Iodine Plasma

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

Referred Out: In-Common Laboratories

Instructions: **Centrifuge ASAP!** Testing cannot be performed on whole blood.  
Aliquot plasma into plastic transfer vial. Keep refrigerated.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: IODINE

---

### Ionized Calcium, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961), **must be a full draw.**  
**Place on ice immediately after collection.**  
Transport specimen to the lab **immediately.**

Requisition: CD0021

Division: Clinical Chemistry – Core

Instructions: Ideally no tourniquet should be used. Patient should not be allowed to exercise the forearm or pump fist.  
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.

Shipping: Transport spun specimens on cold pack optimally within 24 hours of centrifugation. Do not use dry ice. Do not freeze.  
Unspun specimens must be received in lab on ice within 2 hours of collection.

Alternate Names: Calcium Lvl Ionized

LIS Mnemonic: ICA

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### Iron, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
Requisition: CD0002  
Division: Clinical Chemistry - Core  
Alternate Names: Fe  
Iron Binding  
Total Iron Binding Capacity  
LIS Mnemonic: IRON/TIBC

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### Iron Binding Capacity, Plasma see Iron, Plasma

Division: Clinical Chemistry - Core

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### 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

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### Islet Transplant Program see PRA/LAS

Referred Out: University of Alberta

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### Isoelectric Focusing (IEF)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
Referred Out: IWK Hematology Lab  
Instructions: Send to Hematopathology Coagulation lab for processing.  
LIS Mnemonic: Miscellaneous Hematology

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### Isoenzyme, Alkaline Phosphatase see Alkaline Phosphatase: Isoenzyme

Referred Out: In-Common Laboratories

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### Isohemagglutinin Titre see ABO Antibody Titre

Division: Transfusion Medicine

## PLM Laboratory Test Catalogue

### Isopropanol

see Isopropyl Alcohol, Qualitative

Division: Clinical Chemistry - Toxicology

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### Isopropyl Alcohol, Qualitative

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) or 10 mL Plain Red Top

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/URGENT 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. If Routine testing, order and send on the next routine run to the QEII.

Alternate Names: Isopropanol

LIS Mnemonic: ALC QNT

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### IWK Clinical Genomics

Tube/Specimen: As per requisition

Referred Out: IWK Clinical Genomics

Instructions: Do not accession.  
Keep specimen at room temperature.

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### IWK Cytogenetics Testing

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.

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### 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.

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### IWK Microarray Testing

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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## PLM Laboratory Test Catalogue

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.

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**JAK2 (v6 7f)** **see Jak2 gene mutation**

Division: Molecular Diagnostics

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**JAK2 exon 12** **see Next Generation Sequencing - Myeloid panel**

Division: Molecular Diagnostics

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**Jak2 gene mutation**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
Peripheral blood: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.  
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.  
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen. Alternatively, send fixed tissue in paraffin block.  
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Alternate Names: Polycythemia vera  
Thrombocythemia  
JAK2 (v6 7f)

LIS Mnemonic: JAK2 DNA

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**Jo-1** **see Anti-nuclear antibody**

Division: Immunopathology

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**Joint Fluid** **see Synovial Analysis**

Division: Hematopathology - Core

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**K+** **see Electrolytes (Na, K), Plasma**

Division: Clinical Chemistry - Core

## PLM Laboratory Test Catalogue

### Karyotype Testing for IWK

see IWK Cytogenetics Testing

Referred Out: IWK Clinical Genomics Lab

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### Kepra

see Levetiracetam

Referred Out: In-Common Laboratories

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### Ketone, Serum

see Beta Hydroxybutyrate

Referred Out: In-Common Laboratories

Note: Ketone ( $\beta$ -hydroxybutyrate) testing is available as point-of-care (POC) testing on Nova StatStrip meters in select acute care areas, primarily Emergency Departments and Intensive Care Units, where most patients with diabetic ketoacidosis (DKA) are managed. Capillary blood is used for this testing.  
When a broader assessment of ketosis is required (e.g., ketogenic diets, starvation, or insulin deficiency), a urinalysis may be requested. This provides a semi-quantitative measurement of urine ketones.  
If serum beta-hydroxybutyrate is still specifically required, please contact the Clinical Chemistry lab at 9024736865 to discuss.

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### Kidney Function Tests

see Creatinine, Plasma; Urea, Plasma; Albumin, Plasma or Uric Acid, Plasma

Division: Clinical Chemistry - Core

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### Kininogen

see Fitzgerald Factor

Referred Out: Hamilton General Hospital

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### KIT Asp816Val

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

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### Kleihauer-Betke

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861). **Not performed on Males.**

Referred Out: IWK Hematology Lab

Instructions: Keep whole blood refrigerated.  
**Do Not Centrifuge.**

Note: If specimens are from a non-Nova Scotia Health *Central Zone* Hospital; Do not accession and send directly to the IWK Hematology Lab.

LIS Mnemonics: KLE

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### KRAS

see Next Generation Sequencing – Solid Tumor panel

Division: Molecular Diagnostics

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### LA

see Extractable-Nuclear Antibodies

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## PLM Laboratory Test Catalogue

Division: Immunopathology

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### Lactate Dehydrogenase see LD, Serum

Division: Clinical Chemistry – Core

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### Lactate, Plasma

Tube/Specimen: 4.0 mL Grey sodium fluoride (BD#367925), completely filled and kept on ice.

Requisition: CD0002

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 minutes.

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)

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

Requisition: QE 7850\_12\_05

Division: Clinical Chemistry - Core

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

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

Alternate Names: Lactic Acid

LIS Mnemonic: CSF Lact Lvl

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

Division: Clinical Chemistry - Core

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### Lactic Dehydrogenase see LD, Serum

Division: Clinical Chemistry - Core

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### Lamictal see Lamotrigine

Division: Clinical Chemistry - Toxicology

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## PLM Laboratory Test Catalogue

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### Lamotrigine

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) or 10 mL Plain Red Top

Requisition: CD0002

Division: Clinical Chemistry - Toxicology

Instructions: These determinations can be done on micro specimens. Send at least 0.2 mL of serum. Blood should be collected just prior to the next dose (trough collection). Specimens should not be collected until the blood concentration is at steady state (3-4 half-lives).

Alternate Names: Lamictal

LIS Mnemonic: LAMOT

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### Latex Fixation

see Rheumatoid Factor

Division: Clinical Chemistry - Core

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### LAV

see HIV-1/HIV-2

Division: Virology-Immunology

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### LCMV (Lymphocytic Choriomeningitis Virus)

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: RMICRO

---

### LD, Fluids

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Alternate Names: Lactate Dehydrogenase  
LDH

LIS Mnemonic: BF LD

---

### LD, Serum

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Tube/Specimen: 4.0 mL Gold SST (BD#367977)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: **Requests for testing will only be processed if clinical details are provided in brackets next to the LD request. The term 'Do not cancel' will not be accepted.**  
 Alternate Names: Lactate Dehydrogenase  
 LDH  
 LIS Mnemonic: LD

### LDH see LD, Serum

Division: Clinical Chemistry - Core

### LDL-Cholesterol, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 Requisition: CD0002  
 Division: Clinical Chemistry - Core  
 Instructions: Patient fasting is at the discretion of the ordering physician and must be indicated on the requisition.  
 Alternate Names: Cholesterol, LDL  
 Low Density Lipoprotein Cholesterol  
 LIS Mnemonic: LDL D

### LEAD, Whole Blood

Tube/Specimen: Royal Blue Trace Element K2 EDTA tube (BD368381).  
 Referred Out: In-Common Laboratories  
 Instructions: **Do Not Centrifuge!**  
 Ship refrigerated. **Do not freeze.**  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Send copy of requisition.  
 Stability: 20 days at room temperature and 15 months at 2 to 8° C or frozen.  
 LIS Mnemonic: LEAD

### Legionella

Tube/Specimen: Urine collected in dry sterile container  
 Requisition: CD0432/CD0433  
 Division: Virology-Immunology

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Note: Ship at room temperature up to 24 hours or 2 to 8°C within 14 days

LIS Mnemonic: LEGAG

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### 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: LEISHSER

---

### 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: 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: LEPTO

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### Leukemia and Lymphoma Screening – Bone Marrow

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)

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.

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## PLM Laboratory Test Catalogue

**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:** Flow Leukemia/Lymphoma Non-blood (Pathology Flow Cytometry Leukemia/Lymphoma Screening - Non-blood)

### 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.

CSF:  
 Cerebrospinal fluid (CSF) specimens with a low number of cells can be collected without RPMI but need to be received by the Flow Cytometry Laboratory within 30 minutes after collection for adequate processing; if there is an expected delay in transport RPMI solution should be added.

Fluids:  
 Other body fluids including pleural and peritoneal fluids require the addition of RPMI only if the specimen is not being sent immediately to the laboratory.

**Note:** The time of collection and the time the RPMI solution is added should be indicated on the requisition. The amount of specimen and the 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 be refrigerated at 2 to 8° Celsius. Please note that the specimen should already be placed in RPMI solution.

