



PATHOLOGY HANDBOOK

Seventeenth Edition

Issue Date 31/12/2009



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HOURS OF OPERATION

Monday to Friday: 8.00 am - 1.00 am
 Saturday: 8.00 am - 12.00 pm
 Sunday & Public Holidays: 9.00 am - 12.00 pm



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PATHLAB ACCREDITED COLLECTION CENTRES

Authorised by Philip Pharonides

PATHQF-03 25/11/2009

CENTRE	ADDRESS	HOURS OF OPERATION	CONTACT No.
ALTONA	98 Queen St. Melway Ref P54 H11	Monday to Friday 9.00am-5.00pm	T/F - 03 9315 9374
BALWYN NORTH DC 094	16 Doncaster Rd. Melway Ref P46 A2	Monday to Friday 9.00am-2.00pm	T - 03 9859 7389 F - 03 9857 0899
BROADMEADOWS DC 098	50-52 Bamburgh St. Melway Ref P6 G9.	Monday to Friday 8.00am-5.00pm Saturday 9.00am-12.00pm	T - 03 9302 3822 F - 03 9302 3330
BRUNSWICK	678 Sydney Rd. Melway Ref P29 H6	Monday to Friday 9.00am-1.00pm	T/F - 03 9383 3977 Dr Phone 03 9387 1661
BULLEEN	103 Manningham Rd. Melway Ref P32 F7	Monday to Friday 8.00am-12.30pm Saturday 9.00am-12.00pm	T/F - 03 9852 3625
BURWOOD	68 Burwood Hwy. Melway Ref P60 H6	Monday to Friday 8.00am-4.00pm	T - 03 8831 3000 F - 03 9808 2247
CLAYTON DC 061	1383 Centre Rd. Melway Ref P79 B3	Monday to Friday 8.30am-5.00pm Saturday 9.00am-12.00pm	T/F - 03 9544 6277
DEER PARK	26 Canterbury St Melway Ref P25 D8	Monday to Friday 8.00am-4.00pm Saturday 9.00am-12.00pm	T/F - 03 8390 1884
EPPING DC 063	52 Childs Rd. Mel way Ref P9 B2	Monday to Friday 8.00am-4.00pm Saturday 8.00am-12.00pm	T - 03 9401 2346 F - 03 9401 5822
FAWKNER	1272 Sydney Rd. Melway Ref P17G1	Monday to Friday 8.00am-4.00pm Saturday 9.00am-12.00pm	T/F - 03 9359 0320
FOREST HILL	63 Mahoney's Rd Melway Ref P62 D2	Monday to Friday 8.30am-1.00pm	T - 03 9877 0022 F - 03 9877 0133
FRANKSTON	Unit 194 194 Karingal Drive Melway Ref P99 K12	Monday to Friday 8.30am-4.30pm Saturday 9.00am-12.00pm	T/F - 03 9789 5450
HOPPERS XSSING DC 201	110 Heaths Rd. Melway Ref P206 G2	Monday to Friday 8.30am-5.00pm Saturday 9.00am-12.00pm	T - 03 9749 1388 F - 03 9749 1399
KEILOR DOWNS	Lot 1 Keilor Plaza Medical Centre, Taylors Road Melway Ref P14 B8	Monday to Friday 8.30am-4.30pm Saturday 9.00am-12.00pm	T - 03 9364 6955 F - 03 9364 6755
LALOR	26 Lorne St. Melway Ref P9 B6	Monday to Friday 9.00am-1.00pm Saturday 9.00am-12.00pm	T/F - 03 9465 2238
NOBLE PARK DC 095	1098 Heatherton Rd Melway Ref 89 E2	Monday to Friday 9.00am-1.00pm Saturday 9.00am-11.30am	T - 03 9546 9477 F - 03 9546 9116
RICHMOND	283 Church St Melway Ref P44 F11	Monday to Friday 8.30am-4.00pm Saturday 9.00am-11.00am	T/F - 03 9421 3533
RICHMOND DC 069	307 Burnley St. Melway Ref P44 G11	Monday to Friday 9.00am-2.00pm Saturday 9.00am-12.00pm	T - 03 9429 5499 F - 03 9427 1325
ROWVILLE	95 Liberty Drive Melway Ref P81 K4	Monday to Friday 8.00am-3.00pm Saturday 9.00am-12.00pm	T/F - 03 9755 8062
SPRINGVALE	10 St James Ave Melway Ref P89 E1	Monday to Friday 9.00am-1.00pm Saturday 9.00am-12.00pm	T/F - 03 9540 3323
WERRIBEE	1/ 229 Heaths Rd Melway Ref P206 A1	Monday to Friday 8.00am-4.00pm Saturday 8.00am-12.00pm	T/F - 03 9731 6006



PATHLAB - HOME VISIT SERVICES

Pathlab provides Home Visits for patients who are infirm, housebound or too far to attend a collection center.

Our objective is to offer a reliable communication (with audit trail) for home pathology booking requests received out of normal operating hours.

At present there are numerous calls received requesting Home Visit collections that come in after normal operating hours. These calls are received at Head Office.

Procedure:

Home Visits for pathology collection are booked through our Head Office.

- Tell the phone operator what day the visit will be required for. Generally 24 hours is needed before booking the visit as collection may require the patient to be fasting or medication withheld. As these test are always performed first thing in the morning only a certain amount can be booked per day.
- Give the patient details-
 - name, address and phone number.
- Give the referring doctor details-
 - doctor's name, address of the clinic and phone number.
- Give the tests requested.
- Tell the telephone operator if the patient is required to fast or withhold medication.
- Please relate any other information needed e.g. a diabetic patient will need to be visited as soon as possible because of their medication regime, or an intellectually disabled patient may need supervision to allow the collection to take place.
- Please relate if the request slip will be with the patient or sent in to the Head Office. Requests can be sent in with the usual courier services, marked 'Attention: Home Visits'.
- Patients requiring a home visit must be available between 9am to 5pm on the date required.
- If the patient is unable to be told immediately, the Home Visit Coordinator will make the booking and call the patient, explaining in detail the procedure e.g. the patient is given a scheduled date for a Holter Monitor test and must be available at the same time next day for it's removal.
- Urgent home visits must be attended immediately. The nurse is notified of the urgent request and arrangements made for the patient to be visited.

RULE 3 EXEMPTION

In specific circumstances, HIC regulations allows a single signed request form to cover repeating testing. Once the maximum of tests is exceeded, or the 6 months period has expired, a new request form is required.

Test covered by Rule 3 Exemptions are:

- INR -** Anticoagulant therapy unlimited INR performed within a 6-month period.
- LITHIUM -** Lithium therapy only 6 tests performed within a 6-month period.
- FBE/ESR -** Chemotherapy, immunosuppressant therapy, sulfasalazine, gold, penicillamine, clozaril, Methotrexate, ticlopidine. Only 6 tests performed within a 6-month period.
- CALCIUM, ALBUMIN -** Vitamin D or analogues only 6 tests performed within a 6-month period.
- U&E -** Chronic renal failure on dialysis, cyclosporin, cisplatinum therapy. Only 6 tests performed within a 6-month period.

Doctors are required to indicate Rule 3 Exemption or serial testing on the request form by ticking the box located on the left side of the request form.



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URGENT SPECIMENS

- Some requests will be marked as urgent on the request slip. They will need to be at the laboratory as soon as possible e.g. a semen sample has to be in the Head Office or Epping Laboratory within one hour or a doctor may request that results be available before a certain time in the afternoon.
- Ring the Couriers department at Pathlab and ask for an urgent pick up. Pathlab will organise for the courier to collect the samples from the medical center.
- Make sure that the request slip is marked with an urgent sticker and the request and collected sample are in a red specimen bag.
- Ensure that the sample is placed in an appropriate container, such as a foam esky, and that the container is ready for transport with cold packs as appropriate.
- DO NOT place blood samples DIRECTLY in contact with the cold packs. Wrap the cold packs in tissue paper or bluey before placing samples in esky.

SPECIMEN TRANSPORT & STORAGE

Most samples should be returned in specimen bags and stored as follows:

Between 2-8 C:

- Urine, faeces sample.

Room Temperature:

- Blood samples, swabs, smears, biopsies, genital swabs, 'hot' faeces for amoebae, semen samples and cold agglutinins.

At 37 C:

- Cryoglobulins, blood cultures.
- Faeces for reducing substances needs to be frozen if they cannot reach the laboratory within 1 hour.

Some specimens require special attention. See the instructions for individual tests or phone the laboratory.

TAXIS & EXTERNAL COURIER PICK UPS

When transporting samples to the lab by taxi or an external courier company, specimens should be transported in the foam eskies provided, with an ice brick enclosed or as appropriate, **NOT** as loose specimen bags.

STORES ORDERS

To order please contact our stores Department on **03 8831 3042**

Order forms can be sent to the clinic with courier or by fax and the completed form faxed to **03 9808 2259** or returned with the courier marked 'Attention: Stores'.



BLOOD PRESSURE HOLTER MONITOR

Issue Date: 21/03/2007

Bookings essential:

When BP monitoring is requested the patient is asked to pay \$80.00 at the time of testing. **There is no Medicare rebate for this test. Patient must be aware of this at the time of booking.**

BP monitoring is an ambulatory monitoring of patient's blood pressure. The patient is fitted with a blood pressure cuff, worn on the non-dominant arm and the monitor, which is worn for a 24 hours period.

Ask patient to shower before coming for the test and advise him/her that they are unable to shower/bathe during the test.

Advise patient to wear loose fitting clothing.

EQUIPMENT

- BP monitor
- 2 x AA Batteries
- carry bag for recorder
- patient event recording sheet

ACTIONS

1. Check patient details with request form and explain the procedure to the patient.
2. Insert new batteries into the recorder. (Batteries must be changed just prior to each patient episode).
3. Locate the brachial artery pulse in the antecubital fossa, mark with a cross using a ballpoint pen.
4. Attach the blood pressure cuff around the upper arm ensuring the arrow on the cuff is aligned with the brachial artery. Drape the lead comfortably across the back of the patient's neck and down the other side of the body.
5. Press the on button. Check the placement of the cuff by pressing the start button to initiate cuff measurement. Record the baseline blood pressure on the request form.
6. Place the recorder in the carry bag and tie comfortably and securely to the patient with the belt.
7. Instruct patient to press the Patient Event Button if they experience any symptoms such as palpitations, faint etc and record the time and activity on the BP Monitor Patient Record Sheet.
8. Instruct patient to return to the collection centre 24 hours after the recording was commenced in order to have the equipment removed.
9. After the recording is completed, remove the BP cuff from the patient and send BP monitor back to Burwood ASAP.



PATHLAB - BLOOD CULTURE SPECIMEN COLLECTION INSTRUCTIONS

PATHREF-15 Issue Date 31/08/2005

Collection requirements

- Alcohol wipes
- Disposable gloves
- Vacutainer Luer Loc Collection Set or 21g needle and 10 ml syringe.
- Blood Culture bottle x 1.

Skin Preparation

- After locating vein, clean skin area vigorously with alcohol wipe.
- Use second alcohol wipe using circular motion wiping outwards from selected area.
- Allow skin area to dry.

Preparation of blood culture bottle

- Remove flip top cap from bottle.
- Wipe top of bottle with alcohol swab, allow to dry.

Blood Collection, vacutainer

- Remove butterfly needle from packaging, check ALL connections are firm.
- Remove sheath covering needle.
- Perform venipuncture by holding wings of needle, not yellow safety shield.
- Perforate blood culture bottle by pushing luer lok end through bottle stopper.
It is important to ensure perforation is through the center of rubber stopper.
- Blood culture bottle are vacuumed to fill 10 ml of blood (5 – 10ml is required in the bottle).
- By attaching a barrel any further tubes required can be collected.
- Release tourniquet and withdraw the luer lok end from tube or bottle, **remember both ends of butterfly needle set have sharps.**
- Whilst holding both wings forward with one hand, slide the yellow safety shield up over the needle until it 'clicks' into position.

Blood collection, needle and syringe

- Insert needle into prepared vein, collect 5 – 10ml of blood.
- After changing to a clean needle, 19g or 21g, carefully puncture rubber stopper of blood culture bottle and allow blood to enter bottle.

Disposal

- Carefully dispose of needle into an appropriate sharps collection unit.

Preparation of specimen

- Gently invert blood culture bottle to ensure distribution of blood.
- When specimen has been collected it must be labeled as are all specimens, with clients first name, surname, date of birth, date and time of collection.
- Wrap blood culture bottle in paper towel to protect bottle from breakage during transportation to laboratory.



BREATH COLLECTION FOR PYTEST® H. PYLORI DETECTION

PATHREF-18 Issue Date 22/04/2005

1.0 Purpose:

To describe patient preparation and breath collection requirements for the PYtest® (urea breath test for detecting *Helicobacter pylori*).

2.0 Scope

This document applies only to sample collection for the PYtest® (AUSTR L67147).

3.0 Responsibilities

This document applies to all staff who advise or supervise patients undergoing the PYtest®.

4.0 Procedure

Approximately 2 litres of breath sample is collected 10 minutes after the patient ingests a capsule containing 14C labelled urea.

4.1 Patients **must not**:

- exercise in the 30 minutes preceding the start of the procedure (4.2)
- eat or drink (including water) for 6 hours before testing
- take antibiotics for 4 weeks before testing
- take Sucralfate for 2 weeks before testing
- take proton pump inhibitors for 1 week before testing
- take H₂ antagonists or antacids during the fast or during the test

4.2 Have the patient sitting at rest for 5 minutes before, and also during, the test.

4.3 Before the test: label the balloon and fill-in the form; check that all required materials are present.

4.4 Immediately before the test: remove the capsule from the package and tip it, **without handling** into the first empty 30 mL cup and hand it to the patient. Add 20 mL of lukewarm water to a second cup.

4.5 At Zero minutes: Tell the patient to tip the capsule into his mouth and then swallow it with the 20 mL of water: start a stopwatch. Discard waste materials.

4.6 At 3 minutes: Tell the patient to drink another 20 mL of lukewarm water.

4.7 At 10 minutes: Push a drinking straw into the neck of the balloon. Ask the patient to take a deep breath and hold it for 10 seconds, then slowly blow into the straw until the balloon is filled without the need for a second breath (see 6.2, below).

4.8 Remove the straw and tie the neck of the balloon **tightly**; check that the balloon label and corresponding form are completed correctly.

5.0 Relevant Documents:

Analytical Method "Helicobacter pylori Breath Test".

6.0 Limitations:

- If the capsule sticks in the patient's throat, give only enough extra water to ensure it reaches the stomach (this is recommended by the test manufacturer).
Note this on the form: excess water may cause a false negative result.
- If one breath is insufficient to fill the balloon, the patient may take a second, deep breath and hold it for 10 seconds before filling the balloon (this is recommended by the test manufacturer). Note this on the form: this may cause a false negative result.

7.0 Amendments:

Changes to 4.1 and 4.2 to address NATA suggestions on the need to emphasize that patients do not exercise immediately before or during sample collection.



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PATIENT INSTRUCTION SHEET: 3 DAY (72 HOUR) FAECAL FAT COLLECTION

PATHREF-17 Issue Date 31/08/2005

INSTRUCTIONS

1. Your doctor has requested a 3 day faecal fat collection.
2. Collect a pre-weighted tin from Pathlab Collection Centre nearest you.
3. Maintain a normal diet for 4 days prior to and during the test.
4. You should not use suppositories, lubricants or mineral oil 1 week prior to collection.
5. Do not contaminate the faeces with other matter in the container (eg toilet paper, spoons, urine).
6. The specimen should be stored in a cool place or refrigerated during collection with the lid firmly closed.
7. Day 1 – record date and time of commencement on container. If bowel motion can be passed at this time, discard this specimen.
8. Collect all stool specimen for next 72 hours into the tin provided.
9. Finish at same time the collection started eg. 8am Day 1 – 8am Day 4.
10. Do not fill the tin more than 2/3 full. A further tin may be required.
11. On completion return the tin with the lid **firmly sealed** to the Collection Centre.
12. Staff will ensure the specimen/s are fully labelled with:
 - Your Name,
 - Date of Birth and
 - Date/Time of Collection.



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PATIENT INSTRUCTION SHEET: COLLECTION OF FAECES FOR MICROSCOPY & CULTURE AND URAL STUDIES (ROTA AND ADENO)

PATHREF-11 Issue Date 10/09/2007

INSTRUCTIONS

- The number of specimens to be tested must be clearly stated on the request form.
- If your Doctor has requested 2 or 3 specimens to be collected, all 3 specimens must be returned on separate days, but within 7 days of the first collection.
- Faeces specimen is to be collected in the 2 containers provided by the Doctor or Pathology Collector.
- Write your SURNAME, FIRST NAME, DATE OF BIRTH on the label of the container.
- The specimen can be passed into a separate clean container, or onto paper, and then scraped into the sterile collection container provided using the scoop which is part of the container lids.
- The white top jar is sterile for culture.
- The brown top jar contains preservative and is for parasitology.
- Write the DATE and TIME of the specimen collection on the label of the container.
- The specimen container are to be placed in the sealable section of the specimen bag, and returned to the PathLab Collection Centre within 12 hours of collection.



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PATIENT INSTRUCTION SHEET: COLLECTION OF FAECES FOR REDUCING SUBSTANCES/SUGAR

PATHREF-10 Issue Date 10/09/2007

INSTRUCTIONS

- Faeces specimen is to be collected in sterile white top container provided by the Doctor or Pathology Collector.
- Write your SURNAME, FIRST NAME, DATE OF BIRTH on the label of the container.
- The specimen can be passed into a separate clean container, or onto paper, and then scraped into the sterile collection container provided using the scoop which is part of the container lid.
- Write the DATE and TIME of the specimen collection on the label of the container.
- The specimen container is to be placed in the sealable section of the specimen bag, then place in the freezer.
- When frozen, return the specimen to the PathLab Collection Centre.



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PATIENT INSTRUCTION SHEET: COLLECTION OF SEMEN FOR POST VASECTOMY TEST

PATHQF-11 Issue Date 31/08/2005

INSTRUCTIONS

- Refrain from sexual intercourse and masturbation for at least 3 days before producing specimen.
- Collect entire sample by means of masturbation. Withdrawal method is not recommended.
- **DO NOT** use condoms, lubricants etc. as these will interfere with the test.
- Collect the specimen in sterile jar provided. Write SURNAME, GIVEN NAME, D.O.B, DATE and TIME of collection on CONTAINER.
- Keep at room temperature
- If the semen is for Post-Vasectomy test, the specimen can be delivered to the centre on the day of collection.

Note: No specimens are to be collected at the Laboratory or Branches

DELIVER TO EITHER:

- **Pathlab:** 68 Burwood Highway Burwood 9808 2122
- **Epping Laboratory:** 48 - 50 Childs Road Epping 9408 9817
- Any PathLab Branch

PLEASE COMPLETE THE FOLLOWING AND RETURN IT WITH THE SPECIMEN:

Full Name _____ Number of days abstinence _____

Method of collection _____

Is this a complete specimen ? YES NO (tick your response)

Date of collection _____ Time of collection _____



PATIENT INSTRUCTION SHEET: COLLECTION OF SEMEN FOR VASECTOMY REVERSAL OR FERTILITY TEST

PATHQF-11A Issue Date 31/08/2005

INSTRUCTIONS

- Refrain from sexual intercourse and masturbation for at least 3 days before producing specimen.
- Collect entire sample by means of masturbation. Withdrawal method is not recommended.
- **DO NOT** use condoms, lubricants etc. as these will interfere with the test.
- Collect the specimen in sterile jar provided. Write SURNAME, GIVEN NAME, D.O.B, DATE and TIME of collection on CONTAINER.
- Keep at room temperature
- For a Fertility test, return the specimen and request form **within 1 hour of collection**.

Note: No specimens are to be collected at the Laboratory or Branches

DELIVER TO EITHER:

- **Pathlab:** 68 Burwood Highway Burwood 9808 2122
- **Epping Laboratory:** 48- 50 Childs Road Epping 9408 9817

Note: Phone first to confirm availability of Scientist.

PLEASE COMPLETE THE FOLLOWING AND RETURN IT WITH THE SPECIMEN:

Full Name _____ Number of days abstinence _____

Method of collection _____

Is this a complete specimen ? YES NO (tick your response)

Date of collection _____ Time of collection _____



PATIENT INSTRUCTION SHEET: FAECAL OCCULT BLOOD COLLECTIONS

PATHREF-09 Issue Date 10/09/2007

INSTRUCTIONS

- The number of specimens requested must be clearly stated on the request form.
- Faeces specimen is to be collected in container provided by the Doctor or Pathology Collector.
- Write your SURNAME, FIRST NAME, DATE OF BIRTH on the label of the container.
- The specimen can be passed into a separate clean container, or onto paper, and then scraped into the sterile (white lid without preservative) collection container provided using the scoop which is part of the container lid.
- Write the DATE and TIME of the specimen collection on the label of the container.
- The specimen is to be placed in the sealable section of the specimen bag, and must be returned to Pathology Collection Centre on the same day as the sample is collected.

PATIENT PREPARATION

It is recommended that the patient be placed on a high residue diet starting 2 days before and continuing through the test period.

DIET MAY INCLUDE:

1. Meats: Only small amounts of well-cooked chicken, turkey and tuna
2. Vegetables: Generous amounts of both raw and cooked vegetables including lettuce, corn, spinach, carrots and celery. Avoid raw vegetables with high peroxidase activity such as those listed below.
3. Fruits: Plenty of fruits, especially prunes and apples.
4. Cereals: Bran and bran-containing cereals.
5. Moderate amounts of peanuts and popcorn daily. If any of the above foods are known to cause discomfort, the patient is instructed to consult his/her physician.

TO BE AVOIDED:

1. Meat: Diet should not include any red or rare meat
2. Raw fruits containing high peroxidase activity: Turnip Cauliflower Red radishes Broccoli Cantaloupe Horseradish and Parsnip.

OTHER FACTORS WHICH AFFECT THE TEST:

1. Medications: For 7 days prior to and during the testing, do not ingest aspirin or other anti-inflammatory medicines. For 2 days prior to and during testing, do not use rectal medicine, tonics or vitamin preparations which contain Vitamin C (ascorbic acid) in excess of 250 mg per day.
2. Bleeding hemorrhoids or open cuts on hands.
3. Improper specimen collection.
4. Collection of specimen during menstrual cycle.
5. Other diseases of the gastrointestinal tract such as colitis, gastritis, diverticulitis and bleeding ulcers.

IMPORTANT: Specimens should not be collected during menstruation or when known haemorrhoids are actively bleeding.



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CLIENT INFORMATION SHEET: FASTING BLOOD TEST

PATHQF-22 Issue Date 2/06/2006

INSTRUCTIONS

- Clients needing a fasting blood test are required to have had nothing to eat or drink for a minimum of ten (10) hours prior to the collection of the specimen.
- You are permitted to drink water.
- These specimens are generally collected early in the morning. Unless your doctor has specifically requested for you to take your medication it should not be administered until after the specimen has been collected.
- Client can also fast for too long. A period of greater than sixteen (16) hours is considered to great of a period to reflect an accurate result.
- Should you have any further question regarding the requirements for Fasting Blood Tests, Please ask your doctor or the pathology collection staff.



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GLUCOSE TOLERANCE TEST PATIENT INSTRUCTIONS

PATHQF-06 Issue Date 2/06/2006

BACKGROUND INFORMATION

This test measures the ability to handle an oral glucose load in a fasting state by measuring the plasma glucose 2 hours after ingestion.

PATIENT INSTRUCTION

- For three days prior to the test you should be on a normal carbohydrate diet of approximately 150 g of carbohydrate daily. (not a diabetic diet)
- The test should not be performed if you are unwell i.e. Infection, recent surgery or trauma
- You are required to fast overnight (10-12 hours). You should have nothing to eat from 10pm and this includes chewing gum, lollies, tea and coffee. You are permitted to drink water.
- No physical activity or smoking is permitted during the test, as the results will be affected. You should rest for 30 minutes before commencement of the test. You should not walk around during the test.
- You are to remain in the collection centre for the duration of the test.
- The test is commenced between 0800 and 1000 hour Monday to Friday
- At the commencement of the test a blood sample is taken and the fasting glucose checked.
- A glucose load in the form of a single bottle of chilled Glucaid (75g) is given. Ingestion of the entire bottle should be completed within five minutes

Two more blood samples will be taken at 1- hour intervals starting at exactly 1 hour after ingestion of glucose drink.



CHECK LIST FOR GLUCOSE TOLERANCE TEST

PATHQF-07 Issue Date 22/09/2009

To be completed by Collection Staff

Date: Time:.....

Please complete with a tick or comment where appropriate. Attach to request form and send to lab.

Patient's Name	
Dietary Preparation 150 g CHO diet for 3 days	
Fasting for 8-16 hours	
State of Health	
Drugs	
Test Protocol- rest for 30 minutes	
Rest during GTT	
No smoking for 1 hour prior to GTT	
Test in AM	
Fasting < 10mmol/L (BM stick)	
75 g glucose drink within 5 minutes	
Person Performing Test	

- Urines only need to be collected if required by GP for low renal threshold for Glucose.



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Fax: (03) 9808 2247

INR Patient Questionnaire for LAB DOSE patients only

PATHQF-08 Issue Date 19/02/2007

Surname: Given Names: DOB.../.../...
Medicare No: Language Restrictions:
Patient's Contact No:

Current Warfarin Dose mg	Last Dose: Date: Time:
------------------------------------	---

Regular Existing INR (Lab dose only)

Has anyone other than PathLab changed your dose since the last test. Yes , No

Specify:
.....

Medication changes:
.....

Any recent missed doses. Yes , No

Specify:

Any unusual bleeding/bruising. Yes , No

Specify:

New INR (Lab dose only)

Diagnosis:

Target range:

Dose: mg

Date Commenced:

Medications:
.....

Home visit required. Yes , No

Collector's Declaration:

I certify that the specimen accompanying this form was taken from the patient named above and that his/her identity was established by direct inquiry and/or inspection of medicare/drivers licence card etc.

Collected by Date: Time:



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LACTOSE TOLERANCE TEST PATIENT INFORMATION

PATHREF-12 Issue Date 2/06/2005

BACKGROUND INFORMATION

The "Hydrogen Breath Test" is the most sensitive and least invasive, especially for children. "Hydrogen Breath Test" is preferable over the previous blood tests for glucose, after the lactose dose.

PATIENT INSTRUCTION

'Hydrogen Breath Test' is performed at:

1. **Royal Children's Hospital** or at
2. **Gastro Department of Box Hill Hospital**, Level 8,
Clive Ward Centre
16 Arnold Street
Box Hill
Phone: 9895 0316 (speak to Paul for appointment)
Fax: 9895 0352

Should you require any further information regarding this test, please contact the Collection Centre or PathLab on 8831 3000



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Fax: (03) 9808 2247

MIDSTREAM URINE COLLECTION - FEMALE

PATHREF-08 Issue Date 31/08/2005

To ensure the accuracy of the results it is important that this specimen is collected correctly.

If you are menstruating please check with your Doctor if they still wish the specimen collected.

1. Wash and dry hands thoroughly.
2. Separate the labia (the folds of skin covering the front passage) and hold apart with one hand.
3. Cleanse this front passage with the sterile water wipes supplied, wiping once with each from front to back.
4. Begin passing urine into the toilet.
5. Pass the container into the stream of urine, approximately half fill it, please ensure that you do not touch the inside of the lid or the container as this will contaminate the specimen.
6. Void the remainder of the urine into the toilet.

This specimen must be clearly labeled with your first name, surname, date of birth and the time and date you collected it. The request form from your doctor, must accompany the urine specimen.

The urine specimen must reach the laboratory the same day as it is collected. If there will be a delay in delivering the specimen to a collection center please refrigerate the specimen.



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MIDSTREAM URINE COLLECTION - MALE

PATHREF-07 Issue Date 31/08/2005

To ensure the accuracy of the results it is important that this specimen is collected correctly.

1. Wash and dry hands thoroughly.
2. Retract the foreskin and swab with the sterile water wipe supplied.
3. Commence passing urine into the toilet.
4. Pass the container into the stream of urine, approximately half fill it, please ensure that you do not touch the inside of the lid or the container as this will contaminate the specimen.
5. Void the remainder of the urine into the toilet.

This specimen must be clearly labeled with your first name, surname, date of birth and the time and date you collected it. The request form from your doctor, must accompany the urine specimen.

The urine specimen must reach the laboratory the same day as it is collected. If there will be a delay in delivering the specimen to a collection center please refrigerate the specimen.



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NASOPHARYNGEAL SWAB (NPS)

PATHREF-16 Issue Date 10/09/2007

A NPS is used to diagnose whooping cough (*bordetella pertussis*). Most clients for whom this test will be requested are children.

Care must be taken when collecting this specimen.

The wire MCS swab is first measured against either the clients 2nd finger, tip to knuckle or face, ear to start of nose. The swab should be introduced into the nasal cavity no further than this.

Gently introduce the swab ensuring not to force it or contaminate the wire to be introduced. When the swab reached the predetermined length, gently rotate the swab to collect the specimen. Care must be taken as this area is sensitive and can be easily damaged.

Remove the swab and place into transport medium. Label completely including L or R.

Repeat for other nostril.

Doctors may request a NPA, nasopharyngeal aspirate, we do not perform this test. Contact the doctor to inquire if a NPS will be acceptable, perform NPS if it is, refer client back to doctor to organize collect elsewhere if NPA is required.

Results for NPS are available in 7 days.

- For *B. pertussis* PCR, any respiratory sample is suitable.
This test should be indicated on request form.



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RECOMMENDATIONS AFTER BLOOD COLLECTION

PATHQF-10 Issue Date 31/08/2005

1. It is best to leave the dressing strip in place for about 2 to 4 hours.
2. Avoid wearing tight or restrictive clothing on the arm for the next 24 hours.
3. Try to avoid strenuous use of the arm for about 24 hours (e.g. sports, digging, ironing, carrying parcels handbags or briefcase).

Rarely you may experience some bleeding, discomfort, swelling or bruising.