**LIS Mnemonic:** Flow Leukemia/Lymphoma Non-blood (Pathology Flow Cytometry Leukemia/Lymphoma Screening - Non-blood)

### Leukemia and Lymphoma Screening – Peripheral Blood

**Tube/Specimen:** 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886) **and** 4.0 mL Lavender EDTA (BD#367861) for CBC and Auto Differential

**Requisition:** CD0002C

**Division:** Hematopathology-Flow Cytometry

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- Instructions:** Specimens should arrive in the Flow Cytometry lab on the same day of collection, however, must arrive within 24 hours of collection and no later than 14:00 on Fridays (or the day before a holiday). The requisition must accompany the specimen to the Flow laboratory.
- Shipping:** Maintain specimen at room temperature.  
An unstained peripheral blood slide, copy of the CBC results with differential, patient diagnosis and requisition must accompany all specimens collected outside of the QEII VG site.  
**Note:** For specimens collected outside of the QEII VG site please notify the Flow Cytometry laboratory (902-473-5549) in advance when requesting this test. Provide patient name, health card number and referral hospital contact information.
- LIS Mnemonic:** Flow Leukemia/Lympho - Blood (Pathology Flow Cytometry Leukemia/Lymphoma Screening - Blood)

### Levetiracetam

- Tube/Specimen:** 6.0 mL Plain Red Top, no gel separator (BD#367815) 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)
- 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:** Luteinizing Hormone  
Pituitary Gonadotropins
- LIS Mnemonic:** LH

### Lipase, Plasma

- Tube/Specimen:** 3.5 mL Light Green lithium heparin (BD#367961)
- Requisition:** CD0002
- Division:** Clinical Chemistry - Core
- Shipping:** If sending specimen from outside QEII HSC transport frozen plasma on dry ice.
- LIS Mnemonic:** LIPASE

### Lipid Profile

see Cholesterol, Plasma

- Division:** Clinical Chemistry - Core

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### 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)

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 within 4 hours of collection and aliquot 1.0 mL serum into plastic vial within 8 hours of collection.  
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: LPA

---

### Lithium

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: LI

---

### Lithium, Whole Blood

(Do not confuse with Lithium, RBC-no longer available)

(Ordering physician must specify)

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

Referred Out: In-Common Laboratories

Instructions: **Do Not Centrifuge!** Cannot be tested on plasma.  
Ship refrigerated. **Do not freeze.**  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: LITH WB

---

### Liver FE, Liver Iron

see Iron Level Liver RO

Referred Out: In-Common Laboratories

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**Liver Kidney Microsomal Antibodies (LKM)**

Tube/Specimen: 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: **Two** 2.7 mL Light Blue buffered sodium citrate (BD#363083). Tubes must be a full draw.  
 Requisition: CD0002  
 Division: Hematopathology - Coagulation  
 Comments: Includes screening and confirmatory evaluations to detect Lupus Anticoagulants. This is not the same as an anticardiolipin antibody test, which is often referred to as antiphospholipid antibody as well.  
 Referrals: Send 3 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Handling Information) in polypropylene vials (12x75).  
 Alternate Names: Inhibitor (Non Specific)

**Luteinizing Hormone** **see LH**

Division: Clinical Chemistry - Core

**Lyme Antibodies**

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

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Requisition: CD0002A/CD0002B  
 Division: Virology-Immunology  
 Instructions: All Lyme requests will have Anaplasma testing completed. Anaplasma will be added by a rule upon receipt in Micro.  
 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: 4.0 mL Lavender EDTA (BD#367861). Whole Blood – **Do Not Centrifuge.**  
 Referred Out: In-Common Laboratories  
 Instructions: Send to VG CSA; will be frozen upon arrival.  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 Send copy of requisition.  
 LIS Mnemonic: LALAB

### Lytes see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

### Lytes, Stool see Fecal Electrolytes

Referred Out: In-Common Laboratories

### L-Asparaginase, Serum

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) (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).

## PLM Laboratory Test Catalogue

LIS Mnemonic: ASPAR

---

### 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

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### Magnesium, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Refer to Appendix A for pH adjustment instructions.  
It is not acceptable to add preservative to an aliquot.

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

LIS Mnemonic: U24 Mg  
U Mg

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### Malarial Parasites

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Division: Hematopathology – Microscopy

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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.

Order info: Powerchart- Malaria Investigation

---

### Manganese, Plasma

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (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: MANG P

---

### Manganese, Whole Blood

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (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: MANG WB

---

### Maprotiline Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

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

Note: Royal Blue Trace Element SERUM tubes (BD368380) and lavender topped EDTA plasma tubes are acceptable; indicate specimen type on 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: MATSCRN1 (1<sup>st</sup> Trimester) or MATSCRN2 (2<sup>nd</sup> Trimester)

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### 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: MEA IGM (IgM Diagnosis)  
MEA IGG (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: MEASLES

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### Melanoma Associated Retinopathy Panel (MARP) **see Anti-Retinal Autoantibody**

Referred Out: Mayo Medical Laboratories

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### Mellaril **see Thioridazine Level**

Referred Out: In-Common Laboratories

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### Mercury

Tube/Specimen: 6.0 mL Royal Blue Trace Element K2 EDTA (BD#368381)  
Referred Out: In-Common Laboratories  
Instructions: **Do Not Centrifuge**; cannot be tested on plasma.

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## PLM Laboratory Test Catalogue

**Do Not Freeze.** Ship refrigerated.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: MERC WB

### 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: MERC 24U  
MERC RU

### 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: Refer to instructions on dietary restrictions and collection instructions in the provided pamphlet.  
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.  
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: METAN 24U

### Metanephrines, Plasma

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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**

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Division: Clinical Chemistry - Core

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### Methanol

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815) or 10 mL Plain Red Top

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/URGENT 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. If Routine testing, order and send on the next routine run to the QEII.

Comments: Analysis includes quantitation of Formic Acid, the primary toxic metabolite of Methanol.

Alternate Names: Methyl Alcohol  
Formic Acid

LIS Mnemonic: ALC QNT

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### Methemoglobin

Tube/Specimen: 6.0 mL Green lithium heparin, no gel separator (BD#367886) **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

---

### Methotrexate

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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

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LIS Mnemonic: MTX

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**Methyl Alcohol** **see Methanol**

Division: Clinical Chemistry - Toxicology

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**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: MMA

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**MHA-TP** **see Syphilis Serology**

Division: Virology-Immunology

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**Microalbumin, Urine** **see Albumin, Urine**

Division: Clinical Chemistry - Core

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**Microarray Testing for IWK** **see IWK Molecular Testing**

Referred Out: IWK Clinical Genomics Lab

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**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

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**Microsatellite Instability Testing** **see MSI**

Division: Molecular Diagnostics

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

Division: Clinical Chemistry - Core

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### Mitotane

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

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

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

LIS Mnemonic: MITOTANE

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### Mix (50-50)

see PT 50% Mix or PTT 50% Mix

Division: Hematopathology - Coagulation

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### MLPA

see CLL MLPA

Division: Molecular Diagnostics

---

### MMF

see Mycophenolate

Division: Clinical Chemistry - Toxicology

---

### Mofetil

see Mycophenolate

Division: Clinical Chemistry - Toxicology

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### Molecular Testing for IWK

see IWK Molecular Testing

Referred Out: IWK Clinical Genomics Lab

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### Mono

see Epstein-Barr Virus

Division: Microbiology-Immunology

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### Monosialoganglioside GM1 (IgM)

see GM1 Ganglioside Antibody

Referred Out: In-Common Laboratories

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### Monospot

see Epstein-Barr Virus

Division: Microbiology-Immunology

## PLM Laboratory Test Catalogue

### MPA see Mycophenolate

Division: Clinical Chemistry - Toxicology

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### MPL see Next Generation Sequencing – Myeloid panel

Division: Molecular Diagnostics

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### MPL exon 10 mutation see Next Generation Sequencing – Myeloid panel

Division: Molecular Diagnostics

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### 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: SYMPX

---

### 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

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: Methylene tetrahydrofolate reductase

LIS Mnemonic: None

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### Mucopolysaccharide Screen, Urine (Polysaccharide Screen) (Acid Mucopolysaccharide)

Tube/Specimen: Collect a random urine specimen; first morning collection preferred.

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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: MUCO RU

---

### Mumps Antibody

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

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

LIS Mnemonic: MUMP IGG (IgG Immunity)  
MUMP IGM (IgM Diagnosis)-only performed upon request from Public Health, all others will be canceled and be tested for Mumps IgG

---

### Mumps PCR

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

Requisition: CD0432/CD0433

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: MPS

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### Muscle Autoimmune Myositis Panel

see Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum

Referred Out: In-Common Laboratories

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

see Next Generation Sequencing-Myeloid Panel

Division: Molecular Diagnostics

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### 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.

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## PLM Laboratory Test Catalogue

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### Mycobacteriology Referred-out Identification, M. leprae request, Susceptibility, Genotyping Services

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

Referred Out: National Reference Centre for Mycobacteriology (NRCM)

Instructions: Susceptibility, Genotyping Services M. tuberculosis (MTB) shipped with Category A requirements  
Non MTB shipped as Biological Substances Category B  
Remaining shipped as Exempt Human Specimens  
National Reference Centre for Mycobacteriology (NRCM) requisition

---

### Mycobacteriology Referred-out specimens for Mycobacterium leprae (skin scraping slides and or Tissue on slide or block)

Tube/Specimen: Skin scraping slides and or tissues on slide or block

Referred Out: NHDP

Instructions: Shipped as Exempt Human Specimens  
National Hansen's Disease Programs (NHDP) requisition

LIS Mnemonic: ROSP

---

### Mycology (Sporothrix, Coccidioides immitis, Cryptococcus, Histoplasma capsulatum, Blastomyces dermatitidis, Aspergillosis)

Tube/Specimen: Isolate

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

Division: Virology-Immunology

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

LIS Mnemonic: 18S

---

### Mycophenolate

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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.