Should this occur, the following steps are recommended:

a) Bleeding at the needle site

Apply firm pressure directly over the needle site and elevate the arm until bleeding stops

b) Discomfort or swelling of the arm

Elevate the arm and contact the laboratory on **Ph; 8831 3000** or your Doctor

c) Excessive Bruising

Contact the laboratory on **Ph: 8831 3000**

Rest the arm as much as possible.



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CLIENT INFORMATION SHEET SPUTUM CYTOLOGY

PATHREF-03 Issue Date 10/09/2007

INSTRUCTIONS

- Write your SURNAME, FIRST NAME and DATE OF BIRTH on the collection container provided by the Doctor or Pathology Collector.
- Collect at least three deep coughed sputum specimens into the sterile container. These specimens should be collected early in the mornings of three separate days (if possible consecutively).
- Write the date and time of collection on the container.

Please Note: saliva ONLY is not acceptable for testing.

- Specimens should be delivered as soon as possible to the Collection Centre on the day of collection - individually, or all together.
- Refrigerate each specimen until delivery to the Collection Centre.



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CLIENT INFORMATION SHEET: URINE CYTOLOGY TESTING

PATHREF-04 Issue Date 10/09/2007

INSTRUCTIONS

- Please discard first urine specimen of the day as this is not suitable for cytology evaluation.
- After passing the first urine of the day, you should then drink as much water as possible and then collect the urine into the special sterile container provided by the Doctor.
- Clearly label each container with your SURNAME, GIVEN NAME, DATE OF BIRTH and the DATE YOU COLLECTED THE SPECIMEN
- You should collect 3 urines on different days and they do not necessarily have to be consecutive days.
- Each specimen should be delivered to the PathLab Collection Centre as early as possible on the same day they are collected. If there is any delay in delivering the specimen to the Collection Centre, refrigerate the specimen until delivery to the centre.



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CLIENT INFORMATION SHEET: 24 HOUR URINE COLLECTION

PATHREF-05 Issue Date 31/08/2005

INSTRUCTIONS

- Write your SURNAME, GIVEN NAME, DATE OF BIRTH on the label of the container.
- Eat and drink normally prior to the collection unless instructed otherwise.
- For the first passing of urine, completely empty the bladder and discard the urine – DO NOT PLACE INTO CONTAINER – but record the time and date on the container label.
- After passing the first urine of the day, commence collection, collecting ALL URINE for the next 24 hours.
- Exactly 24 hours after the commencement time, empty bladder and collect INTO THE CONTAINER.
- Collection is now completed, you are to record this completion time on the label of the container – which should be the same time as the start time.
- Store the container in a cool dry place.
- Return the completed 24 hour urine collection to the PathLab Collection Centre as soon as possible.

IMPORTANT

If an Acid preservative has been added to the container please observe the following precautions:

- Store out of reach of children
- Do not discard the preservative prior to commencing collection
- Do not void directly into the container. Void into another clean container first.



FUNCTIONAL LIVER DETOXIFICATION PROFILE

Issue Date: 21/03/2007

BEFORE YOU START

If you are under the care of a health care practitioner, testing should be professionally requested and interpreted. Patient self-requested tests are not intended for the purpose of diagnosing illness or disease, but for monitoring of dietary and lifestyle changes.

KIT CONTENTS

Bag 1, Saliva Collection

- 2x caffeine tablets (NoDoz®, 100mg each)
Adult or
- 1x caffeine tablet (NoDoz®, 100mg)
Paediatric (Child).
- 2x white top tubes for saliva collection.

Bag 2, 10hr Urine Collection

- 2x Aspirin tablets (300mg each) **Adult or**
- 1x Aspirin tablet (300mg) **Paediatric (Child).**
- 1x Paracetamol tablet (500mg) **Adult or**
- 1x Paracetamol tablet (250mg)
Paediatric (Child).
- 1x plastic dropper.
- 1x plastic tube (10mL, with screw cap).

Other

- 1x payment form.
- 1x PathLab request form.
- 1x disposable plastic collection tray.
- 1x 2 Litre bottle (compressed, contains chlorhexidine) for 10 hour urine collection.
- 1x pre-addressed Lab-Mailer for sending the Payment, Request Form and Specimens to the laboratory.

Check the contents of this collection kit: if any of the items is missing, or you require technical information, please contact the Integrative Medicine Department at PathLab on (+61 3) 8831 3039.

IMPORTANT NOTES

- Read the instructions carefully and familiarise yourself with the test requirements: **failure to follow these instructions may affect your test results.**
- 2 days before the test period, stop taking Aspirin and Paracetamol.
- During the test period you must not consume **Aspirin or Paracetamol (except for the tablets in this kit), medications containing caffeine or salicylates, alcohol, coffee, tea, cocoa, chocolate, cola soft drink, caffeine-containing energy drink, stone fruit (apricots, peaches, cherries, plums etc), berries (blackcurrant, cranberry, etc), grapefruit or its juice, dried fruit (raisins, sultanas, currants, etc), liquorice, aniseed, peppermint (gum, sweets, lollies, candy), avocado, or spices.**

SAFETY NOTES

Caution! • do not discard the fluid in the bottle • avoid contact of the fluid in the bottle with your eyes or skin (wash the area thoroughly if this occurs) • do not inhale or ingest the liquid in the bottle (contact your healthcare practitioner if this occurs).

Caffeine • the adult test dose is 200mg. There are no reported contraindications for caffeine in adults and adverse reactions are uncommon (increased nervousness, irritability, sleeplessness and rapid heart beat).

Aspirin • the adult test dose is 600 mg. Contraindications are gastric or duodenal ulcers; npathologically increased haemorrhagic tendency; known salicylate hypersensitivity. Adverse reactions may be gastric disturbances; gastrointestinal blood loss; hypersensitivity reactions (rarely); thrombocytopenia (vary rarely).

paracetamol • the adult test dose is 500mg. There are no reported contraindications for paracetamol: adverse reactions are rare and mild and include dyspepsia and nausea; allergenic and haematological reactions.



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COLLECTION INSTRUCTIONS

DAY 1

1. Before breakfast (7am-8am), swallow the 2 caffeine tablets and note the time. Label the two saliva collection tubes with your name and the date.
 2. Have breakfast, avoiding the foods listed above (see **IMPORTANT NOTES**).
 3. Two hours after taking the caffeine tablets, collect the first saliva specimen into one of the tubes, filled to at least the 1 mL graduated mark on the side of the tube, then write the collection time on the label.
 4. Six hours after collecting the first saliva sample (8 hours after taking the caffeine tablets), collect the second saliva sample into the second tube, filled to **at least** the 1 mL mark, then write the collection time on the label.
 5. Label both saliva tubes with your name and the date, then put them into Bag 1, seal it and put it in the refrigerator.
 6. At 10pm, empty your bladder into the toilet, then take the 2 Aspirin tablets and the Paracetamol tablet, noting the time. For the following 10 hours, all urine must be collected into the 2 Litre collection bottle. If preferred, you can collect your urine into the disposable plastic collection tray, included in the kit, then pour it carefully and without spillage into the 2 Litre bottle.
 7. To expand the bottle, remove the lid, grasp the top and bottom rims and pull until the bottle is fully expanded: replace the cap.
 8. Ten hours after taking the tablets, pass all the urine in your bladder into the 2 Litre graduated collection bottle and mix it thoroughly. Place the bottle on a horizontal surface and read the total urine volume from the graduated scale on the side of the bottle. If the bottle is not fully extended, the urine volume measurement and the test results will be inaccurate.
 9. Write the 10 hour urine volume on the request form and on the label of the 10mL tube.
 10. Using the plastic dropper, transfer 10 mL of well-mixed urine from the bottle into the 10mL tube and replace the tube lid firmly.
 11. Label the tube with your name and the date, then put it into Bag 2.
 12. Put the completed request form, completed payment form and your payment (cheque, money order or credit card details) into the unsealed section of Bag 2.
 13. Place Bags 1 and 2 in the Labmailer and seal it.
 14. Dispose of the remaining urine and the bottle.
- PathLab is open 7 days a week to receive your sample.

SHIPPING/TRANSPORT

Return the package to one of our PathLab collection centres listed on the back of the request slip, or place lab-mailer together with request form and credit card payment slip and mail it back to PathLab.



Freight

There are no additional freight costs. A reply mailer has been included for your convenience and complies with the accepted procedure for transport of biological samples within Australia.

For shipping outside of Australia please contact your local practitioner and/or agent. Alternatively contact Pathlab on (+61 3) 8831 3039 to arrange shipment.

RESULTS

Results will normally be available within 7-14 working days of receipt of your samples, payment and completed paperwork. Results will be sent to your nominated healthcare professional.

TEST PRICING

The Functional Liver Detoxification Test (FLDT) is not rebateable by Medicare in Australia.

Payment

Payment must be received in FULL for test to be performed. Please see payment options available. Also refer to price list.

Accounts

Accounts enquiries:
(+61 3) 8831 3015 or (+61 3) 8831 3016
Monday to Friday 9am to 5pm.

General Enquiries

Integrative Medicine Department at Pathlab on
(+61 3) 8831 3039.

Payment Options

All payments must be made payable to Pathlab.

1. Cheque/Money order
2. Credit Card Payment on attached account sheet.



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INTESTINAL PERMEABILITY PROFILE

Issue Date: 21/03/2007

BEFORE YOU START

If you are under the care of a health care practitioner, testing should be professionally requested and interpreted. Patient self-requested tests are not intended for the purpose of diagnosing illness or disease, but for monitoring of dietary and lifestyle changes. **We cannot perform this test if you are a diabetic with a fasting urine glucose level over 6 mmol/L.**

KIT CONTENTS

- 1x PathLab request form
- 1x payment form
- 1x brown plastic bottle containing Mannitol 1.5g/Lactulose 2.5mL/Glycerol 10mL Adult or
- 1x brown plastic bottle containing Mannitol 0.75g/ Lactulose 1.5mL/Glycerol 5mL Paediatric (Child)
- 1x 2 Litre bottle (compressed, containing Chlorhexidine) for 6 hour urine collection.
- 1x plastic dropper
- 1x plastic tube (10mL, with screw cap)
- 1x Biohazard specimen transport bag
- 1x pre-addressed Lab-Mailer, for sending the Payment, Request Form and Specimens to the laboratory

Check the contents of this collection kit: if any of the items is missing, or you require technical information, please contact the Integrative Medicine Department at PathLab on (+61 3) 8831 3039.



IMPORTANT NOTES

- Read the instructions carefully and familiarize yourself with the test requirements: **failure to follow these instructions may affect your test results.**
- The evening before collecting the sample, start fasting from 11pm; no food and only water to drink.

SAFETY NOTES

Caution! • do not discard the fluid in the bottle • avoid contact of the fluid in the bottle with your eyes or skin (wash the area thoroughly if this occurs) • do not inhale or ingest the fluid in the bottle (contact your healthcare practitioner if this occurs).

lactulose • no contraindications listed • minor abdominal cramps and flatulence may occur.

mannitol • contraindicated where there is clinical or radiological indication of bowel obstruction • minor abdominal cramps may occur • nausea is rare.



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COLLECTION INSTRUCTIONS

1. After rinsing, but before breakfast, empty your bladder into the toilet.
2. Add warm water to the syrup in the brown plastic bottle until it is 3/4 full. Replace the lid firmly and shake the container vigorously to dissolve the white powder.
3. Drink the solution completely: if any residue remains, add more warm water and drink it also.
4. Write the time you drank the mixture on the Request Form and on the label of the urine specimen tube (10mL) **For the following 6 hours, all urine must be collected into the 2 Litre collection bottle.**
5. After taking the drink, you may eat your normal breakfast.
6. Six hours after drinking the mixture, expand the collection bottle by removing the lid, grasping the top and bottom rims of the bottle and pulling until it is fully expanded. Pass all the urine in your bladder into the bottle, replace the cap and mix it thoroughly. Place the bottle on a horizontal surface and read the total urine volume from the graduated scale on the side of the bottle. If the bottle is not fully extended, the urine volume measurement and the test results will be inaccurate.
7. Write the 6 hour urine volume on the Request Form and on the label of the 10 mL urine specimen tube.
8. Using the plastic dropper, transfer 10 mL of well-mixed urine from the bottle into the 10 mL urine specimen tube. Screw the cap on tightly and label the tube with your name, the date and time.
9. Place the tube in the sealable side of the Biohazard bag.
10. Put the completed request form, completed payment form and your payment (cheque, money order or credit card details) into the unsealed section of the transport bag.
11. Place the transport bag in the Lab-Mailer and seal it.
12. Dispose of the remaining urine and the bottle.

SHIPPING/TRANSPORT

Return the package to one of our PathLab collection centres listed on the back of the request slip, or place Lab-Mailer together with request form and credit card payment slip and mail it back to PathLab.

Freight

There are no additional freight costs. A reply mailer has been included for your convenience and complies with the accepted procedure for transport of biological samples within Australia.

For shipping outside of Australia please contact your local practitioner and/or agent. Alternatively contact Pathlab on (+61 3) 8831 3039 to arrange shipment.



RESULTS

Results will normally be available within 7-14 working days of receipt of your samples, payment and completed paperwork. Results will be sent to your nominated healthcare professional.

TEST PRICING

The Intestinal Permeability Test (IP) is not rebateable by Medicare in Australia.

Payment

Payment must be received in FULL for testing to proceed.

Accounts

Accounts enquiries:
(+61 3) 8831 3015 or (+61 3) 8831 3016
Monday to Friday 9am to 5pm.

General Enquiries

Integrative Medicine Department at Pathlab on
(+61 3) 8831 3039.

Payment Options

All payments must be made payable to Pathlab.

1. Cheque/Money order
2. Credit Card Payment on attached account sheet.



IgG FOOD PANEL SCREEN

Issue Date: 21/03/2007

BEFORE YOU START

If you are under the care of a health care practitioner, testing should be professionally requested and interpreted. Patient self-requested tests are not intended for the purpose of diagnosing illness or disease but for monitoring of dietary and lifestyle changes.

KIT CONTENTS

1x	Sterile Swab.
1x	Lancet (one time use only).
2x	Collection Strip.
1x	Zip-Loc Bag.
1x	Bandaid.

IMPORTANT NOTES

- Please read all the instructions carefully before starting.
- Some people may prefer to have a friend help collect the blood sample.
- The small blood sample can be taken from any part of your body, most prefer to take it from their finger or thumb.
- If you have any difficulty – don't worry, just call us at (+61 3) 6831 3039.

INSTRUCTIONS



1. Pull strips out of Zip-Loc bag. Be sure to handle by the blue part only, don't touch the white pad. Set strips on clean surface, pad face up.



2. Wash hands thoroughly in warm water. Run hands under warm water for 1 minute and dry.

3. Choose the tip of finger or thumb and wipe puncture site with swab. Allow to dry, without touching again. Keep the swab handy.



4. For steps 5-7 we strongly recommend having someone assist you, in order to get the best results. Before helping, gloves are to be worn by friends or family assisting with the finger prick.

5. Hold lancet and twist off blue protective cap. (Note. Do not use lancet if protective cap has been previously removed.)