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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

Referred out: IWK Microbiology Lab

Instructions: Clinical data should be indicated on the requisition.

LIS Mnemonic: MPPCR

### **MYD88**

**see Next Generation Sequencing – Myeloid panel**

Division: Molecular Diagnostics

### **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: AMAG

### **Myelin Oligodendrocyte Glycoprotein**

**see Neuromyelitis Optica (NMO\_IgG)**

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## PLM Laboratory Test Catalogue

### (MOG) Antibody

Referred Out: In-Common Laboratories

### Myeloma Screen, Serum & Plasma see Protein Electrophoresis, Serum

Division: Clinical Chemistry - Immunology

### Myositis Panel - 20 Antibodies or Comprehensive Myositis Panel - 21 Antibodies, Serum

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

Referred Out: In-Common Laboratories

Instructions: Aliquot at least 1.0 mL of serum (3.0 mL preferred). **Freeze** aliquot.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Room temperature 8 hours; refrigerated 14 days and frozen 30 days.

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

LIS Mnemonic: MYOAP (Myositis Panel - 20 Antibodies)  
CMYOPS (Comprehensive Myositis Panel - 21 Antibodies)  
The Comprehensive Myositis Panel (21 Antibodies) includes Anti-HMGCR in addition to the Myositis Panel (20 Antibodies).  
"Comprehensive" or "HMGCR" must be indicated on the requisition for Anti-HMGCR to be included.

### Mysoline see Primidone Level

Referred Out: In-Common Laboratories

### N-Acetylprocainamide see Procainamide/NAPA Level

Referred Out: In-Common Laboratories

### N-Methylhistamine, 24-Hour Urine

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

Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection.  
Record Total Volume on both the aliquot and the requisition.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHIS 24U

## PLM Laboratory Test Catalogue

### N-Methylhistamine, Random Urine

Tube/Specimen: Random collection using a mid-stream technique to eliminate bacterial contamination.

Referred Out: In-Common Laboratories

Instructions: Specimen required: 5 mL urine aliquot of well-mixed collection.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Room temperature for 14 days, refrigerated or frozen for 28 days.

LIS Mnemonic: NMHIS RU

### Na+ see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

### NAAT testing for Microbiology Donor Transplant

Tube/Specimen: **Two** 4.0 mL Lavender EDTA (BD#367861)

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<sup>th</sup> floor Microbiology for processing. Send copy of requisition.

LIS Mnemonic: NAAT

### NABS see Interferon beta Neutralizing Antibodies

Referred Out: In-Common Laboratories

### Neonatal Alloimmune Thrombocytopenia

Tube/Specimen: **From Mother and Father:** Six 6.0 mL Yellow ACD glass (BD#364816) or **twelve** 2.7 mL Light Blue buffered sodium citrate (BD#363083) **and two** 6.0 mL Plain Red Top, no gel separator (BD#367815)  
**From Baby:** One (2.0 mL) lavender topped EDTA tube.  
**Note:** Store and ship at room temperature. Completed McMaster patient requisition must accompany sample.  
<https://transfusionresearch.healthsci.mcmaster.ca/wp-content/uploads/2025/11/Patient-Requisition-Form-v2025-11.docx>

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: Miscellaneous Hematology Referred Out

### Neoral see Cyclosporine

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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: NMOG CSF

**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: NMOG

**Neurontin** **see Gabapentin Level**

Referred Out: In-Common Laboratories

**Neutrophil Oxidative Burst** **see Dihydrohodamine (DHR)**

Referred Out: Mayo Medical Laboratories

**Next Generation Sequencing – Myeloid Panel**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 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

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important to know the white blood cell count prior to extracting the DNA.  
If multiple Molecular Diagnostics tests are ordered, only 2 tubes of peripheral blood or 1 tube of bone marrow are necessary.

Alternate Names: ABL Kinase domain mutation  
BCR-ABL Mutation  
CALR  
JAK2 exon 12  
KIT Asp816Val  
MPL  
MPL exon 10 mutation  
Mutation Analysis of BCR-abl transcripts  
MYD88  
NGS  
QBCRA-Mutation Analysis  
TP53 mutation

LIS Mnemonic: NGSAML  
NGSCLL DNA  
NGSCMLR DNA  
NGS CMMML DNA  
NGSHCL  
NGSLymph  
NGSMCL  
NGSMast  
NGSMDS  
NGSMPN  
NGS VEXAS (UBA1)

### Next Generation Sequencing - Solid Tumor Panel

Tube/Specimen: Tissue in paraffin block.  
Requisition: CD2573  
Division: Molecular Diagnostics  
Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.  
Alternate Names: BRAF  
KRAS  
Lung Molecular Panel

**NGS** **see Next Generation Sequencing-Myeloid Panel**

Division: Molecular Diagnostics

**Niacin** **see Vitamin B3**

Referred Out: In-Common Laboratories

**Nicotinic Acetylcholine Receptor Antibody** **see Acetylcholine Receptor Antibodies**

Referred Out: In-Common Laboratories

## PLM Laboratory Test Catalogue

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### NMDA (NR1) Receptor Antibody, 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: NMDA  
NMDA CSF

---

### Noradrenaline see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

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### Nordoxepin see Doxepin Level

Referred Out: In-Common Laboratories

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### Norepinephrine see Catecholamines, Total Plasma

Referred Out: In-Common Laboratories

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### Norepinephrine, Urine see Catecholamines, 24 Hour Urine

Division: In-Common Laboratories

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### 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: RAN

---

### Nortriptyline see Amitriptyline

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Referred Out: In-Common Laboratories

### NT-ProBNP

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002A or CD0002B

Division: Clinical Chemistry - Core

Instructions: Centrifuge at room temperature within 2 hours after collection.  
Shipping from other zones: Serum; aliquot 2.0 mL into a plastic vial. Store and send at -20°C

Stability: 6 days at 2 to 8°C; 1 year at -20°C

Comments: The test will be canceled if a repeat request is made within 6 months of previous, unless for specific clinical reasons, "Do not cancel NT-ProBNP (or BNP)" is written on the requisition form.

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

LIS Mnemonic: BNP  
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 hemocult card

Comments: Specimen is smeared on hemocult 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. However, specimens collected within 3 weeks with no intervention are acceptable.  
**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.

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## PLM Laboratory Test Catalogue

Send copy of requisition.

LIS Mnemonic: OLBAN CS

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### Organic Acid Analysis, Urine

Tube/Specimen: 10.0 mL random urine. Collection should be a “clean catch” technique to minimize bacterial contamination.

Referred Out: IWK Metabolic Lab

Instructions: **Freeze.**  
Timed specimens are accepted (8-hour, 12-hour or 24-hour collections)  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals; send directly to the IWK Metabolic Lab

LIS Mnemonic: ORGAT RU

---

### 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 ST

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### Osmolality, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: OSMO

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### Osmolality, Random or 24-Hour Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

Stability: Room temperature for 3 hours, 2 to 8°C (preferred) for 7 days and frozen for 2 weeks.

LIS Mnemonic: U OSMO  
U24 OSMO

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### Osteocalcin

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## PLM Laboratory Test Catalogue

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

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature within 4 hours of collection.  
Aliquot at least 1.0 mL serum and **freeze**.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Ambient 8 hours, refrigerated 3 days, frozen 3 months.

LIS Mnemonic: OSTEO

---

### Ovarian Cancer Antigen see CA125

Division: Clinical Chemistry - Core

---

### Oxalate, 24-Hour Urine

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

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Specimen required: 4 mL urine aliquot of pH adjusted and well-mixed collection.  
Record Total Volume of the 24-hour urine on both the specimen aliquot and requisition.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Patients should refrain from taking excessive amounts of Vitamin C or from consuming Vitamin C rich food for at least 48 hours prior to urine collection.  
Refer to Appendix A for pH adjustment instructions.  
Random Oxalate specimens require a pH <8.0.

Stability: Room temperature for 1 hour, 2 to 8°C (preferred) for 7 days (pH<3.0) and frozen for 2 weeks (pH<3.0).

LIS Mnemonic: U24 OXA  
U OXA R [IWK specimens only]

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### Oxygen Content see Blood Gases

Division: Clinical Chemistry - Core

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### Oxygen Saturation see Blood Gases

Division: Clinical Chemistry - Core

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### Pancreatic Cyst Fluid for Amylase and CEA see Amylase and CEA, Pancreatic Cyst Fluid and CEA and Amylase, Pancreatic Cyst Fluid

Division: Clinical Chemistry - Core

### Pancreatic Polypeptide

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861).  
Patient must be fasting 8 hours prior to collection unless instructed otherwise by the ordering physician.

Referred Out: In-Common Laboratories

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

Stability: Room temperature 5 days, refrigerated at 2 to 8 °C for 7 days and frozen 1 year.

LIS Mnemonic: HPP

---

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

Tube/Specimen: Minimum 2.0 mL CSF

Referred Out: In-Common Laboratories

Instructions: Aliquot at least 2.0 mL CSF into plastic vial. **Freeze at once.**  
Do not accession or refer for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

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

LIS Mnemonic: PNPA CSF

---

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

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

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: PNPA SP

---

### Parasite Identification

Tube/Specimen: Organism for identification

Referred Out: Nova Scotia Museum of Natural History

Instructions: Shipped as Category B.

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### Parasite Screening

Tube/Specimen: Stool collected in SAF fixative

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## PLM Laboratory Test Catalogue

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

LIS Mnemonic: PARSCRN (EIA screen)  
PAR (if any of the information above is indicated)

### Parathyroid Hormone Intact

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841). This tube is not to be shared.

Requisition: CD0002

Division: Clinical Chemistry – Core

Instructions: The tube collected for this assay cannot be shared for other assays. Overnight fasting (8 hours) is preferred. Please indicate fasting status.

Shipping: Plasma can be stored for 48 hours at 2 to 8°C. Freeze and send frozen plasma, if longer.

Alternate Names: Intact PTH  
PTH Intact

LIS Mnemonic: PTH

### Parathyroid Hormone Related Peptide      see PTH Related Peptide Parathyroid Hormone Related Protein

Referred Out: In-Common Laboratories

### Paroxetine Level

**Note:** Paroxetine Level testing is no longer offered in Nova Scotia Health Central Zone Laboratories.

### Paroxysmal Nocturnal Hemoglobinuria

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0002C

Division: Hematopathology – Flow Cytometry

Instructions: Specimen must arrive in Flow Cytometry within 24 hours of collection and no later than 14:00 on Fridays (or day before Holiday). The requisition must accompany the specimen to the Flow laboratory.

Note: Please notify Flow Cytometry lab at 902-473-5549 when requesting this test.

## PLM Laboratory Test Catalogue

Alternate Names: PNH  
CD55/59 Testing

LIS Mnemonic: Path Flow PNH Request (Pathology Flow Cytometry PNH Request)

### 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: PARV IGG (IgG Immunity)  
PARV IGM (IgM Diagnosis)

### Parvovirus PCR

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

Shipping: Whole blood must be transported at 2 to 25 °C and received by Central Zone within 24 hours.  
Separated plasma is no longer acceptable.

LIS Mnemonic: PARVPCR

### Paxil see Paroxetine Level

Referred Out: In-Common Laboratories

### PBG, Random Urine 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: PCPPCR

---

### Peripheral Smear

Division: Hematopathology - Microscopy  
Comments: Can be done with Profile

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### 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 Processing Area immediately.  
Indicate fluid type on requisition.  
Shipping: Specimen must be kept cold but not frozen.  
LIS Mnemonic: BF PH

---

### pH, Urine

see Urinalysis (including microscopic examination if required)

Division: Clinical Chemistry - Core  
Comments: Urine pH is available by dipstick analysis as part of routine urinalysis.

---

### Phenobarbital

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)  
Requisition: CD0002  
Division: Clinical Chemistry - Core

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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 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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Blood should be collected just prior to next dose (trough collection).  
Specimens should not be collected until the blood concentration is at a steady state (3-4 half-lives).

Alternate Names: Dilantin

LIS Mnemonic: PHENY

### Phenytoin, Free

(Do Not Confuse with Phenytoin)

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815). Physician's order MUST state "Free" or "HPLC".

Referred Out: In-Common Laboratories

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

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

LIS Mnemonic: FPHENY

### Philadelphia Chromosome

see BCR/abl Translocation (RT PCR)

Division: Molecular Diagnostics

### Phosphatase, Alkaline

see Alkaline Phosphatase, Plasma

Division: Clinical Chemistry - Core

### Phosphate

see Phosphorous, Plasma

Division: Clinical Chemistry - Core

### Phosphorous Inorganic

see Phosphorous, Plasma

Division: Clinical Chemistry - Core

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**Phosphorous, Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
 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 Genotype

Referred Out: In-Common Laboratories

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**Pituitary Gonadotropins**

see LH

Division: Clinical Chemistry - Core

---

**Plasma Hemoglobin**

Tube/Specimen: 6.0 mL Green lithium heparin, no gel separator (BD#367886)  
 Requisition: CD0002  
 Division: Hematopathology - Core

## PLM Laboratory Test Catalogue

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: 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common 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: Plasminogen

---

### Plasminogen Activator Inhibitor

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083). 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 buffered sodium citrate (BD#363083). Collection must follow a non-additive tube.

Requisition: CD0002

Division: Hematopathology – Coagulation

Instructions: Prior arrangements for analysis must be made with Esoteric Advanced Coagulation Lab phone 902-473-4059 by an approved Hematologist. Blood is taken under supervision of Advanced Coagulation Technologist. Completed patient questionnaire must accompany specimen (<http://ch-dtsldms01.cdha.nshealth.ca/p3lite/ViewDocument.aspx?ItemID=5971&IsItemID=false&ItemStatus=9>). Discern notification generates when PLT AGG is ordered advising collectors not to obtain samples until Advanced Coagulation Technologist is present

Stability: Keep specimens at room temperature.

LIS Mnemonic: PLT AGG

---

### Platelet Count

see Profile

Division: Hematopathology - Core

---

### Platelet Function Assay

Tube/Specimen: **Three** 2.7 mL Light Blue buffered sodium citrate (BD#363083). Collection must follow a non-additive tube. Collect a 4.0 mL Lavender EDTA (BD#367861) and order a CBC. Keep specimens at room temperature.

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## PLM Laboratory Test Catalogue

Division: Hematopathology - Coagulation

Instructions: Specimens must be received within three (3) hours of collection. Traumatic draws should be avoided.  
Test is available Monday to Friday until 1600 hours.

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 Lavender EDTA (BD#367861)  
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.  
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.  
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.  
RNA: Stability – 3 months frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Alternate Names: RAR alpha  
Retinoic acid receptor  
Translocation (15; 17)  
t (15;17)

LIS Mnemonic: PML-RAR RNA

---

### 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: PNEUMO

---

### Pneumococcal Typing (Blood, CSF, Sterile site isolates)

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## PLM Laboratory Test Catalogue

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** **see Paraneoplastic Antibodies, Serum and Paraneoplastic Antibodies, CSF**  
**PNP Antibodies, CSF**

Referred Out: In-Common Laboratories

**PO4** **see Phosphorus, Plasma**

Division: Clinical Chemistry - Core

**Polycythemia Vera** **see Jak2 gene mutation**

Division: Molecular Diagnostics

**Polyoma PCR**

Tube/Specimen: One 4.0 mL Lavender EDTA (BD#367861)  
 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: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886) wrapped in foil to **protect from light and** a 4.0 mL Lavender EDTA (BD#367861).  
 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.

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## PLM Laboratory Test Catalogue

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

LIS Mnemonic: PBGD

### Porphyryns, Blood

see Porphyryn Screen, Plasma

Referred Out: In-Common Laboratories

### Porphyryn 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: PBG RU  
PBG 24U

### Porphyryn 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

### Porphyryn Screen, Plasma

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861). **Wrap in foil to protect from light!**

Referred Out: In-Common Laboratories

## PLM Laboratory Test Catalogue

Instructions: Centrifuge at room temperature and aliquot 2.0 mL plasma. Protect from light and **freeze immediately**. Avoid hemolysis.  
Store and send frozen.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Frozen: 2 months

LIS Mnemonic: MS 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: PORPHS F

### Post-BMT

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

### Post-BMT recipient

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

### Post Transfusion Purpura

Tube/Specimen: **Six** 6.0 mL Yellow ACD glass (BD#364816) **or twelve** 2.7 mL Light Blue buffered sodium citrate (BD#363083) **and one** (10.0 mL) Red topped tube.

Referred Out: McMaster University HSC

Instructions: Send to Hematopathology Coagulation lab for processing.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Store and ship at room temperature. Completed McMaster patient requisition must accompany sample.  
<https://transfusionresearch.healthsci.mcmaster.ca/wp-content/uploads/2025/11/Patient-Requisition-Form-v2025-11.docx>

### 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

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## PLM Laboratory Test Catalogue

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### Potassium, Plasma

see Electrolytes (Na, K), Plasma

Division: Clinical Chemistry - Core

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### 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  
U K

---

### 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

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### Prealbumin, Serum

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

Requisition: CD0002

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## PLM Laboratory Test Catalogue

Division: Clinical Chemistry - Core

LIS Mnemonic: PREALB

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### Pre-BMT donor

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

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### 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

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### Prekallikrein

see Fletcher Factor

Referred Out: Hamilton General Hospital

---

### Prenatal Testing Collection

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

Referred Out: IWK

Instructions: **Send directly to IWK** refrigerated. Do not send to Referred-out and Research bench.