6. Lightly press the lancet against the fingertip and press the blue button. **The lancet automatically retracts after use. No chance for repeat use.**



7. Press the finger firmly from below the puncture site to let out drop of blood. Wipe off the first drop of blood with the alcohol swab and discard.



8. Set collection strips down on clean surface with white pad facing up. Do not touch the white pad at the end of the strip. Squeeze puncture site so that drops of blood drip onto the collection pad. **Collect enough blood so that the white pad is completely soaked with blood and there is no more white on the pad. Repeat this process for the second strip.**



9. Hold the collection strips up to a light source and look on the backside of the pad containing the blood sample. If there is any lightness showing through the pad, the sample will be rejected. The pad must be completely soaked with the blood sample. Set Collection strips down on clean surface, pad face up. **Allow to air dry for 45 to 60 minutes. DO NOT APPLY HEAT!** Place strips back in Zip-Loc bag.

10. Write your name and collection date on the Zip-Loc bag and put it in the Lab-Mailer, together with completed order form.



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SHIPPING/TRANSPORT

Return the package to one of our PathLab collection centres listed on the back of the request slip, or place lab-mailer together with request form and credit card payment slip and mail it back to PathLab.



Freight

There are no additional freight costs. A reply mailer has been included for your convenience and complies with the accepted procedure for transport of biological samples within Australia.

For shipping outside of Australia please contact your local practitioner and/or agent. Alternatively contact Pathlab on (+61 3) 8831 3039 to arrange shipment.

RESULTS

Results will normally be available within 4-6 weeks of receipt of your specimens, payment and completed paperwork. The result will normally be forwarded to the nominated practitioner(s).

Payment

Payment must be received in FULL for test to be performed. Please see payment options available. Also refer to price list.

Accounts

Accounts enquiries:
(+61 3) 8831 3015 or (+61 3) 8831 3016
Monday to Friday 9am to 5pm.

General Enquiries

Integrative Medicine Department at Pathlab on
(+61 3) 8831 3039.

Payment Options

All payments must be made payable to Pathlab.

1. Cheque/Money order
2. Credit Card Payment on attached account sheet.



SALIVA COLLECTION PROCEDURE

Issue Date: 21/03/2007

To ensure accurate test results, please observe the following:

1. If you are using a hormone cream, wash your hands thoroughly with soap and water before beginning.
Creams containing hormones can contaminate the collected specimen.
2. If you are taking hormones by sublingual delivery (under the tongue), ensure that at least 24 hours have passed since sublingual hormone use prior to collecting the specimen.
3. On the day of collection, avoid caffeine, alcohol, and nicotine unless your healthcare provider instructs you otherwise.
4. During the hour prior to saliva collection, **DO NOT** eat, brush or floss your teeth, or use mouthwash.
You may drink water during this time, but wait 5 minutes before collection.
5. Using a ballpoint pen, write your full name, date of birth and the time and date of collection on the label of the collection tube.
6. To collect the sample, rinse your mouth with drinking water before collection. Spit out water completely. Wait at least 5 minutes before proceeding with collection. You may use sugarless chewing gum to assist in saliva production. During collection, do not cough or clear your throat into the collection tube.
7. Avoid touching the rim of the collection tube. Fill the collection tube to the 5.0 ml mark with saliva that is liquid, not foamy. Tap the tube with your fingernail or tap on a hard surface to reduce bubbles.
Insufficient saliva samples cannot be processed, so please ensure adequate sample is collected.
8. Make sure collection time and date are written on every tube and the cap is replaced tightly to avoid leakage. A leaked specimen will make testing impossible and thus require recollection. Wrap the filled tube in the cotton wool. Place the filled tube into the plastic mailer.
9. **Do not freeze.**



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LABORATORY ABBREVIATIONS

BIOCHEMISTRY/ENDOCRINOLOGY	BIOCHEM
HAEMATOLOGY	HAEM
INTEGRATIVE MEDICINE	INTEG
MICROBIOLOGY	MICRO
SPECIMEN RECEPTION/ADMIN	SRA
IMMUNOLOGY/SEROLOGY	IMMUNO

SAMPLE VOLUMES FOR BLOOD SPECIMENS

*Authorised by Dr Ann Read
Issue Date: 7/07/2008*

The optimal sample volume needed for laboratory tests has been defined based on twice the analytical volume of serum or plasma required for laboratory tests plus the dead volume of sample cup, replicates, and secondary tubes.

Clinical Biochemistry/ Endocrinology

For testing 20 analytes, 5 mL of blood is needed. (serum or heparin)

Haematology

FBE/ESR: 2 to 3 mL of EDTA blood (fill to line)

Coagulation

citrated blood (fill **exactly** to line)

Paediatric tubes

Fill to line

Reference

<http://www.ifcc.org/ejifcc/vol13no1/1301200107.pdf>



Test Name	Dept	Specimen	Container	Time	Comments
Abcess Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
ABO Group Rh Antibody/Titre	Blood Bank	Blood	Plain (Red)	Daily	Three I.D.'s required. Label tubes with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
ACE	SRA	Serum	SST	1 week	Fasting preferred, heparin tube also acceptable
ACE (Angiotensin Converting Enzyme)	SRA	Serum	SST (Yellow)	Sent to reference lab weekly	Fasting preferred, heparin tube also acceptable
Acetyl Choline Receptor Ab	SRA	Serum	SST (Yellow)	Sent to reference lab weekly	Recommend specimen reach laboratory within 6 hrs. of collection. Clinical Indications. Diagnosis of Myasthenia Gravis; monitoring disease activity.
Acetyl Choline Receptor antibodies	SRA	Serum	SST		
Acid Fast Bacilli (AFB)	Micro	Sputum	70 ml. Yellow top container	Daily	3 early morning deep cough sputum samples collected on 3 consecutive days. Forward all 3 samples laboratory on third day. Keep at Room Temp.
Acid Fast Bacilli (AFB)	Micro	Early morning Urine	70 ml yellow top container	Daily	3 complete early morning (first void) urine specimens collected on 3 consecutive days are recommended for initial diagnosis. Specimen volume should be 30 -50mL. 24 hour collections are not suitable, due to over growth of non mycobacterial micro-organisms.
Acid Phosphatase	SRA	Plasma	ACD	One Month	Use PSA if Prostatic ACP is requested. Bleed only if requested for Gaucher's
Acid Phosphatase (Total and/or Prostatic)	SRA	Plasma	ACD	1 month	Use PSA if Prostatic ACP is requested. Bleed only if requested for Gaucher's
ACTH (Adrenocorticotrophic Hormone)	SRA	EDTA plasma	EDTA (Purple)	1 week	Morning specimen (8-10AM)preferred
Activated Partial Thromboplastin Time (APTT)	Haem	Blood	Citrate (L. Blue)	Daily	Fill tube to line. Specimen must reach laboratory within 4hrs. of collection.
Activated Protein C Resistance (APCR)	SRA	Blood	Citrate (L. Blue) x 2	Sent to reference lab weekly	Refrigerate. Specimen must reach laboratory within 4 hrs. of collection or contact nearest regional laboratory for advice. Clinical Indications. Deep Vein Thrombosis Pulmonary Embolism Superficial Thrombophlebitis.
Addis Count urine	Micro	12hr Urine	5ltr screw top container.	Daily	12 hr overnight urine collection into plain bottle Refrigerate.
Adenovirus antibodies	SRA	Serum	SST (Yellow)	10 days	Collect acute and convalescent sera 2 weeks apart
Adenovirus serology	SRA	Serum	SST (Yellow)	10 days	Collect acute and convalescent sera 2 weeks apart
Adenovirus Antigen - ROTA Virus	Micro	Faeces		Daily	Fresh faecal sample.



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Test Name	Dept	Specimen	Container	Time	Comments
ADH	SRA	Plasma	2 tubes EDTA (purple)	Monthly	This test is rarely required. Often a more simple test gives more information. Contact Biochemistry.
Adrenal Abs	SRA	Blood	SST (Yellow)	Sent to reference lab.	Clinical Indications. Diagnosis of auto-immune Addison's disease.
Adrenaline (Catecholamines)	SRA	24hr Urine		Sent to ref lab	Acid bottle.
AFB (Acid Fast Bacilli)	Micro	Sputum	70 ml yellow top container	Daily	Refer to Acid Fast Bacilli (AFB)
AIDS Serology Routine testing					Fee is \$20.00. Prepayment is required.
(Acquired Immunodeficiency Syndrome)	Immuno	Blood	SST (Yellow)	Daily	No charge for patients identified on request slip as a high risk group.
ALA (5-aminolaevulinate)	SRA	Spot Urine	70 ml yellow top container	Sent to reference Lab	Protect from light with foil. Spot urine. Refrigerate.
Albumin serum	Biochem	Blood	SST (Yellow)	Daily	
Albumin (microalbumin)	Biochem	12hr Urine 24hr Urine	5ltr screw top container.	Daily	Overnight 12hr or 24hr urine collection. Plain bottle Accurate and complete emptying of the bladder essential.
Albumin (microalbumin)	Biochem	Spot Urine	70 ml yellow top	Daily	Spot urine Early morning (first void) recommended. N.B. Microalbumin is a sensitive index of glomerular damage of particular importance in the early detection of diabetic glomerulopathy.
Alcohol Ethanol (EtOH C ₂ H ₅ OH) clinical	SRA	Blood	Fluoride Oxalate (Grey)	Sent to reference lab	Routine testing with Doctor's Referral.
Alcohol Ethanol (EtOH C ₂ H ₅ OH) legal	SRA	Blood	legal container	Sent to reference lab	RTA (Road Traffic Act) specimen. Prepayment of \$110.00 is mandatory for legal blood alcohol test. Doctor's referral not required.
Alcohol urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	See DRUG SCREEN – URINE
Aldolase	SRA	Blood	SST (Yellow)	Sent to reference lab	
Aldosterone urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.
Aldosterone serum	SRA	Serum	SST (Yellow)	Sent to reference lab	Collect on ice or deliver to lab in 4 hours. Note: If Plasma Renin is also requested on the same referral, both specimens must be collected at the same time.
Alkali Denaturation (HbF)	Haem	Blood	EDTA (Purple)	Weekly	Clinical Indications. Diagnosis and characterisation of the Thalassaemias. See Hb Electrophoresis



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Alkaline Phosphatase Isoenzymes Fractionation	SRA	Blood	SST (Yellow)	Sent to reference lab	Perform only if ALP is greater than 200 U/l.
Alkaline Phosphatase ALP	Biochem	Blood	SST (Yellow)	Daily	Part of Liver Function Test.
Allergy Test	Immuno	Blood	SST (Yellow)	Weekly	If allergens are not specified a general screen is performed on Sample Food mix panels. Information sheet is available from the Laboratory on 8831 3000.
Allergy Testing(RAST)	Immuno	Blood	SST (Yellow)	Weekly	
Allegron (Nortriptyline)	SRA	Blood	Lithium Heparin (Green) (must be GEL free)	Sent to reference lab	Collect pre- dose state time/date of last dose and time/date of collection. Clinical Indications. Major depression
Alpha Fetoprotein	Biochem/ SRA	Blood	SST (Yellow)	Daily	State gestation if applicable. See also DOWN'S SYNDROME RISK
Alpha-1- Antitrypsin - total only	SRA	Blood	SST (Yellow)	Sent to reference lab	Phenotyping must also be requested. See Phenotyping
Alpha-1- Antitrypsin- phenotyping	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Detection of hereditary deficiency. Investigation of early onset emphysema; neonatal hepatitis; juvenile cirrhosis.
Alanine Transaminase ALT (SGPT)	Biochem	Blood	SST (Yellow)	Daily	See LIVER FUNCTION TEST
Aluminium - plasma	SRA	Blood	Special tube	Sent to reference lab	Aluminum-free heparinised tube available from Stores. Collect minimum 5mL. Keep at Room Temp.
Aluminium urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Aluminium urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Amino Acids - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Refrigerate.
Amino Acids - plasma	SRA	Blood	Lithium Heparin (green)	Sent to reference lab	
Aminophylline	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Amiodarone (Cordarone -x)	SRA	Blood	Lithium Heparin (Green) (must be GEL free)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications. Severe tachyarrhythmias unresponsive to other therapy.
Amitriptyline (Tryptanol)	SRA	Blood	Lithium Heparin	Sent to reference	Collect pre- dose. State time/date of last dose and time/date



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Test Name	Dept	Specimen	Container	Time	Comments
			(Green) (must be GEL free)	lab	of collection. Clinical Indications. Major Depression
Ammonia	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Specimen must be taken on ice and separated immediately.
Amoebic Dysentery	Micro	Faeces		Daily	Fresh specimen required.
Amphetamines	Biochem	Spot Urine	70 ml yellow top container	3 x Weekly	Supervised spot urine. Qualitative. See URINE DRUG SCREEN
Amylase urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Amylase urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.
Amylase serum	Biochem	Blood	SST (Yellow)	Daily	
ANA AntiNuclear Antibody/ Factor	Immuno	Blood	SST (Yellow)	Daily	Clinical Indications. Connective Tissue Disease
Anafranil (Chlomipramine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications. Major depression
Anal Swab/Perianal swab	Micro	Charcoal Swab		Daily	Collect in transport medium.
Anatensol (Fluphenazine hydrochloride)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Manifestations of psychotic disorders. Collect pre- dose. State time/date of last dose and time/date of collection.
ANCA Anti Neutrophil Cytoplasmic Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Small Vessel Vasculitis
Androgens - urine	Integ Med	24hr Urine	5ltr screw top container.	Fortnightly	Plain bottle.
Androgens - serum	Biochem	Blood	SST (Yellow)	Daily	
Androstenedione	SRA	Blood	SST (Yellow)	Weekly	Separated and frozen immediately
Angiotensin Converting Enzyme	SRA	Serum	SST	1 week	Fasting preferred, heparin tube also acceptable
Angiotensin Converting Enzyme (ACE)	SRA	Serum	SST (Yellow)	Sent to reference lab weekly	Fasting preferred, heparin tube also acceptable
Antenatal Screen	Blood Bank	Blood	Plain (Red)	Daily	Doctor must specify tests required.
Antibody Identification and/or Titre	Blood Bank	Blood	Plain x2 (Red)	Daily	Include patient history. 3 I.D.'s required. Label tubes with: 1. Full name 2. Date of Birth 3. Signature/Initials of collector.
Antibody (BloodGroup) Screen	Blood Bank	Blood	Plain (Red)	Daily	Include patient history. 3 I.D.'s required. Label tubes with: 1. Full name 2. Date of Birth 3. Signature/Initials of



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Test Name	Dept	Specimen	Container	Time	Comments
					collector.
Antidiuretic Hormone	SRA	Plasma	2 tubes EDTA (purple)	Monthly	This test is rarely required. Often a more simple test gives more information. Contact Biochemistry.
Antimony plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Antimony urine	SRA	Spot Urine	Urine	Sent to reference lab	Random urine.
Antimony urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Anti-Adrenal Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Primary Addison's Disease
Anti -Beta 2 Glycoprotein 1	SRA	Blood	SST (Yellow)	Sent to reference lab	
Anti-Basement Membrane (skin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Bullous Pemphigoid.
Anti-Cardiolipin Ab Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Antiphospholipid Syndrome SLE.
Anti-DNase B ADB	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Rheumatic Fever Glomerulonephritis.
Anti-Ds DNA	Immuno	Serum	Gel	Weekly	Clinical Indications. Systemic Lupus Erythematosus (SLE).
Anti-Diuretic Hormone (ADH)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Tube must be pre-cooled. Deliver to Lab on melting ice for immediate separation at 4 degrees and freezing.
Anti-Endomysial Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Coeliac Disease.
Anti-Gastric Parietal Cell Ab	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications. Pernicious Anaemia.
Anti-Glomerular Basement Membrane (GBM) Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Renal Disease.
Anti-Gliadin IgG & IgA	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications. Coeliac Disease.
Anti-Intercellular Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Pemphigus Vulgaris.
Anti-Intrinsic Factor	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications. Pernicious Anaemia.
Anti-Islet Cell Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	GAD Abs recommended instead.
Anti-Liver Kidney Microsomes	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Autoimmune Liver Disease
Anti-Mitochondrial Ab	SRA	Blood	SST (Yellow)	Sent to reference	Clinical Indications. Primary Biliary Cirrhosis.