Alternate Names: Maternal Antibodies, or Prenatal Screen

LIS Mnemonic: Type and Screen Maternal

---

### Primidone Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.

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## PLM Laboratory Test Catalogue

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

LIS Mnemonic: PROCA

---

### Profile, AutoDiff

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)  
Requisition: CD0002  
Division: Hematopathology - Core  
Comments: Testing includes automated differential, WBC count, hematocrit (HCT), hemoglobin (HB), platelet count, and RBC count.  
Note: Differentials are automatically performed on every profile. If there are concerns then a manual differential will be performed.  
LIS Mnemonic: CBC  
CBC Auto Diff  
CBC WAM  
Profile Auto Diff  
Profile, P

---

### Profile, AutoDiff with Citrate for Platelet

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) **and** 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw.  
Requisition: CD0002 – write ‘Citrate for Platelet’ under ‘Other tests’  
Division: Hematopathology – Core  
Instructions: DO NOT CENTRIFUGE  
Comments: Testing includes automated differential, WBC count, RBC count, hematocrit (HCT), hemoglobin (HB), and platelet count (result from Citrate, if needed).  
Note: CBC with AutoDiff testing is completed on EDTA specimen. If platelet clumping is present, the platelet count will be enumerated from the Citrate specimen.  
LIS Mnemonic: CITRATE

---

### Profile, Manual Differential

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
Requisition: CD0002  
Division: Hematopathology – Microscopy  
Comments: Testing includes CBC.  
LIS Mnemonic: PM

---

### Profile, No Diff


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## PLM Laboratory Test Catalogue

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

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 longer.  
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: PROIN

---

### 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.

LIS Mnemonic: PROL

---

### Prostatic Specific Antigen

see PSA

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Division: Clinical Chemistry - Core

---

### Protein C Activity

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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).

LIS Mnemonic: PROT C

---

### Protein Electrophoresis, Serum

Tube/Specimen: a) Nova Scotia Health Central Zone collection: 4.0 mL Gold SST (BD#367977) & 3.5 mL Light Green lithium heparin (BD#367961)  
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: 2.7 mL Light Blue buffered sodium citrate (BD#363083), 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).

LIS Mnemonic: PROT S

---

### 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

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## PLM Laboratory Test Catalogue

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

### Protein Total, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

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 Lavender EDTA (BD#367861) - 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.

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## PLM Laboratory Test Catalogue

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: PT mut DNA

---

### Prothrombin Time

see INR (PT)

Division: Hematopathology - Core

---

### Protoporphyrin, Erythrocyte/Free (Do Not Confuse with Zinc Protoporphyrins)

Tube/Specimen: **Two** 4.0 mL Lavender EDTA (BD#367861). **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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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 EDTA (BD#367861)

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: HIVPRO

## PLM Laboratory Test Catalogue

### Prozac

see Fluoxetine Level

Referred Out: In-Common Laboratories

---

### PSA

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: 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

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

## PLM Laboratory Test Catalogue

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw  
Requisition: CD0002  
Division: Hematopathology - Coagulation  
Instructions: This test is done only when the INR (PT) is abnormal.  
LIS Mnemonic: PT50

---

### PTH Intact

see Parathyroid Hormone Intact

Division: Clinical Chemistry - Core

---

### PTH Related Peptide

Tube/Specimen: 6.0 mL Dark green sodium heparin (BD#367878). Lithium Heparin tubes are **NOT** acceptable.  
Referred Out: In-Common Laboratories  
Instructions: Centrifuge at room temperature.  
Aliquot 1.0 mL plasma into plastic vial and **freeze at once**.  
Record primary tube type (i.e. Sodium Heparin) on the aliquot label.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.  
Stability: Room temperature and refrigerated – 7 days; frozen – 28 days.  
LIS Mnemonic: PTHRP

---


### PTP Antibody Testing

see Post Transfusion Purpura

Referred Out: McMaster University HSC

---

### PTT

Tube/Specimen:  1.8 mL Light Blue buffered sodium citrate (BD#363080). 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  
aPTT  
LIS Mnemonic: PTT

---

### PTT 50% Mix

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw

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## PLM Laboratory Test Catalogue

Requisition: CD0002  
Division: Hematopathology - Coagulation  
Instructions: This test is done only when the PTT is abnormal.  
LIS Mnemonic: PTT50

---

### PTT Dade

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw  
Requisition: CD0002  
Division: Hematopathology - Coagulation  
Referrals: Send 2 frozen aliquots of 1.0 mL platelet-poor plasma (see Coagulation Testing under Specimen Collection Information) in polypropylene vials (12x75).  
Alternate Names: DADE  
LIS Mnemonic: PTT DADE

---

### Pyridoxal Phosphate see Vitamin B6 Level Pyridoxic Acid Pyridoxine

Referred Out: In-Common Laboratories

---

### Pyruvate (Do Not Confuse with Pyruvate Kinase)

Tube/Specimen: **Collectors MUST call Clinical Chemistry (VG 473-4340; HI 473-4843) for instructions prior to collection.**  
Specimens must be collected at QEII and received at either the HI Stat Lab or VG Core Lab **within 30 minutes of collection.**  
6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886) 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

Tube/Specimen: 6.0 mL Yellow ACD glass (BD#364816). **Keep refrigerated!**  
Referred Out: Mayo Medical Laboratories

## PLM Laboratory Test Catalogue

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: PKEA WB

### Q-Fever

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

Requisition: CD0002A/CD0002B

Division: Microbiology-Immunology

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

Alternate Names: Coxiella Burnetii

LIS Mnemonic: QFEVER

### 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

Division: Molecular Diagnostics

### Quinidine Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Referred Out: Mayo Medical Laboratories

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

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.  
 LIS Mnemonic: RABIES

**Rapamycin** **see Sirolimus**

Division: Clinical Chemistry - Toxicology

**RAR alpha** **see PML-RAR gene fusion**

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: Order individual tests

**RBC Folate** **see Folate, Red Cell**

Referred Out: In-Common Laboratories

**Reagin Screen Test** **see Syphilis Serology**

Division: Virology-Immunology

**Red Blood Cell Folate** **see Folate, Red Cell**

Referred Out: In-Common Laboratories

---

### Red Cell Count

see Profile

Division: Hematopathology – Core

---

### Red Cell Folate

see Folate, Red Cell

Referred Out: In-Common Laboratories

---

### Red Cell Survival

Division: Molecular Diagnostics

Comments: This determination is done by Nuclear Medicine. Phone 902-473-7510 to make arrangements.

---

### Reducing Substances, Stool

Tube/Specimen: 3g of random, loose stool.

Referred Out: Mayo Medical Laboratories

Instructions: **Freeze immediately!**  
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 not acceptable.

Stability: Frozen – 7 days

LIS Mnemonic: UREDF

---

### Reptilase Time

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083)

Referred Out: In-Common Laboratories

Instructions: Send to Hematopathology Coagulation lab for processing.

LIS Mnemonic: Reptilase Time

---

### Reticulocyte Count

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

Requisition: CD0002

Division: Hematopathology - Core

Comments: Profile must be ordered with test.

---

### Retinoic Acid Receptor

see PML-RAR gene fusion

## PLM Laboratory Test Catalogue

Division: Molecular Diagnostics

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### **Retinoic Acid Receptor Alpha** see PML – RAR gene fusion

Division: Molecular Diagnostics

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### **Retinol** see Vitamin A

Referred Out: In-Common Laboratories

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### **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  
Send copy of requisition.

Stability: Frozen - 28 days; room temperature/refrigerated - 7 days.

LIS Mnemonic: REVT3

---

### **RF Quantitative** see Rheumatoid Factor, Quantitative

Division: Clinical Chemistry - Core

---

### **Rheumatoid Factor, Quantitative**

Tube/Specimen: 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**

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

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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: RICK

---

**Rivotril** **see Clonazepam**

Referred Out: In-Common Laboratories

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**RNP** **see Anti-Nuclear Antibody (ANA)**

Division: Immunopathology

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**RO** **see Anti-Nuclear Antibody (ANA)**

Division: Immunopathology

---

**ROSI 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.

---

**Rotavirus PCR**

Tube/Specimen: Stool collected in dry sterile container  
Requisition: CD0432/CD0433  
Division: Virology-Immunology  
Comments: Assay tests for Norovirus and Adenovirus as well.  
Shipping: Specimens are stable at 2 to 8°C for 3 days. If longer freeze and ship frozen.  
LIS Mnemonic: RAN

---

**Routine typing of Haemophilus influenzae  
(From sterile sites or questionable outbreaks)**

Tube/Specimen: Isolate, typing  
Referred Out: IWK

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## PLM Laboratory Test Catalogue

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)

Requisition: CD0002A/ CD0002B

Division: Virology-Immunology

Note: Indicate on requisition whether immune status (IgG) or recent infection (IgM) is required.

LIS Mnemonic: RUB IGG (IgG)  
RUB IGM (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: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Core

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## PLM Laboratory Test Catalogue

LIS Mnemonic: SAL

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### **Sandimmune IV** **see Cyclosporine**

Division: Clinical Chemistry - Toxicology

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### **SARS-CoV-2 PCR**

Tube/Specimen: Nasopharyngeal swab in viral transport media, nose/throat Aptima Multitest swab, throat gargle, bronchial wash, nasopharyngeal aspirate, endotracheal aspirate, sputum, lung tissue, pleural fluid.

Requisition: CD0432/CD0433

Division: Virology-Immunology

Shipping: Swabs are stable at 2 to 8°C for 4 days. Gargle specimens are stable at 2 to 30°C for 2 days. Bronchial wash and sputum specimens are stable at 2 to 8°C for 3 days.

LIS Mnemonic: NCOV (routine request)  
E NCOVST (stat request)

---

### **Schillings Test**

Division: Molecular Diagnostics

Comments: Patient is sent to Nuclear Medicine 3rd Floor, ACC Building.

---

### **Schistosomiasis-IFA**

Tube/Specimen: 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: SCHISTO

---

### **SCL-70** **see Anti-Nuclear Antibody (ANA)**

Division: Immunopathology

---

### **Sedimentation Rate** **see ESR**

Division: Hematopathology - Core

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### **Selenium Level**

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## PLM Laboratory Test Catalogue

Tube/Specimen: Royal Blue topped Trace Element K2 EDTA (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: SELES

### 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!**  
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: SERO

### 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: SERO 24U

### Serum Folate

see Folate Serum

Division: Clinical Chemistry - Core

---

**Sex Hormone Binding Globulin**

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 8 days at 2 to 8°C. Freeze and send frozen serum, if longer.  
 LIS Mnemonic: SHBG LEVEL

---

**Sezary Cells**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 Requisition: CD0002  
 Division: Hematopathology – Microscopy  
 Comments: Analysis must include a CBC, Auto Differential, and Manual Differential.

---

**SGOT, Plasma**

**see Aspartate Aminotransferase (AST), Plasma**

Division: Clinical Chemistry - Core

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**SGPT, Plasma**

**see Alanine Aminotransferase (ALT), Plasma**

Division: Clinical Chemistry - Core

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**SHM**

**see IGHV Somatic Hypermutation**

Division: Molecular Diagnostics

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**Short Tandem Repeats (STR)**

**see Chimerism Analysis for BMT**

Division: Molecular Diagnostics

---

**Sickle Cell Screen**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
 Requisition: CD0002  
 Division: Hematopathology – Core  
 Shipping: Transport at room temperature is acceptable. If shipping is delayed more than 24 hours post collection, store and ship the specimen between 2 - 8 °C  
 LIS Mnemonic: SICKLE

## PLM Laboratory Test Catalogue

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### Sinequan

see Doxepin Level

Referred Out: In-Common Laboratories

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### Sirolimus

Tube/Specimen:  2.0 mL Lavender EDTA (BD#367841)

Requisition: CD0002

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.

Shipping: Specimens can be stored at 2 to 8°C for 24 hours; if over 24 hours, mix whole blood, transfer to a plastic tube, freeze and send frozen whole blood on dry ice.

Alternate Names: Rapamycin

LIS Mnemonic: SIRO

---

### SM

see Autoantibodies Panel

Division: Immunopathology

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### 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

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### Sodium, Stool

see Fecal Electrolytes

Referred Out: In-Common Laboratories

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### Sodium, Random Urine or 24-Hour Urine

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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  
U NA

### Somatic BRCA mutation in ovarian tumor

Tube/Specimen: Tissue in paraffin block

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

Instructions: To be ordered only by a Nova Scotia Health Central Zone pathologist.

Alternate names: BRCA 1/2 in ovarian cancer

### Somatic hypermutation

see IGHV Somatic Hypermutation

Division: Molecular Diagnostics

### Somatomedin-C

see Insulin Like Growth Factor-1

Division: Clinical Chemistry - Core

### Specific Gravity, Fluid

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF SG

### Specific Gravity, Random Urine

see Urinalysis (including microscopic examination if required)

Division: Clinical Chemistry – Core

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

## PLM Laboratory Test Catalogue

**Spinal Fluid** see specific test for instructions.

Division: Hematopathology - Core

**Spinal Fluid 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

Division: Clinical Chemistry - Core

**Stem Cell Enumeration – Peripheral Blood, Apheresis Product and BM Harvest**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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 Peripheral Blood, Pre Harvest  
 Apheresis Product – CD34 Harvest

**Stone** see Calculus Analysis

Referred Out: In-Common Laboratories

**Stool Chloride** see Fecal Chloride

Referred Out: In-Common Laboratories

**Stool Electrolytes** see Fecal Electrolytes

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Referred Out: In-Common Laboratories

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**Stool Fat** **see Fat, Fecal**

Referred Out: In-Common Laboratories

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**Stool for Calprotectin** **see Calprotectin, Fecal**

Referred Out: In-Common Laboratories

---

**STR** **see Chimerism Analysis for BMT**

Division: Molecular Diagnostics

---

**Streptococcus, Group B**

Tube/Specimen: Vaginal or rectal swabs for culture

Referred Out: IWK

Instructions: Shipped as Biological Substance Category B.

---

**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.

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

LIS Mnemonic: 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.

Stability: Room temperature for 72 hours, refrigerated for 14 days (preferred), frozen for 180 days.

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## PLM Laboratory Test Catalogue

LIS Mnemonic: FSLFU

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### Surmontil see Trimipramine Level

Referred Out: In-Common Laboratories

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### Synovial Analysis

Tube/Specimen: Synovial Fluid

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, 1<sup>st</sup> floor Mackenzie Building.  
Should be processed within 4 hours of collection.

Alternate Names: Joint Fluid

LIS Mnemonic: SF CT  
SF CRY  
ED SYNOVIAL [Emergency department careset]

---

### Syphilis 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: SYMPX

---

### Syphilis Serology

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

Requisition: CD0002A/CD0002B

Division: Virology-Immunology

Alternate Names: RPR  
MHA – TP  
RST  
Reagin Screen Test  
VDRL  
TPPA

LIS Mnemonic: SYPH SCR

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**t(11:14)** **see BCL1-IGH gene fusion**

Division: Molecular Diagnostics

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**t(14:18)** **see BCL2-IGH gene fusion**

Division: Molecular Diagnostics

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**T(15:17)** **see PML-RAR gene fusion**

Division: Molecular Diagnostics

---

**t(2:5)** **see ALK-NPM gene fusion**

Division: Molecular Diagnostics

---

**t(4:11)** **see AF4-MLL gene fusion**

Division: Molecular Diagnostics

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**t(8:21)** **see AML1-ETO gene fusion**

Division: Molecular Diagnostics

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### T3, 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 6 days at 2 to 8°C. Freeze and send frozen serum, if longer

Alternate Names: Free Triiodothyronine

LIS Mnemonic: FT3  
T3 FREE

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**T4, Free** **see Thyroxine, Free**

Division: Clinical Chemistry - Core

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**T790M** **see Circulating Tumor DNA**

Division: Molecular Diagnostics

## PLM Laboratory Test Catalogue

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**TAB (MA)** **see Anti-Thyroid Peroxidase Antibodies**

Division: Clinical Chemistry - Core

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**TAB (TA)** **see Anti-Thyroglobulin Antibodies**

Division: Clinical Chemistry - Core

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**Tacro** **see FK 506**

Division: Clinical Chemistry - Toxicology

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**Tacrolimus** **see FK 506**

Division: Clinical Chemistry - Toxicology

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**Taeniasis**

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**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

Requisition: CD0002C

Division: Hematopathology - Flow Cytometry

Instructions: This test is offered Monday to Friday except Holidays. Blood must arrive in the Flow Cytometry laboratory within 48 hours of collection and 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

LIS Mnemonic: T CELL SUB

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**T-cell Gene Rearrangement** **see T-cell lymphoid clonality**

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Division: Molecular Diagnostics

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### T-cell lymphoid clonality

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
Peripheral blood: Preferably 2 tubes, minimum volume 1 mL. Stability – 14 days at 4°C.  
Bone marrow: 1 tube, minimum volume 1 mL. Stability – 14 days at 4°C.  
Tissue: Send in saline at 4°C, or frozen on dry ice. Stability – 12 hours in saline at 4°C, or 7 days frozen.  
Alternatively, send fixed tissue in paraffin block.  
DNA: Stability – 3 months at 4°C or frozen.

Requisition: CD0046 or CD2573

Division: Molecular Diagnostics

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

Alternate Names: T-cell gene rearrangement  
TCR beta chain  
Lymphoma protocol

LIS Mnemonic: T-cell DNA

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### TCR beta chain

see T-cell lymphoid clonality

Division: Molecular Diagnostics

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### TCR Gene Rearrangement

see IgG/TCR Gene Rearrangement Study

Division: Molecular Diagnostics

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### Tegretol

see Carbamazepine

Division: Clinical Chemistry - Core

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### Tegretol Epoxide

see Carbamazepine-10, 11 Epoxide

Referred Out: In-Common Laboratories

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### Testosterone

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: TESTOS

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### 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.  
Note: This test will be referred out by the laboratory.  
LIS Mnemonic: TET

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### Thalassemia see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

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### Thalassemia Screen see Hemoglobin Electrophoresis

Division: Hematopathology - Immunology

---

### Thallium, Random Urine or 24-Hour Urine

Tube/Specimen: Random collection (preferred) using a mid-stream technique to eliminate bacterial contamination in a plain container or 24-hour urine collection in a plain container.  
Referred Out: In-Common Laboratories  
Instructions: Specimen required: 15 mL urine aliquot from well-mixed collection.  
Record Total Volume of 24-hour urine on both the aliquot and the requisition.  
Record the 'Original Container Type' on the requisition as Plain, Acid or Sodium Carbonate.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.  
Stability: Room temperature for 1 day, 2 to 8°C (preferred) for 3 months and frozen for 1 year.  
LIS Mnemonic: THAL 24U  
THAL RU

---

### Thallium, Whole Blood

Tube/Specimen: Royal Blue Trace Element K2 EDTA (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: THAL WB

---

### Theophylline

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Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)  
 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: 4.0 mL Lavender EDTA (BD#367861). **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: Room temperature 8 hours, refrigerated 48 hours, frozen 30 days  
 LIS Mnemonic: Thiam

### Thiamine Whole Blood (Vitamin B1)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861) collected after 12 to 14 hour fast. **Wrap in tinfoil within 1 hour of collection to protect from light.**  
 Referred Out: In-Common Laboratories  
 Instructions: **Freeze whole blood!**  
 Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
 For deficiency testing  
 Send copy of requisition.  
 Stability: Frozen 28 days. Unsuitable if thawed.  
 LIS Mnemonic: VITB1 WB

### Thiocyanate Level (Do not confuse with Cyanide)

Tube/Specimen: 4.0 mL Gold SST (BD#367977)  
 Referred Out: In-Common Laboratories

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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)

Blood Collection: **Collect MONDAY ONLY!!**  
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  
**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: 6.0 mL Lavender EDTA (BD#367863)

Referred Out: In-Common Laboratories

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

Stability: Room temperature for 24 hours, refrigerated for 7 days.