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Anti-Myeloperoxidase	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Microscopic Polyangiitis.
Anti-Neutrophil Cytoplasmic Ab (ANCA) Subtypes: Antimyeloperoxidase Antiproteinase 3	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Small Vessel Vasculitis. Wegeners Granulomatosis.
Anti-Nuclear Factor (ANF) Ab/(ANA)	Immuno	Blood	SST (Yellow)	Daily	Clinical Indications. Connective Tissue Disease.
Anti-Parietal Cell Ab	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications. Pernicious Anaemia.
Anti-Phospholipid Abs cardiolipin Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Refrigerate
Anti-Phospholipid Abs lupus anticoagulant	SRA	Blood	Citrate x2 (L. Blue)	Sent to reference lab	Clinical Indications. Antiphospholipid Syndrome SLE.
Anti-Platelet Antibody	SRA	Blood	EDTA X 3 (Purple) and SST (Yellow)	Sent to reference lab	Collect Mon. to Fri. only. Keep at Room Temp. Specimens must arrive at laboratory by 12 midday on day of collection. Notify SRA in advance of specimen despatch.
Anti-Proteinase 3 (Anti-PR3)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Wegeners Granulomatosis.
Anti-Reticulin Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Coeliac Disease.
Anti-Skin Autoantibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Bullous Pemphigoid Pemphigus Vulgaris.
Anti-Smooth Muscle Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Autoimmune Chronic Active Hepatitis.
Anti-Sperm Abs - blood	SRA	Blood	SST (Yellow)	Sent to reference lab	Doctor must specify whether blood or semen collection is required. An appt. is necessary.
Anti-Sperm Abs - semen	SRA	Semen		Sent to reference lab	Direct patient to Royal Women's Hospital for semen testing. Doctors enquiries Ph 03 9344 2691. Patient enquiries Ph. 03 9344 2692. Clinical Indications. Infertility
Anti-Streptolysin O Titre (ASOT)	Biochem	Blood	SST (Yellow)	Weekly	Clinical Indications. Rheumatic Fever Glomerulonephritis
Anti-Striated Muscle Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications. Myasthenia Gravis
Anti-Thrombin III	SRA	Blood	Citrate (Blue)	Sent to reference lab	Refrigerate. Specimen MUST reach laboratory within 4 hrs of collection or contact nearest regional laboratory for advice. Preferred that patient not on heparin therapy.



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Test Name	Dept	Specimen	Container	Time	Comments
					History and therapy must be stated on referral.
Anti-Thyroid Abs (Microsomal and Thyroglobulin)	Immuno	Blood	SST (Yellow)	2 times Weekly	Clinical Indications. Hashimotos Graves Hyperthyoidism.
Anti-Thyroid Receptor Ab	External	Blood	SST (Yellow)	Send to reference lab	Clinical Indications. Graves disease
Anti-Tissue Transglutaminase	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications. Coeliac Disease
Anti-Xa Assay	SRA	Blood		Sent to reference lab	For low dose heparin - contact Haematology Burwood for advice.
APCR	SRA	Blood	EDTA (purple)		
APC Resistance (APCR)	SRA		Citrate (L. Blue) x 2	Sent to reference lab	See ACTIVATED PROTEIN C RESISTANCE
APO A/B/E (Apolipoproteins)	SRA	Blood	SST x 2 (yellow)	2 times Weekly	
APTT (Activated Partial Thromboplastin Time)	Haem	Blood	Citrate (L.Blue)	Daily	Fill to line/exact volume essential. Refrigerate. Specimen MUST reach testing laboratory within 4 hrs of collection.
Arbovirus Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Arsenic Hair	Integ Med	Hair	Hair collection kit	Weekly	Refer to Hair Kit Collection Instructions
Arsenic Urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Arsenic Urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Arsenic Whole blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Ascitic Fluid microscopy/culture - chemistry	Cytology	Ascites	70 ml yellow top container	Daily	Clinical Indications. Investigation of ascites peritoneal fluid collections.
Ascorbic Acid (Vit. C)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays
Aspartate Transferase AST (SGOT)	Biochem	Blood	SST (Yellow)	Daily	
Aspergillus Allergens	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Bronchopulmonary Aspergillosis
Aspergillus precipitins (Serology)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Atypical Pneumonia Serology	SRA	Blood	SST (Yellow)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
Chlamydia				lab	
Atypical Pneumonia Serology Legionella	SRA	Blood	SST (Yellow)	Sent to reference lab	
Atypical Pneumonia Serology Mycoplasma	SRA	Blood	SST (Yellow)	Sent to reference lab	
Autoimmune Serology	Immuno	Blood	SST (Yellow)	Test Dependent	Tests must be specified.
Autoantibody Screen	Immuno	Blood	SST (Yellow)	Daily (ANF)	If specific antibodies are not requested and no clinical notes provided ANF is performed.
Autologous and Donor Directed Transfusion	Blood Bank	Blood			Contact Lab for advice on 8831 3000
Avians Precipitins Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	Specify which birds.
B and T Cells (flow cytometry)	SRA	Blood	Lithium Heparin (Green) & EDTA (Purple)	Sent to reference lab	Collect Mon to Thurs only.
B1 Vitamin	SRA	Blood	Lithim Heparin (Green)	Sent to reference lab	Wrap in foil, protect from light. Send with next courier. Avoid transport delays.
B12 Absorption Test (Schilling Test)	Biochem				No longer performed. Recommend Intrinsic Factor Abs and Gastric Parietal Cell Abs instead.
B12 Vitamin (Cobalamin)	Biochem	Blood	SST (Yellow)	Daily	Overnight fast recommended but not critical.
B2 Vitamin					No longer available.
B6 Vitamin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Barbiturates	SRA	Serum	70 ml yellow top container	Daily	See DRUG SCREEN – URINE
Barmah Forest Virus Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Basement Membrane Ab (Skin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Bullous Pemphigoid.
Bence Jones Protein	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. First morning void preferred. Can be done on plain 24hr urine if requested. Clinical Indications Multiple Myeloma.
Benzene whole blood	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Must be full tube. Collect post work shift. Environmental toxin.
Benzene - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.



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Test Name	Dept	Specimen	Container	Time	Comments
Benzodiazepines	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine. Supervised. See DRUG SCREEN - URINE
Beryllium urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Beryllium urine	SRA	24 hour urine	5ltr screw top container.		Acid-washed Bottle
Betacarotene	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil.
Beta HCG serum qualitative	Biochem	Blood	SST (Yellow)	Daily	
Beta HCG serum quantitative	Biochem	Blood	SST (Yellow)	Daily	
Beta Hydroxybutyrate	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Beta2Microglobulin Serum	SRA	Blood	SST (Yellow)	Sent to reference lab	
Beta2Microglobulin Urine					No longer performed
Beta2 Transferrin	SRA	SuspectedC SF	70 ml yellow top container	Sent to reference lab	
Betaloc (Metoprolol)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Cardioselective β 1-Blocker.Hypertension; angina pectoris.
Bicarbonate (HC03)	Biochem	Blood	SST (Yellow)	Daily	
Bile Salts/Acids	SRA	Blood	SST (Yellow)	Sent to reference lab	
Blood Glucose					See GLUCOSE
Bilharzia Serology	SRA	Blood	SST (Yellow)	Daily	Schistosomiasis.
Bilharzia - urine	SRA Micro	Spot Urine	70 ml yellow top container	Daily	Terminal (final void) urine. Collect in sterile yellow top container between 12 midday and 3pm. Refrigerate.
Bilirubin - urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine by urine dipstick procedure
Bilirubin (Neonatal) Total and/or Direct (Conjugated)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect in microtainer paediatric tube. Protect from light. Wrap in foil. Contact laboratory for further instructions on 8831 3000. (Mark URGENT)
Bilirubin Adult Total and/or Direct (Conjugated)	Biochem	Blood	SST (Yellow)	Sent to reference lab	Protect from light. Wrap in foil.
Bird Fanciers Disease	SRA	Blood	SST (Yellow)	Sent to reference lab	Specify which birds. (see Avians Precipitins)



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Test Name	Dept	Specimen	Container	Time	Comments
Bleeding Time					Test no longer performed.
Blood Alcohol medical/legal					See ALCOHOL ETHANOL
Blood Culture	Micro	Blood	Blood Culture set	Daily	Refer patient to any collection Centre. N.B. 3 Sets of blood cultures are required for adequate investigation of suspected bacteraemia /septicaemia. Do not refrigerate.
Blood Film	Haem	Blood	EDTA (Purple)	Daily	
Blood Group Adult	Blood Bank	Blood	Plain (Red)	Daily	Possible x match three I.D.'s required. N.B. Collect EDTA (Purple) tube for Haemoglobin level. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Blood Group Antibodies	Blood Bank	Blood	SST (Yellow)	Daily	Label tube with 1. Full Name 2. Date of Birth 3. Signature of collector.
Blood Group Cord	Blood Bank	Blood	Plain (Red)	As requested	Antibody screen performed over 6 months old. Cord blood must be clearly identified.
Blood Group and Hold (Retain) Serum	Blood Bank	Blood	Plain (Red)	Daily	Possible x match three I.D.'s required. N.B. Collect EDTA (Purple) tube for Haemoglobin level. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Blood Group Antibodies	Blood Bank	Blood	Plain (Red)	Daily	Three I.D.'s. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Blood Group & Antibodies	Blood Bank	Blood	Plain (Red)	Daily	Three I.D.'s. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Blood Viscosity plasma	SRA	Blood		Sent to reference lab	Contact SRA before collection.
Blood Sugar	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	Note Fasting/Random and time of collection.
Blood Transfusion	Blood Bank	Blood	Plain (Red) x2 AND EDTA (pink)	As requested	See TRANSFUSION for essential requirements.
Boil Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
Bone Marrow Biopsy					Contact the laboratory on 8831 3000 for instructions.
Bordetella Pertussis Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	Please indicate duration of symptoms and history of pertussis vaccination.
Bordetella Pertussis Culture	SRA	Charcoal Swab		Sent to reference lab	For B. pertussis PCR, any respiratory sample is suitable. This test should be indicated on request form.



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Test Name	Dept	Specimen	Container	Time	Comments
Borrelia Burgdorferi Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Suspected Lyme disease.
BNP (Brain Natriuretic Peptide)	SRA	Blood	SST (Yellow)	Sent to reference Lab	
Breast Nipple Discharge for Cytology	Cytology	Body Fluid	70 ml yellow top container	As requested	Direct smear for cytology. Fix immediately with cytospray. If sufficient discharge prepare another smear and allow to air dry. Label slides F (fixed) and AD(air dried) Clinical notes required.
Bromide plasma	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Brucella Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
C14 Urea Breath Test	Integ Med	Breath sample	Balloon	As requested Daily	Test performed at any Collection Centre. Contact nearest centre for details & supply of kits
C1 Esterase Inhibitor	SRA	Blood	SST (Yellow)	Sent to reference lab	Send with next courier. Avoid transport delays. Clinical Indications Investigation of Angio-oedema.
CA 19.9	SRA	Blood	SST (Yellow)	Sent to reference lab	Tumour marker. Clinical Indications Pancreatic cancer some ovarian cancers. Differentiates pancreatic from upper G.I. tract cancers
CA125	Biochem	Blood	SST (Yellow)	Twice Weekly	Tumour marker. Clinical Indications Ovarian cancer.
CA15.3	SRA	Blood	SST (Yellow)	Sent to reference lab	Tumour marker. Clinical Indications Breast cancer.
Cadmium Hair	Integ Med	Hair	Hair collection kit	Weekly	See Hair Kit for Collection Instructions
Cadmium Blood	SRA	Blood	Sodium Heparin (Dark Blue)	Weekly	
Cadmium Urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Cadmium Urine	SRA	24 hour urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Caeruloplasmin (copper oxidase)	SRA	Blood	SST (Yellow)	Daily	
Caffeine	SRA	Blood	SST (Yellow)	Sent to reference lab	
Calciferol (Vitamin D)	Integ Med	Blood	SST (Yellow)	Daily	
Calcitonin	SRA	Blood	SST (Yellow)	Sent to reference	Send with next courier on ice. Avoid transport delays.



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Calcium (corrected)	Biochem	Blood	SST (Yellow)	Daily	No tourniquet.
Calcium serum	Biochem	Blood	SST (Yellow)	Daily	No tourniquet as far as possible.
Calcium ionised	SRA	Blood	Anaerobic plain tube OR special balance Heparin tube	Sent to reference lab	Send separate sealed tube. Collect Mon to Thurs only.
Calcium urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Random urine.
Calcium urine	Biochem	24hr urine	5ltr screw top container.	Daily	Acid bottle.
Calcium/Creatinine ratio	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine -usually for paediatric patients.
Calculi renal	SRA	Calculi	70 ml yellow top container	Sent to reference lab	Forward specimen in dry sterile yellow top container.
Calculi other	SRA	Calculi	70 ml yellow top container	Sent to reference lab	
Cannabinoids	Biochem	Spot Urine	70 ml yellow top container	3 times weekly	Supervised spot urine. See DRUG SCREEN - URINE
Carbamazepine (Tegretol)	Biochem	Blood	SST (Yellow)	Daily	Collect specimen pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Epilepsy
Carbohydrate Deficient Transferrin (CDT)	SRA	Blood	SST (Yellow)	Sent to reference lab	Forward to laboratory with next courier avoid transport delays. .N.B. Test is not Medicare rebatable. Under no circumstances can the episode in part or full be direct billed to Medicare. 1. If requested as single test payment is required at time of test
Carbon Monoxide	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Mon to Thurs only
Carboxyhaemoglobin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Mon to Thurs. only.
Carcinoembryonic Antigen (CEA)	Biochem	Blood	SST (Yellow)	Daily	Clinical Indications Recurrence of bowel cancer.
Cardiac Enzymes (CK) - Troponin	Biochem	Blood	SST (Yellow)	Daily	Comprise Creatine Kinase and Troponin. See also TROPONIN I
Cardiac Event Recording Holter Monitor	SRA	Holter Monitor		As requested	Appt. is necessary. Call the Laboratory on 8831 3000.