LIS Mnemonic: MS 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  
**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 EDTA (BD#367861)

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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: TPMT GTY

### 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 EDTA (BD#367861) (6.0 mL Lavender EDTA (BD#367863) is acceptable.)

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.  
TPMT phenotyping (enzyme activity) must be measured prior to RBC transfusion to avoid false indication.  
TPMT phenotyping (enzyme activity) should be ordered prior to starting a thiopurine drug or discontinuing the drug at least 48 hours.  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

LIS Mnemonic: TPMT PTY

### Thioridazine Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)


Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature  
Aliquot at least 3.0 mL serum into plastic transfer vial. **Freeze at once.**  
Send copy of requisition.

LIS Mnemonic: Thioridaz

---

### Thrombin Time

Tube/Specimen:  1.8 mL Light Blue buffered sodium citrate (BD#363080). Must be a full draw.

Requisition: CD0002

Division: Hematopathology - Core

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

LIS Mnemonic: TT

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### Thrombocythemia see Jak2 gene mutation

Division: Molecular Diagnostics

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### 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: TPO

---

### Thrombotic Thrombocytopenia Purpura see Adams-13 Testing

Referred Out: London HSC-Victoria Hospital

---

### Thyrocalcitonin see Calcitonin

Division: Clinical Chemistry - Core

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### Thyroglobulin High Sensitivity

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

Requisition: CD0002

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.

## PLM Laboratory Test Catalogue

Shipping: Separate serum within 5 hours of collection. Prepare two aliquots.

Stability: Serum stable for 48 hours at room temperature and 72 hours at 2 to 8°C. Prepare two aliquots, freeze and send frozen serum, if longer.

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

### Thyroglobulin Antibodies see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

### Thyroid Antibodies see Anti-Thyroid Peroxidase Antibodies

Division: Clinical Chemistry - Core

### Thyroid Antibodies see Anti-Thyroglobulin Antibodies

Division: Clinical Chemistry - Core

### Thyroid Function Tests see TSH

Division: Clinical Chemistry - Core

### Thyroid 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 transfer vial and freeze.  
Indicate thyroid status of patient including presence of exophthalmos.  
Lipemic or hemolyzed specimens are not acceptable.  
Send copy of requisition.

Stability: Refrigerated 3 days, frozen 2 months

Alternate Names: Thyrotropin Binding Inhibitory Ig TBII  
Thyrotropin Receptor Antibody  
Long Acting Thyroid Stimulator LATS

LIS Mnemonic: TRAB

### Thyroid Stimulating Hormone see TSH

Division: Clinical Chemistry - Core

### Thyroid Stimulating Immunoglobulin (TSI)

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

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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: TSI

---

### Thyroxine Binding Globulin (TBG)

**(Do not confuse with Thyrotropin Binding Inhibitory Ig-TBII)**

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: TBG

---

### Thyroxine, 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 6 days at 2 to 8°C. Freeze and send frozen serum, if longer.

Alternate Names: T4 Free  
Free T4

LIS Mnemonic: FT4  
T4 FREE

---

### Tissue Transglutaminase

see Anti-Tissue Transglutaminase

Division: Immunopathology

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### Tobramycin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Tobramycin may be administered using 2 dosing strategies:  
If tobramycin is administered once daily (much larger than traditional doses) for patients who have good renal function and have no other exclusions, e.g. Endocarditis, dialysis, surgical prophylaxis, burns (>20%), only pre specimens are required. Take Pre (trough) blood specimen 6 hours before next dose is administered.  
If tobramycin is administered more often (q8 – 12 hours), both pre and post specimens are required. Take Post (peak) blood specimen 30

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minutes after completion of intravenous dose or 60 minutes after an intramuscular dose is administered. Take Pre (trough) blood specimen 30 minutes before next dose is administered.

The time specimen was collected (pre/post) should be indicated on the requisition and tubes.  
For information call the laboratory at 902-473-6886.

Alternate Names: Aminoglycoside Level

LIS Mnemonic: TOB PRE  
TOB POST  
TOB TNS

**Tofranil** **see Imipramine Level**

Referred Out: In-Common Laboratories

**Total Bilirubin** **see Bilirubin Total, Plasma**

Division: Clinical Chemistry - Core

**Total CO2, Plasma** **see Bicarbonate, plasma**

Division: Clinical Chemistry - Core

**Total Eosinophil Count** **see Eosinophil Count**

Division: Hematopathology - Core

**Total Iron Binding Capacity** **see Iron, Plasma**

Division: Clinical Chemistry - Core

**Total Protein, Plasma** **see Protein Total, Plasma**

Division: Clinical Chemistry - Core

**Total VDB** **see Bilirubin Total, Plasma**

Division: Clinical Chemistry - Core

### Toxocariasis IFA & IHA

Tube/Specimen: 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.

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LIS Mnemonic: TOXOC

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### 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: RMICRO

---

### 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: TOXOPCR

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### TP **see Protein Total, Plasma**

Division: Clinical Chemistry - Core

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### TP53 mutation **see Next Generation Sequencing – Myeloid Panel**

Division: Molecular Diagnostics

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## PLM Laboratory Test Catalogue

### TPMT Genotyping

see Thiopurine Methyltransferase: Genotype

Referred Out: In-Common Laboratories

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### TPMT Metabolite

see Thiopurine Metabolites

Referred Out: Mayo Medical Laboratories

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### TPMT Phenotyping

see Thiopurine Methyltransferase: Phenotyping

Referred Out: In-Common Laboratories

---

### TPPA

see Syphilis

Division: Virology-Immunology

---

### Trace Element 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 (11:14)

see BCL1-IGH gene fusion

Division: Molecular Diagnostics

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### Translocation (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

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## PLM Laboratory Test Catalogue

**Translocation (2:5)** **see ALK-NPM gene fusion**

Division: Molecular Diagnostics

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**Translocation (4:11)** **see AF4-MLL gene fusion**

Division: Molecular Diagnostics

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**Translocation (8:21)** **see AML1-ETO gene fusion**

Division: Molecular Diagnostics

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**Translocation (9:22)** **see BCR-ABL gene fusion**

Division: Molecular Diagnostics

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**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: TRICHI

---

**Tricyclic Screen (TCA)** **Physician must specify name of drug(s)**

---

**Triglycerides, Fluids**

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

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: BF TRIG

---

**Triglycerides, Plasma**

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry - Core

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

LIS Mnemonic: TRIG

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### Triiodothyronine, Free see T3, Free

Division: Clinical Chemistry - Core

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### Trimipramine Level

Tube/Specimen: Royal Blue topped Trace Element **SERUM** (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: TRIM

---

### Triptil see Protriptyline Level

Referred Out: In-Common Laboratories

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### Tropheryma Whipplei

Tube/Specimen: Whole blood: 4.0 mL Lavender EDTA (BD#367861) (2 mL) or bone marrow: 4.0 mL Lavender EDTA (BD#367861)  
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: TWHIPPCR

---

### Troponin T-HS (High Sensitivity), Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)

Requisition: CD0002

Division: Clinical Chemistry – Core

Note: A separate specimen tube is required for Troponin T-HS analysis.  
Failure to provide a separate specimen may prolong test turn-around time.

Shipping: Plasma stable for 72 hours at 2 to 8°C. Freeze and send frozen plasma, if longer.

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LIS Mnemonic: TROP T HS

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### **Trypanosoma** **see Hem Microorganism**

Division: Hematopathology-Microscopy

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### **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. TRYPANO

LIS Mnemonic: TRYPANO

---

### **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: TRYP

---

### **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

LIS Mnemonic: TSH

---

### **TSH Receptor Antibody** **see Thyroid Receptor Antibody**

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Referred Out: In-Common Laboratories

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**TSI** **see Thyroid Stimulating Immunoglobulin**

Referred Out: In-Common Laboratories

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**TTG** **see Anti-Tissue Transglutaminase**

Division: Immunopathology

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**TTP Assay** **see Adams-13 Testing**

Referred Out: London HSC-Victoria Hospital

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**Tularemia (*Francisella tularensis*)**

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: RMICRO

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**Tylenol** **see Acetaminophen**

Division: Clinical Chemistry - Core

---

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

Division: Transfusion Medicine

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

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

Requisition: CD0001\_05\_2019

Division: Transfusion Medicine

Instructions: Indicate on requisition date and time required, the planned procedure, transfusion, and pregnancy history. Send copy of patient's antibody card if patient has known antibodies.