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Test Name	Dept	Specimen	Container	Time	Comments
Cardiac Event Recording	SRA	ECG		As requested	Clinical Indications Aid in diagnosis of heart disease where intermittent transient symptoms of syncope dizziness or brief palpitations are experienced.
Cardiolipin Antibody	SRA			Sent to reference lab	See ANTI CARDIOLIPIN ANTIBODY
Carotene	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil.
CASA (Cancer Associated Serum Antigen)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Ovarian cancer.
Cat Scratch Fever Abs	SRA	Blood	SST (Yellow)	Sent to reference lab	
Catecholamines	SRA	24hr urine	5ltr screw top container.	Sent to reference lab	Acid bottle. Please provide list of concurrent drugs.
Cephalexin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Trough level Collect pre- dose. State time/date of last dose and time/date of collection. Peak level - oral 1 hr post dose.
Cervical Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium
Chagas Antibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Suspected American Trypanosomiasis
Chicken Pox (Varicella Zoster) Abs	Immuno	Blood	SST (Yellow)	IgM Sent to reference lab - IgG In house daily	
Chlamydia Pneumoniae by PCR - C. pneumoniae PCR	SRA	Respiratory Specimen	70 ml swab/sputum	Sent to reference lab	Sputum in yellow top container/plain swab.
Chlamydia Trachomatis PCR antigen	Micro	Chlamydia Swab		Daily	PCR Method. Plain Dry Swab available from Stores. Site of swab must be specified on request form. e.g. eye urethral
Chlamydia Trachomatis antibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	
Chlamydia Trachomatis urine (by PCR)	Micro	Spot Urine	70 ml yellow top container	Daily	5-10 mL First catch urine (at least two hr after urine was last passed) into sterile urine container. Refrigerate. If only one specimen is provided for chlamydia and microculture the preferred specimen is mid -stream urine.
Chloride Cl - serum	Biochem	Blood	SST (Yellow)	Daily	
Chloride Cl - urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.



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Test Name	Dept	Specimen	Container	Time	Comments
Chlorpromazine (Largactil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre dose. State time/date of last dose and time/date of collection.
Cholesterol	Biochem	Blood	SST (Yellow)	Daily	Recommended fasting period of 10 hrs.
Cholesterol & Triglycerides	Biochem	Blood	SST (Yellow)	Daily	Recommended fasting period of 10 hrs.
Cholesterol Triglycerides and HDL/LDL ratio	Biochem	Blood	SST (Yellow)	Daily	For requests for Lipid Studies or Lipid Profile the HDL/LDL ratio must be specified if requested.
Cholinesterase red Cell	SRA	Blood	EDTA (Purple)	Sent to reference lab	To assess suspected exposure to organophosphate insecticides. Clinical notes required.
Cholinesterase plasma	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Clinical Indications Scoline/suxamethonium screen prior to anaesthesia. Includes Dibucaine and Fluoride numbers.
Chromium Cr - Hair	Integ Med	Hair	Hair collection kit	Weekly	Contact Stores for Hair Kit Collection
Chromium Cr - whole blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Chromium Cr - plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Chromium - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Chromium - 24 hour urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle
Chromosome Studies (Karyotype)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Mon to Thurs only.
Chromosome Philadelphia	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Citrate Urine	SRA	24 Hour Urine	70 ml yellow top container	Sent to reference lab	Not performed off a spot urine – unsuitable
Citrate Urine	SRA	24hr Urine	5ltr screw top container	Sent to reference lab	Plain bottle.
Clobazam (Frisium)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Anxiety disorders
Clomipramine (Anafranil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre dose. State time/date of last dose and time/date of collection.
Clonazepam (Rivotril)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre dose. State time /date of last dose and time/date of collection. Clinical Indications Epilepsy
Clostridium Difficile Toxin	SRA	Faeces		Sent to reference lab	Fresh sample. Culture and/or toxin. (No Preservatives)



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Test Name	Dept	Specimen	Container	Time	Comments
Clozapine (Clozaril)	SRA	Blood	Lithium Heparin (Green) (Must be GEL FREE)	Sent to reference lab	Collect immediately pre dose. State time/date of last dose and time/date of collection.
CMV (Cytomegalovirus) Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Coagulation Profile (PT and APTT)	Haem	Blood	Citrate (Blue)	Daily	Specimens MUST reach laboratory within 4 hrs of collection. Refrigerate.
Cobalt urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Cobalt urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Cobalt blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Cocaine	Biochem	Spot Urine	70 ml yellow top container	3 times Weekly	Supervised spot urine. See DRUG SCREEN URINE
Coeliac Disease Screen	Immuno	Blood	SST (Yellow)	Weekly	Gliadin Abs and Transglutaminase Abs.
Co Enzyme Q10	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Wrap in foil to protect from light. Send with next courier. Avoid transport delays.
Cold Agglutinins	SRA	Blood	Clot (red)	Sent to reference lab	Collect at laboratory site only. Prewarm all equipment. Must be collected and kept at approx.37°C. Contact laboratory for advice before collection.
Collagen Antibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Polychondritis
Complement Components C3 C4	Biochem	Blood	SST (Yellow)	3 times Weekly	Send with next courier. Avoid transport delays. Clinical Indications Determination of complement activation e.g. SLE Immune complex disease.
Complement Components C1q and C2	SRA	Blood	SST (Yellow)	Sent to reference lab	Send with next courier. Avoid transport delays. Clinical Indications Monitor/track progress of diseases such as SLE Urticarial vasculitis.
Complement Total/Full Studies	SRA	Blood	SST (Yellow)	Sent to reference lab	Send with next courier. Avoid transport delays. May include C3 C4 C1q CH50 CH100. .
Conjunctival (eye) swab microscopy /culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
Coombs Test Direct Antiglobulin	Blood Bank	Blood	EDTA (pink)	Daily	Three I.D.'s. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector



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Test Name	Dept	Specimen	Container	Time	Comments
Coombs Test Indirect Antiglobulin		Blood	Plain (red)	Daily	Three I.D.'s. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Copper - Hair	Integ Med	Hair	Hair collection kit	Weekly	Contact Stores for Hair Kit Collection
Copper - serum/plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Copper - red cell	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Copper Urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Copper Urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Copper Oxidase	SRA	Blood	SST (Yellow)	Daily	Caeruloplasmin.
Cordarone – x					See AMIODARONE
Cord Blood (blood group and direct coombs)	Blood Bank	Blood	Plain (Red) plus an EDTA (purple)	Daily	Sample must be clearly labelled 'Cord Blood'. If mother Rh Neg please supply Maternal sample
Corticosteroids	Integ Med	24hr Urine	5ltr screw top container.	Fortnightly	Plain bottle.
Cortisol - 24 hour urine	Integ Med	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Cortisol - serum AM	Biochem	Blood	SST (Yellow)	Daily	Collect between 8 and 10 AM
Cortisol - serum PM	Biochem	Blood	SST (Yellow)	Daily	Collect between 3 and 5 PM.
Cortisol - Saliva	Integ Med	Saliva	5 ml white top container	Daily	For single collection, collect between 6-8AM For Adrenal Stress Profile collect samples at 8AM, 12NOON, 4 PM, 8PM
Cortisol - Random	Biochem	Blood	SST (Yellow)	Daily	Collect any time
Cotinine - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Nicotine derivative.
Coxiella Burnetti (Q Fever)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Coxsackie B Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
C-Peptide (C terminal of Insulin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Send with next courier. Avoid transport delays.
C-Reactive Protein CRP	Biochem	Blood	SST (Yellow)	Daily	



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Test Name	Dept	Specimen	Container	Time	Comments
Creatine Phosphokinase - Creatine Kinase (CK CPK) total isoenzymes	Biochem	Blood	SST (Yellow)	Daily	Clinical Indications Diagnosis and monitoring of diseases affecting skeletal muscle.
Creatine Phosphokinase - Creatine Kinase (CK CPK) (fractionation CK-MB)	Biochem	Blood	SST (Yellow)	Daily	
Creatinine - serum	Biochem	Blood	SST (Yellow)	Daily	
Creatinine - 24 hour urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Creatinine - urine	Biochem	Spot Urine	70 ml yellow top container	Daily	
Creatinine Clearance	Biochem	24hr Urine & Blood	SST (Yellow) AND 5ltr screw top container.	Daily	Plain bottle. Collect blood within 24 hrs of urine collection.
Crossmatching (XMatch)	Blood Bank	Blood	Plain (Red)x2 AND EDTA (pink)	As requested	See TRANSFUSION for essential requirements.
Cryofibrinogen	SRA	Blood	EDTA (Purple) CLOT (Red)	As requested	Collect at laboratory only. Contact laboratory for information.
Cryoglobulins	SRA	Blood	EDTA (Purple) CLOT (Red)	As requested	Collect at laboratory only. Contact laboratory for information.
Cryoproteins	SRA	Blood	EDTA (Purple) CLOT (Red)	As requested	Collect at laboratory only. Contact laboratory for information.
Cryptococcus Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	
CVC (Central Venous Catheter)					See SWABS WOUND
Cyanide	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Cyclosporin A	SRA	Blood	EDTA (Purple)	Sent to reference lab	Collect pre-dose 8 hrs. post dose or at peak times (2 hrs. post dose) depending on doctor's preference. State time/date of last dose and time/date of collection.
Cystine - Urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.
Cystine - Urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Refrigerate.
Cysts Ova in Faeces	Micro	Faeces	Brown lid container with	Daily	See page 12



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Test Name	Dept	Specimen	Container	Time	Comments
			SAF		
Cysticercosis Serology	SRA	Blood or CSF	SST (Yellow)	Sent to reference lab	Clinical Indications Cysticercosis from Taenia solium
Cytology body fluids	Cytology	Fluid/washings	70 ml yellow top container	Daily	Ovarian cyst/peritoneal/lung and hydroceal.
Cytology lymph nodes/breast cysts/lumps	Cytology	FNA	70 ml yellow top container	Daily	Appt. required. Contact Patient Centre Head Office for booking on 8831 3000.
Cytology Pap smear	Cytology	Cx smear	PAP KIT	Daily	
Cytology Urine	Cytology	Spot Urine	70 ml yellow top container	Daily	Collection instructions available from any collection centre
Cytology Sputum	Cytology	Sputum	70 ml yellow top container	Daily	Collection instructions available from any collection centre
Cytomegalovirus (CMV) Ab	Micro	SRA	SST (Yellow)	Sent to reference lab	
Cytomegalovirus Culture	SRA			Sent to reference lab	See CMV CULTURE
Cytotoxic Abs	SRA	Blood	CLOT (red) or SST (yellow)	Sent to reference lab	
D-dimer (XDP)	Haem	Blood	Citrate (L.Blue)	Daily	Refrigerate. Specimen MUST reach laboratory within 4hrs of collection. Clinical Indications Investigation of possible acquired bleeding disorder when DIC suspected.
Dehydroepiandrosterone Sulphate (DHEAS) Serum	Biochem	Blood	SST (Yellow)	3 times Weekly	
DHEAS, Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Dengue Fever	SRA	Blood	SST (Yellow)	Sent to reference lab	
Deoxyypyridinoline (DPD)	Integ Med	Urine	70 ml yellow top container	Weekly	20 mL first am urine.
Desipramine (Pertofran)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre - dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression
Diamox (Acetazolamide)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre-dose. State time/date of last dose and time/date of collection. Clinical Indications Glaucoma
Diabetes Insipidus Screen	Biochem/ SRA	Blood and Urine	SST (Yellow) and 70 ml yellow top container	As requested	Fast 10 hrs. First void urine. Includes serum and urine osmolality serum and urine sodium and potassium levels.



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Test Name	Dept	Specimen	Container	Time	Comments
Diazepam (Valium)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre - dose. State time and date of last dose and time/date of collection.
Dibucaine Number	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	See CHOLINESTERASE PLASMA
DIC Screen	Haem	Blood	Citrate (L. Blue) x 2 EDTA (Purple)	Daily	Screen comprises FBE PT APTT Fibrinogen and D/Dimer. All tests must be requested
(Disseminated Intravascular Coagulation)					See DIC Screen
Differential Count (DIFF)	Haem	Blood	EDTA (Purple)	Daily	See LEUCOCYTE DIFFERENTIAL COUNT
Digoxin (Lanoxin)	Biochem	Blood	SST (Yellow)	Daily	Trough level. Collect at least 6-7 hrs post dose. State time/date of last dose and time/date of collection.
DDT/Dieldrin	SRA	Blood	SST (Yellow)	Sent to reference lab	Organochlorine pesticides. Provide patient exposure details.
Dilantin (Phenytoin)	Biochem	Blood	SST (Yellow)	Daily	Collect pre- dose but sampling time is not critical. Recommend regular collections be sampled at same time for consistency. State time/ date of last dose and time/ date of collection. Clinical Indications Epilepsy
Diphtheria Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Dipstick urine	Micro	Spot Urine	70 ml yellow top container	Daily	pH protein glucose blood
Direct Antiglobulin Test (Coombs)	Blood Bank	Blood	EDTA (Pink)	Daily	
Disopyramide (Rythmodan)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
DNA Abs					See ANTI DsDNA ABS
DNA Paternity Testing	SRA	Blood		By appointment	Contact Laboratory on 8831 3000
Dnase B ADB					See ANTI DNASE B
Donor-Directed Transfusion	Blood Bank	Blood			Contact Blood Bank Burwood for advice.
Dopamine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid bottle. Part of Catecholamine investigation. Forward questionnaire.
Dothiepin (Prothiedin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre -dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression



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Test Name	Dept	Specimen	Container	Time	Comments
Doxepin (Deptran)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression
Downs Syndrome (See Maternal Screening)	SRA	Serum	SST (Yellow)	One Week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Downs Syndrome Risk Triple test	SRA	Serum	SST (Yellow)	One week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Downs Syndrome Risk Quadruple test	SRA	Serum	SST (Yellow)	One Week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
1st Trimester Screen	SRA	Blood	SST (Yellow)	Sent to reference lab	
DPD/Creatinine ratio	SRA	Urine	70 ml yellow top container	Weekly	See TESTING FOR DEOXYPYRIDINOLINE IN BONE DISEASE
Drug Screen - Urine	Biochem	Spot Urine	70 ml yellow top container	3 times Weekly	Qualitative assays of drugs. Spot urine. All presentations must be adequately supervised and the accompanying documentation thoroughly checked. Routine screen includes Opiates Sympathomimetic Amines Benzodiazepines Cannabinoids Methadone Metabolites Cocaine
Drug Screen and Urinary Alcohol	SRA/ Biochem	Spot Urine	70 ml yellow top container	Sent to reference lab	N.B. Urinary alcohol level is only included if specifically requested.
Dysmorphic Erythrocytes	Micro	Spot Urine	70 ml yellow top container	Daily	Fresh mid stream urine specimen. Taken on the spot and refrigerated as soon as possible.
E1 (Estrone)	Integ Med	Saliva	5 ml white top container	Daily	Collect 6-8AM
E1 (Estrone)	Integ Med	24hr Urine	5ltr screw top container.	Weekly	
E2 (Estradiol/Oestradiol)	Integ Med	Saliva	5 ml white top container	Daily	Collect 6-8AM
E2 (Estradiol/Oestradiol)	Integ Med	24hr Urine	5ltr screw top container.	Weekly	