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

Note: Inpatient Extended Type and Screen protocol testing valid for 21 days unless patient is transfused platelets/red cells then testing valid for 96 hours only.  
Pre-admission protocol Type and Screen testing valid for crossmatching until 2 days post of scheduled surgical date. NOTE: If date unknown

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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

Requisition: CD0002

Division: Clinical Chemistry - Core

LIS Mnemonic: DF UREA  
BF UREA

---

### Urea, Plasma

Tube/Specimen: 3.5 mL Light Green lithium heparin (BD#367961)  
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: 3.5 mL Light Green lithium heparin (BD#367961)  
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** 3.5 mL Light Green lithium heparin (BD#367961)  
The specimen must be promptly placed on ice and analyzed within 2 hours to prevent ex-vivo metabolism of uric acid by Rasburicase.  
Deliver to lab within 1 hour of collection to allow for preanalytical processing time.  
Requisition: CD0002  
Division: Clinical Chemistry - Core  
Comments: Rasburicase protocol for Uric Acid is for the determination of uric acid levels in patients treated with Rasburicase.

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A pre-chilled 3.5 mL Light Green lithium heparin (BD#367961) tube will be collected and promptly placed on ice. The iced specimen and its accompanying requisition will be sent to LCSC to be entered into LIS using the orderable: Uric Acid on Ice. The specimen will be spun in a refrigerated centrifuge; once centrifuged, the labeled tube will be placed back on ice and sent to appropriate laboratory for analysis.

LIS Mnemonic: URIC ACID ON ICE  
Uric Acid Rasburicase protocol

### Uric Acid, Urine see Urate, Urine

Division: Clinical Chemistry - Core

### Urinalysis (including microscopic examination if required)

Tube/Specimen: 10 to 50 mL random urine collected in sterile plastic screw top container

Requisition: CD0002

Division: Clinical Chemistry - Core

Comments: Urine will be initially examined only for color, clarity, and chemical analysis (by dipstick). Microscopic analysis will only be performed if urine is cloudy, turbid or if chemical analysis demonstrates an abnormality in color, blood, protein, leukocyte esterase or nitrite. Note that only microscopic elements that reach the threshold for reporting will be displayed. Deliver to Laboratory within 2 hours of collection. Keep at room temperature. Urinalysis will be cancelled on specimens that are >8 hours from collection time to the point of analysis.

LIS Mnemonic: UA (Cplt)

### Urinary Catecholamines see Catecholamines, 24 Hour Urine

Division: In-Common Laboratories

### Urinary Cross Links see C-Telopeptide (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

### Uroporphyrin, 24-Hour Urine see Porphyrin Screen, 24-Hour Urine

Referred Out: In-Common Laboratories

### V W F see VonWillebrand Workup

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Division: Hematopathology - Coagulation

### V W F Activity see VonWillebrand Workup

Division: Hematopathology - Coagulation

### V W F Antigen see VonWillebrand Workup

Division: Hematopathology - Coagulation

### Valproate

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

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

LIS Mnemonic: VAL

### Valproic Acid see Valproate

Division: Clinical Chemistry - Core

### Vancomycin Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815)

Requisition: CD0002

Division: Clinical Chemistry - Core

Instructions: Take Pre (trough) blood specimen immediately before dose is administered. Take Post (peak) blood specimen 2 hours after dose is administered. The time specimen was collected (pre/post) should be indicated on the requisition and tubes.

Comments: Post (peak) Vancomycin levels are only required in certain circumstances (e.g. changing renal function, poor response to therapy, resistant organism, and pharmacokinetic analysis).  
For information call the laboratory at 902-473-6886.

Alternate Names: Aminoglycoside Level

LIS Mnemonic: VAN PRE  
VAN POST  
VAN TNS

### Variable Number Tandem Repeats see Chimerism Analysis for BMT

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### (VNTR)

Division: Molecular Diagnostics

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#### 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: VZ IGG

---

#### 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: ME PANEL (CSF)  
EHSVZ (all other specimens)

---

#### Vascular Endothelial Growth Factor

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)

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

LIS Mnemonic: MISC REF

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#### Vasculitis Panel

##### (ANCA)

(Includes Anti-MPO, Anti-PR3, Anti-GBM)

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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: 4.0 mL Lavender EDTA (BD#367861). **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

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### VDRL

Tube/Specimen: CSF minimum 200 µL  
Requisition: CD0432/CD0433  
Division: Virology-Immunology  
Comments: For serum specimens see Syphilis Serology  
Shipping: Ship at 2 to 8°C up to 2days, if longer freeze at -70°C.  
LIS Mnemonic: VDRL

---

### Very Long Chain Fatty Acid

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861).  
Fasting is recommended by the testing site for best results, however not required.

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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: 6.0 mL Plain Red Top, no gel separator (BD#367815) **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

---

### Vitamin A Level

Tube/Specimen: 6.0 mL Plain Red Top, no gel separator (BD#367815). **Wrap in foil to 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: VITA

---

### Vitamin B1, Whole Blood see Thiamine, Whole Blood

Referred Out: In-Common Laboratories

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### Vitamin B2 (Riboflavin)

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861). **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.

LIS Mnemonic: VITB2

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**Vitamin B3  
(Niacin)**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861). **Wrap in tinfoil within 1 hour of collection to protect from light.**

Referred Out: In-Common Laboratories

Instructions: Centrifuge at room temperature.  
Aliquot 2.0 mL of plasma into plastic vial. **Wrap in tinfoil to protect from light! Freeze.**  
Do not accession for non-Nova Scotia Health *Central Zone* Hospitals  
Send copy of requisition.

Stability: Frozen – 56 days

LIS Mnemonic: VITB3

---

**Vitamin B6 Level  
(Pyridoxic Acid)**

Tube/Specimen: **Two** 4.0 mL Lavender EDTA (BD#367861). **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: VITB6

---

**Vitamin B12**

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

LIS Mnemonic: B12  
VIT B12

---

**Vitamin C**

Tube/Specimen: 6.0 mL Dark Green lithium heparin, no gel separator (BD#367886). **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

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Send copy of requisition.

Note: Light green topped Lithium Heparin PST tube is acceptable

LIS Mnemonic: VITC

### 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 25OH  
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: 125VITD

### Vitamin E Level

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: VITE

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**VNTR**

see Chimerism Analysis for BMT

Division: Molecular Diagnostics

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**Voltage-gated Calcium Channel Antibody**

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.

LIS Mnemonic: VGCC Ab

---

**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: VGKC Ab

---

**Von Willebrand Disease Genotype**

Tube/Specimen: 4.0 mL Lavender EDTA (BD#367861)  
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.

Stability: Peripheral blood: 5 days at 4°C or frozen  
DNA: 3 months at 4°C or frozen

Alternate Names: VWD genotype

LIS Mnemonic: VWD DNA

---

**Von Willebrand Factor Multimer Assay**

Tube/Specimen: 2.7 mL Light Blue buffered sodium citrate (BD#363083)

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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 QEIL. Referring hospitals are to send specimens directly to the referral site which performs the test to prevent delay in results.

LIS Mnemonic: VWF MULT  
VWF Multimer  
Von Willebrand Factor Multimers

### Von Willebrand Workup

Tube/Specimen: **Three** 2.7 mL Light Blue buffered sodium citrate (BD#363083), must be a full draw

Requisition: CD0002

Division: Hematopathology - Coagulation

Comments: Testing includes vWF Ristocetin Cofactor (Activity), 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

LIS Mnemonic: Von Willebrand Workup

### Voriconazole Level

Tube/Specimen: 6.0 mL Dark Green **lithium heparin**, no gel separator (BD#367886)

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: VORI

### Water Deprivation Test

see Anti-Diuretic Hormone

Referred Out: In-Common Laboratories

### WBC

see Profile

Division: Hematopathology - Core



## PLM Laboratory Test Catalogue

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: 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: ZIKA

---

### Zinc, Plasma

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

Referred Out: In-Common Laboratories

Instructions: **Centrifuge ASAP!**  
Aliquot plasma into plastic transfer vial.  
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: Room temperature 14 days, refrigerated 21 days and frozen 3 months.

LIS Mnemonic: ZINCP

---

### Zinc Protoporphyrin (Do not confuse with Free Erythrocyte Protoporphyrin)

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

Referred Out: In-Common Laboratories

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

Stability: 2 weeks refrigerated.

LIS Mnemonic: ZPP

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## PLM Laboratory Test Catalogue

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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 <i>Procedure 2: Processing for Uric Acid</i> , using the other half of the specimen set aside in step 1.3.

### 2. 24 hour Urine processing for Uric 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

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: pH <2	Then: 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 <b>within</b> 8 hours from the end of collection	Adjust pH by adding one drop of 6N HCL until the pH is between 2 and 4. Note: For catecholamine and metanephrine only: If the urine being tested is received in the original plain 24-hour container within 8 hours from the end of the collection time: it is acceptable to adjust the pH.
	pH >4 <u>and</u> ≤6 <u>but</u> received <b>greater</b> than 8 hours from the end of collection	The test will be cancelled automatically by the system upon verification of the pH results.
	pH >6	The test will be cancelled automatically by the system upon verification of the pH results.