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Test Name	Dept	Specimen	Container	Time	Comments
E2 (Estradiol/Oestradiol)	Biochem	Blood	SST (Yellow)	Daily	Patient must not be pregnant.
E3 (Estriol)	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle. State gestational period. Patient must be pregnant.
E3 (Estriol/Oestriol)	SRA	Blood	SST (Yellow)	Daily	Patient must be pregnant.
E3 (Estriol/Oestriol)	Integ Med	Saliva	5 ml white top container	Daily	Collect 6-8AM
Ear Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
EBV (Epstein Barr Virus) Serology	Serology	Blood	SST (Yellow)	3 times a week	Clinical Indications Infectious Mononucleosis.
ECG Event Recording					See CARDIAC EVENT RECORDING
Electrocardiogram ECG	SRA	ECG		Daily	Performed at all Pathlab Collection Centres. Appointment is not necessary.
Electrolytes urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle. Indication nutritional studies
Electrolytes urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine.
Electrolytes serum	Biochem	Blood	SST (Yellow)	Daily	Sodium Potassium Chloride Bicarbonate N.B. Recommend specimen reach testing laboratory within 4 hrs of collection. Delayed centrifugation may lead to elevated potassium levels.
Elastin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Electrophoresis (EPG) serum protein	SRA	Blood	SST (Yellow)	Sent to reference lab	
Electrophoresis (EPG) urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Fresh early am spot urine recommended.
Electrophoresis (EPG) CSF	SRA	CSF	CSF	Sent to reference lab	See CEREBROSPINAL FLUID
Electrophoresis (EPG) Haemoglobin	SRA	Blood	EDTA (Purple)	Sent to reference lab	
Electrophoresis (EPG) Immuno	SRA	Blood	SST (Yellow)	Sent to reference lab	
Electrophoresis (EPG) Lipoprotein	SRA	Blood	SST (Yellow)	Sent to reference lab	
Endomysial Antibody					See ANTI ENDOMYSIAL AB
Enterovirus culture	SRA	Faeces		Sent to reference	Collect in sterile white/brown faecal container.



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Eosinophil Count	Haem	Blood	EDTA (Purple)	Daily	
Eosinophils (smear)	Micro	Smear	Glass slide	Daily	Plain sterile swab used to collect material from conjunctiva nasal discharge or sputum then rolled onto clean glass slide and air dried.
Epilim (Valproate)	Biochem	Blood	SST (Yellow)	Daily	Collect specimen pre dose. State time/date of last dose and time/date of collection.
Epstein-Barr EB Virus Ab	Immuno	Blood	SST (Yellow)	3 x Weekly	
Erythrocyte Sedimentation Rate ESR	Haem	Blood	EDTA (Purple)	Daily	
Erythropoietin	SRA	Blood	SST (Yellow)	Sent to reference lab	Forward with next courier. Avoid transport delays.
Essential Fatty Acids	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Forward with next courier. Avoid transport delays.
Esterase Inhibitor C1					See C1 ESTERASE INHIBITOR
Ethanol					See ALCOHOL ETHANOL
Ethosuximide (Zarontin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Petit mal epilepsy.
Etiocolanolone Studies (Steroids)	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle. Steroid must be specified.
Extended Fast Test for Hypoglycaemia	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	Refer patient to any Pathlab Collection Centre.
Extractable Nuclear Antigen ENA	Immuno	Blood	SST (Yellow)	Weekly	Comprises RNP Sm La Ro Sc170 Jol. See ANTI Ds/DNA/ENA
Eye Swabs microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
Factor Assays (VIII IX Von Willebrands)	SRA	Blood	Citrate (L.Blue) x2	Sent to reference lab	Refrigerate. Fill tubes to line exactly. Recommend specimens reach Laboratory within 4 hrs of collection. Collect Mon-Thur.
Factor V Leiden	SRA	Blood	EDTA (purple)		
Factor V Leiden (DNA test)	SRA	Blood	Citrate (L.Blue) x1 Edta x 1	Sent to reference lab	Refrigerate. Fill tube to line exactly. Recommend specimen reaches Laboratory within 4 hrs of collection. N.B. Activated Protein C Resistance (APCR) screening test is mandatory before this test is performed.
Faecal Fat	SRA	Faeces	72 hour collection	Sent to reference lab	Collect in pre-weighed tin over 3 days. Patient instructions and Container are available from Pathlab.



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Test Name	Dept	Specimen	Container	Time	Comments
Faecal Occult Blood	Micro	Faeces		Daily	Patient instructions available from Pathlab Stores. See page 15.
Faeces Reducing Substances/Sugars	Micro	Faeces		Daily	Fresh specimen Freeze immediately. N.B.Recommend labelled specimen be placed in sealable section of two part biohazard and freeze. When frozen transport specimen to nearest Collection Centre. See Page 13
Faeces Threadworm (Pinworm)	Micro	Faeces	Cellotape Preparation	Daily	Special requirements. Refer patient to any Pathlab Collection Centre.
Faeces Micro & Culture Viral Studies (Rotavirus)	Micro	Faeces		Daily	Recommend specimen reach laboratory on same day collected. Keep at Room Temp. The number of specimens to be tested must be stated on the original referral. See page 12
Faeces Microscopy only (Ova Cysts Parasites)	Micro	Faeces	Brown lid container with SAF	Daily	Recommend specimen reach testing laboratory on same day collected. The number of specimens to be tested must be stated on the original referral.
Faeces Porphyrin screen	SRA	Faeces		Sent to reference lab	Collect in sterile brown/white container or sterile yellow top urine container(foiled). Refrigerate.
Faeces Tryptic activity	SRA	Faeces		Sent to reference lab	Collect in sterile brown/white container or sterile yellow top urine container (foiled). Refrigerate.
Faeces – Fat Globules / Fatty acid crystals	Micro	Faeces	White lid container without preservative	Daily	Fresh faecal sample (minimum1g) collected in sterile container. Keep at Room Temp.
FBC (Full Blood Count)					See FULL BLOOD EXAMINATION
Fatty Acids					Contact Doctor to clarify specimen required.
FBE					See FULL BLOOD EXAMINATION
Ferritin - serum	Biochem	Blood	SST (Yellow)	Daily	
Fe Iron - serum	Biochem	Blood	SST (Yellow)	Daily	
Fe Iron - 24 hour urine	SRA	24 hr Urine	5ltr screw top container.	Daily	Acid bottle.
Fe Iron - urine	SRA	Spot Urine	70 ml yellow top container	Daily	Random urine.
Ferritin red cell	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Fibrin (ogen) Degradation Products (FDP)	Haem	Blood	Citrate (L.Blue)	Daily	Refrigerate. Recommend specimen reach testing laboratory within 4 hrs of collection.



Test Name	Dept	Specimen	Container	Time	Comments
Fibrinogen	Haem	Blood	Citrate (L.Blue)	Daily	Refrigerate. Recommend specimen reach testing laboratory within 4 hrs of collection.
Filaria Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Fine Needle Aspiration Cytology	Cytology	Body Fluid	70 ml yellow top container	Daily	Contact the head office laboratory on 8831 3000 to arrange an appointment with a pathologist.
First Trimester Screen (See Maternal Screening)	SRA	Serum	SST Yellow	One Week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
FK506 (Tacrolimus)	SRA	Blood	EDTA (Purple) x2	Sent to reference lab	Collect pre-dose or 8 hrs. post dose. State time/date of last dose and time/date of collection.
Flavivirus Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Flecainide (Tambocor)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Supraventricular arrhythmias
Flu A and B serology	SRA	Blood	SST (Yellow)	Daily	
Flucloxacillin	SRA	Blood	SST (Yellow)	Sent to reference lab	Trough level - Collect pre- dose. State time/date of last dose and time/date of collection. Peak level - oral -1 hr post dose.
Flucytosine (Ancotil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Peak level - Collect 2 hrs post dose. State time/date of last dose and time/date of collection. Clinical Indications Monitor for bone marrow toxicity
Flunitrazepam (Rohypnol)	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Fluorescent Treponemal Antibody (FTA)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Confirmation of positive Syphilis IgG
Fluoride serum/plasma	SRA	Blood	SST (Yellow)	Sent to reference lab	Do not collect in fluoride/oxalate tube.
Fluoride - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random.
Fluoxetine (Prozac)	SRA	Blood		Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression
Fluoride Number	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	See CHOLINESTERASE- PLASMA



Test Name	Dept	Specimen	Container	Time	Comments
Fluphenazine Hydrochloride	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Foetal Haemoglobin	SRA	Blood	EDTA (Purple)	Sent to reference lab	Kleihauer test. Maternal blood. 2 I.D.'s reqd. Label tubes with Full Name and DOB.
Folate red cell	Biochem	Blood	EDTA (Purple)	Daily	Recommended fasting specimen but not critical.
Folate serum	Biochem	Blood	SST (Yellow)	Daily	
Folic Acid serum	Biochem	Blood	SST (Yellow)	Daily	Recommended fasting specimen but not critical.
Follicle Stimulating Hormone (FSH)	Biochem	Blood	SST (Yellow)	Daily	Reference range applies except in midcycle for females.
FragileX Chromosome	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Monday to Thursday only.
Free Androgen Index	Biochem	Blood	SST (Yellow)	Daily	Calculation using Testosterone and SHBG results.
Free Cortisol	Integ Med	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Free Fatty Acids	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Forward to lab with next courier. Avoid transport delays.
Free Triiodothyronine (Free T3)	Biochem	Blood	SST (Yellow)	Daily	
Free Triiodothyronine (Free T3)	Integ Med	24hr Urine	5ltr screw top container.	Weekly	
Free Thyroxine (FT4)	Biochem	Blood	SST (Yellow)	Daily	Please supply clinical indication.
Free Thyroxine (FT4)	Integ Med	24hr Urine	5ltr screw top container.	Weekly	
Frisium (Clobazam)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time date last dose and time/date of collection.
Fructosamine	SRA	Blood	SST (Yellow)	Sent to reference lab	
FTA Abs (Fluorescent Treponemal Antibody Absorption Test)	Micro	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Confirmation of positive Syphilis IgG
Full Blood Examination FBE	Haem	Blood	EDTA (Purple)	Daily	Comprises Haemoglobin Haematocrit (PCV) Red Cell count White cell count differential fix film and Platelet count.
Fungal Examination	Micro	Skin Scraping/ Nail clipping	70 ml yellow top container	Daily	Collect in sterile yellow top container or scrape onto special black card. N.B. Do not enclose surgical blade with fungal scraping card.
Fungal Precipitins	SRA	Blood	SST (Yellow)	Sent to reference	Clinical Indications Hypersensitivity pneumonitis. See also



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	ASPERGILLUS
GAD Antibodies (Glutamic Acid Decarboxylase)	SRA	Blood	SST (Yellow)	Sent to reference lab	Early indicator for IDDM. Investigative test for patients with NIDDM with ? underlying IDDM.
Galactose Screen	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Contact Specimen Reception before collecting specimen.
Gamma Globulins	SRA	Blood	SST (Yellow)	Daily	
Gamma Glutamyl Transferase	Biochem	Blood	SST (Yellow)	Daily	Included in Liver Function Tests.
Gamma Interferon Assay for Mycobacterial Infection	SRA				See QUANTIFERON TB ASSAY
Gastric Parietal Cell Antibody					See ANTI- GASTRIC PARIETAL CELL ANTIBODY
Gastrin	SRA	Blood	SST (Yellow)	Sent to reference lab	Fasting specimen. Forward to laboratory with next courier. Avoid transport delays. MUST be delivered to Lab. on ice immediately. Separate and freeze before sending to reference Lab.
Genital Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium. Includes vaginal cervical vulval penile urethral perineal perianal/anal IUD. Swab in viral transport medium.
Genital Swab Herpes Simplex PCR	SRA	Plain Swab		Sent to reference lab	
Genotype (Blood Grp Rh)	Blood Bank	Blood	Plain (Red)	Daily	Three I.D.'s. Label tube with: 1. Full Name 2. Date of Birth 3. Signature/ initials of collector
Gentamicin once daily dosing (non endocarditis)	SRA	Blood	SST	Sent to reference lab	2 samples --30 minutes and 6 hours post dose State time/date of last dose, time/date of sample collection, dose and route.
Gentamicin pre and post (trough and peak)	SRA	Blood	SST	Sent to reference lab	Pre dose level and 30 minutes after completion of infusion (not recommended for once daily dosing). State time/date of last dose , time/date of sample collection, dose and route.
Gentamicin random	SRA	blood	SST	Sent to reference lab	
German Measles					See RUBELLA ANTIBODY
Gilberts Disease Genetic Testing	SRA	Blood		Sent to reference lab	
G-6-PD (Glucose- 6- Phosphate	SRA	Blood	EDTA (Purple)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
Dehydrogenase)				lab	
Glandular Fever Screen	Haem	Blood	SST (Yellow)	Daily	Monospot / Infectious Mononucleosis Screen/ Heterophile Ab /Paul Bunnell
Gliadin (Gluten) Abs					See ANTI GLIADIN IgG and IgA
Globulins serum					Doctor must be contacted for clarification of request.
Glomerular Basement Membrane	SRA	Blood	SST (Yellow)	Daily	Clinical Indications Renal disease.
Glomerular Haematuria	Micro	Spot Urine	70 ml yellow top container	Daily	Fresh mid stream urine collected 1:1 in formalin
Glucagon	SRA	Blood	Special tube	Sent to reference lab	Contact Specimen Reception Burwood for advice.
Glucose Challenge Test	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	Patient tested in random state
50gm glucose load or 75gm glucose load Glucose Challenge Test	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	1. Give patient oral glucose loading. 2. Draw blood sample 1 hr. after glucose load. 3. Record patient details on tube and time/date of collection. 4. Record period of gestation on form. 5. Collection Centre MUST specify which glucose load is given to patient because they have different reference ranges. See also GLUCOSE TOLERANCE TEST INSTRUCTIONS.
Glucose fasting/random	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	State time/date of collection
Glucose Tolerance Test 2hr	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	Fasting required. Appt. preferred. Refer patient to any Pathlab Collection Centre. Patient Instructions available from Laboratory.
Glucose Tolerance Test (Extended)	Biochem	Blood	Fluoride Oxalate (Grey)	Daily	Fasting required. Appt. is necessary. Refer patient to any Pathlab Collection Centre.
Glucose-6 Phosphate Dehydrogenase (G6PD)	SRA	Blood	EDTA (Purple)	Sent to reference lab	Contact Laboratory before collection.
Glutathione Peroxidase	SRA	Blood	Lithium Heparin (Green)	As requested	Selenium dependent red cell enzyme
Glycated/Glycosylated Haemoglobin HbA1C	Biochem	Blood	EDTA (Purple)	Daily	Monitoring for glycaemia. Measure of short term / long term control. Clinical Indications Diabetes Mellitus Clinical notes must include patient is an established diabetic.
Gold - serum	SRA	Blood	Sodium Heparin	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
			(Dark Blue)	lab	
Gonadotrophins FSH follicle stimulating hormone and LH luteinizing hormone	Biochem	Blood	SST (Yellow)	Daily	
Group (ABO Rh) Adult	Blood Bank	Blood	Plain (Red)	Daily	Antibody screen automatically performed over 6 months old. 2 ID's required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Group (ABO Rh) Cord	Blood Bank	Blood	Plain (Red)	Daily	Antibody screen automatically performed over 6 months old. 2 ID's required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Group and Hold (retain) Serum	Blood Bank	Blood	EDTA (pink) Plain (Red)	Daily	Antibody screen automatically performed over 6 months old. 2 ID's required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Group and Antibodies (possible cross match)	Blood Bank	Blood	Plain (Red)	Daily	Antibody screen automatically performed over 6 months old. 2 ID's required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Growth Hormone level - Blood	SRA	Blood	SST (Yellow)	Sent to reference lab	
Growth Hormone level - Urine	Integ Med	Spot Urine or 24 hour collection	Spot = 70 ml yellow top container 24 Hr = 5 ltr screw top container	Weekly	Spot sample
Haemochromatosis HFE gene	SRA	Blood	EDTA (Purple)	Sent to reference lab	Genetic studies for common defects. Refrigerate.
Haemoglobin Electrophoresis	SRA	Blood	EDTA (Purple)	SRA	Quantitation of HbA2 HbF HbH. Screen for abnormal Hb bands.
Haemoglobin – Hb Haemoglobin and film	Haem	Blood	EDTA (Purple)	Daily	
Haemoglobin in Urine	Micro	Spot Urine	70 ml yellow top container	Daily	Collect freshly voided mid-stream urine.
Haematocrit (Packed Cell Volume)	Haem	Blood	EDTA (Purple)	Daily	



Test Name	Dept	Specimen	Container	Time	Comments
Haemoglobin A1C (HbA1C)	Haem	Blood	EDTA (Purple)	Daily	See GLYCATED/GLYCOSYLATED HAEMOGLOBIN
Haemoglobin H Inclusions	SRA	Blood	EDTA (Purple)	Sent to reference lab	
Haemolysis Investigation	Haem	Blood			Contact Haematology on 8831 3000.
Haemosiderin urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Freshly voided mid stream urine.
Hair Analysis	Integ Med	Hair from head or pubic hair	Hair collection kit	Weekly	Collect samples from nape of neck. The first 5 cm. adjacent to the scalp is preferred. Follow collection instructions in hair collection kit. Record on request any recent treatments or type of hair products used. \$100.00 Payment preferred at time of collect
Haloperidol (Serenace)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre-dose. State time/date of last dose and time/date of collection. Clinical Indications Chronic psychotic disorders
Haptoglobin	SRA	Blood	SST (Yellow)	Daily	
HCG (Human Chorionic Gonadotropin)	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine. Qualitative.
HCG serum	Biochem	Blood	SST (Yellow)	Daily	
HCG quantitative	Biochem	Blood	SST (Yellow)	Daily	
HDL (High Density Lipoprotein)	Biochem	Blood	SST (Yellow)	Daily	Fast 10 hrs. Medical benefit limitations apply.
Heavy Metal Screen	SRA	Blood	Sodium Heparin (Dark Blue)	As requested	
Heavy Metal Screen	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle. Metals required must be stated. Patient exposure details required.
Heavy Metal Screen	Integ Med	Hair from head or pubic hair	Hair collection kit	Weekly	Refer to Hair Kit Collection Instructions
Herbicides	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Heinz Bodies	Haem	Blood	EDTA (Purple)	As requested	
Helicobacter pylori - serology	SRA	Serum	SST	10 Days	No use in monitoring treatment - the breath test should be used.
Helicobacter pylori Faecal Antigen Test	Micro	Faeces	White lid container (no preservative)	Daily	
Helicobacter pylori breath test	Integ Med	Breath	Breath balloon	Daily	



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Test Name	Dept	Specimen	Container	Time	Comments
Helicobacter pylori Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Investigation of peptic ulcers gastritis
Helminth Infestation	Micro	Faeces	Brown and white container with SAF	Daily	Brown and white Pathlab container with SAF fixative. Minimum 1g.
Heparin CoFactor 11	SRA	Blood	Citrate (L.Blue)	Sent to reference lab	Refrigerate. Recommend specimen reach Laboratory within 4 hrs of collection.
Hepatitis Testing					See HEPATITIS (A-D) INVESTIGATIONS - Section 3.0
Hepatitis A	Immuno	Blood	SST (Yellow)	Daily	
Hepatitis B	Immuno	Blood	SST (Yellow)	Daily	
Hepatitis C	Immuno	Blood	SST (Yellow)	Daily	
Hepatitis Be Antigen	Immuno	Blood	SST (Yellow)	Daily	Clinical Indications Assess infectivity in Hep Bs Ag positive carrier.
Hepatitis Be Antibody	Immuno	Blood	SST (Yellow)	Daily	
Hepatitis B DNA by PCR	SRA	Blood	SST (Yellow)	Sent to reference lab	Tube must remain sealed. Separate tube required for this test.
Hepatitis C RNA and Genotyping by PCR	SRA	Blood	SST (Yellow)	Sent to reference lab	Tube must remain sealed. Separate tube required for this test.
Hepatitis C PCR	SRA	Blood	SST (Yellow)	Sent to reference lab	Tube must remain sealed. Separate tube required for this test.
Hepatitis D	SRA	Blood	SST (Yellow)	Sent to reference lab	HBsAg must be positive
Hepatitis E	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Hepatitis in travellers to endemic areas.
Heroin	Biochem	Spot Urine	70 ml yellow top container	3 times weekly	Supervised spot urine. See DRUG SCREEN - URINE
Herpes Simplex 1 and 2 Serology	Immuno	Blood	SST (Yellow)	Weekly	
Herpes Virus direct antigen/culture from genitalia	Micro	Viral Swab (Green)		Sent to reference lab	Swab in viral transport medium.(Green Cap)
Herpes Virus direct antigen/culture from site other than genitalia	SRA	Swab		Sent to reference lab	Swab in viral transport medium. (Green Cap)
Herpes Varicella/Zoster serology VC2	Immuno	Blood	SST (Yellow)	Daily	
Herpes Varicella/Zoster culture	SRA	Viral Swab (Green)		Sent to reference lab	Swab in viral transport medium. Refrigerate.



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Test Name	Dept	Specimen	Container	Time	Comments
Heterophile Antibody test	Haem	Blood	EDTA (Purple) SST (Yellow)	Daily	See GLANDULAR FEVER SCREEN
5-HIAA (5 -Hydroxy Indole Acetic Acid)	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid bottle. Special dietary requirements. Instructions available from Pathlab Laboratory
HIB (Haemophilus Influenzae Type B) Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Histamine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Histone Abs	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications To define specificity of ANA.
Histopathology	Histo	Tissue		Daily	Containers with 10% buffered formalin are available from the laboratory on request.
Histoplasmosis Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
HIV Antibody - routine	Serology	Blood	SST (Yellow)	Daily	Fee is \$20.00. Prepayment is required.
HIV Antibody - VIDRL	SRA	Blood	SST (Yellow)	Sent to reference lab	No charge for patients identified as a high risk group.
HIV-1 DNA / PCR	SRA	Blood	EDTA (Purple) x3	Sent to reference lab	Qualitative PCR test for detection of virus. Collect Mon to Fri. only. Friday collection must reach laboratory by 12 midday. Keep at Room Temp
HIV-1 Viral Load Testing	SRA	Blood	EDTA (Purple) x3	Sent to reference lab	Quantitation of HIV viral RNA load. Collect Mon to Fri. only. Friday collection must reach laboratory by 2 pm same day. Keep at Room Temp
HLA B27 Antigen	SRA	Blood	Lithium Heparin (Green) and EDTA (Purple)	Sent to reference lab	Collect specimens: Mon. to Thurs. only Clinical Indications Ankylosing Spondylitis
HLA Lymphocytotoxic Antibodies	SRA	Blood	Gel or Red	Sent to reference lab	
HLA Tissue Typing	SRA	Blood	2 ACD tubes	Sent to reference lab	Special Requirements. Refer patient to any Pathlab Collection Centre. Testing is performed by the Australian Red Cross Blood Service Victorian Transplantation and Immunogenetics service.
Hold (retain) Serum - cross match	Blood Bank	Blood	Plain (Red)	Sent to reference lab	Requested by Doctor for further diagnostic tests 2 I.D.'s required. Label tube with 1. Full Name 2. Date of Birth 3. Signature of collector.
Holter Monitor (Ambulatory)	SRA	24hr ECG		Daily	By Appt. Contact Home Visits Head Office for information



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Test Name	Dept	Specimen	Container	Time	Comments
Electrocardiography)					on 8831 3000. Clinical Indications: 1. patient perception of abnormal heart beating 2. symptoms suggestive of temporary cerebral ischaemia e.g. loss of consciousness blackouts etc. 3. transient unpredictable or nonprovokable chest pain or discomfort 4. evaluation of arrhythmias and/or antiarrhythmic therapy. Evaluation of ischaemic heart disease
Homocysteine - plasma	Biochem	Blood Serum, heparinised, EDTA plasma	EDTA (Pink) 6ml	2 times weekly	Samples should be kept on ice for up to 6 hours until separation by centrifugation.
Homogentisic Acid	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine foiled.
Human Chorionic Gonadotropin (HCG)					See HCG serum/HCG urine
Hydatid Complement Fixation Test	SRA	Blood	SST (Yellow)	Sent to reference lab	
Hydroxyproline	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Special requirements. Patient instructions available from Laboratory
5-Hydroxy Indole Acetic Acid (5-HIAA)	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Special requirements. Patient instructions available from Laboratory
17-Hydroxysteroids	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.
17-Hydroxyprogesterone (17OHP)	SRA	Blood	SST (Yellow)	Sent to reference lab	Must collect between 0800 hrs and 1000 hrs. Note time of collection on tube and form.
Immunoglobulins serum (IgA IgG IgM)	Biochem	Blood	SST (Yellow)	2 times weekly	
IgA Immunoglobulin A	Biochem	Blood	SST (Yellow)	2 times weekly	
IgD - Immunoglobulin D	SRA	Blood	SST (Yellow)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
IgG - Immunoglobulin G	Biochem	Blood	SST (Yellow)	2 times weekly	
IgM - Immunoglobulin M	Biochem	Blood	SST (Yellow)	2 times weekly	
IgE - Immunoglobulin E	Biochem	Blood	SST (Yellow)	3 times weekly	For total IgE levels Medicare will refund only 2 patient episodes in a 12 month period.
IGF-1 (Insulin-Like Growth Factor)	SRA	Blood	SST (Yellow)	Sent to reference lab	Mediates effect of growth hormone.
IGFBP-3 (Insulin- Like Growth Factor Binding Protein)	SRA	Blood	SST (Yellow)	Sent to reference lab	
I.M. Screen	Haem	Blood	EDTA (Purple) or SST (Yellow)	Daily	See GLANDULAR FEVER SCREEN
Imipramine (Tofranil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect specimen pre dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression.
Immuno-electrophoresis serum	SRA	Blood	SST (Yellow)	Sent to reference lab	Protein EPG Immunoglobulins Kappa/Lambda.
Immuno-electrophoresis urine	SRA	Spot Urine	70 ml yellow top container		Spot urine. First morning void preferred. Can be done on plain 24 hr urine if requested.
Immunoglobulin G Subclasses - (IgG Subclasses)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Assessment of antibody mediated immune function in patients with recurrent severe or chronic infections.
Inderal (Propranolol)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre dose. State time/date of last dose and time/date of collection. Clinical Indications Nonselective b blocker. Hypertension; angina pectoris.
Indirect Antiglobulin test (Coombs)	Blood Bank	Blood	Plain (Red)	Daily	Label tube with 1. Full Name 2. Date of Birth 3. Signature of collector.
Influenza A & B Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Inorganic Phosphorus	Biochem	Blood	SST (Yellow)	Daily	
Insulin serum single / multiple specimens	Biochem	Blood	SST (Yellow)	2 times weekly	Recommend specimen/s reach laboratory within 4 hrs. of collection and blood samples for glucose levels be collected concurrently. MUST be separated and frozen ASAP.
Insulin Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Intercellular Antibodies					See ANTI INTERCELLULAR AB.



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Test Name	Dept	Specimen	Container	Time	Comments
International Normalised Ratio (INR)	Haem	Blood	Citrate (L.Blue)	Daily	Fill tube to line exactly. Recommend specimen reach testing laboratory within 4 hrs of collection. Collect Monday to Saturday before 12 midday for laboratory dose patients on anticoagulant therapy (except if Doctor or laboratory instructs otherwise). After collection MUST be left at room temp.
Intrinsic Factor Ab				Weekly	See ANTI INTRINSIC FACTOR AB
Iodine Urine	Integ Med	Spot Urine	70 ml yellow container	In house Twice weekly	
Ionised Calcium	SRA	Blood	SST (Yellow)	Sent to reference lab	Send separate sealed tube. Collect Mon to Thurs only.
Iron studies (Serum)	Biochem	Blood	SST (Yellow)	Daily	Fasting is recommended but not critical.
Isoenzymes -Alkaline Phosphatase	SRA	Blood	SST (Yellow)	Sent to reference lab	Can only be performed if there is a raised ALP > 200 u/l. (Need to get range from reference Lab.
Isoenzymes -Creatine Kinase-MB (CK-MB)	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Confirmation of diagnosis of myocardial infarction
Isoenzymes -LD	SRA	Blood	SST (Yellow)	Sent to reference lab	
Insecticides (DDT/Dieldrin)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Clinical notes of patient exposure details required.
Isocyanate	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Collect after patient's work shift. Environmental toxin.
I.U.D (Inter Uterine Device) culture	Micro	IUD	70 ml yellow top container	Daily	Transport in sterile container.
I.V. Catheter Collection	Micro	Tip	70 ml yellow top container	Daily	Transport catheter tip in sterile container.
I.V. Catheter microscopy/culture	Micro	Site swab		Daily	Site swab in transport medium.
Joint Fluid Aspirate	Cytology	Synovial Fluid	70 ml yellow top container	Daily	
Joint Fluid micro/culture cells/crystals	Micro	Synovial Fluid	70 ml yellow top container	Daily	Collect in sterile container. Keep at Room Temp
Joint Fluid rheumatoid factor/Chemistry	Biochem	Synovial Fluid	70 ml yellow top container	Daily	
K+ Potassium Serum	Biochem	Blood	SST (Yellow)	Daily	Recommend specimen reach testing laboratory within 4 hrs of collection. Delayed centrifugation may cause elevated level.



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Test Name	Dept	Specimen	Container	Time	Comments
K+ Potassium Urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle. Indication nutritional studies
K+ Potassium Urine		Spot Urine	70 ml yellow top container		Spot urine.
Karyotype (Chromosome Studies)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Fragile X	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Fragile X must be specifically requested to be included in Chromosome studies.
Ketones - serum					See BETA HYDROXYBUTYRATE
Ketones - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Collect mid stream urine specimen into sterile yellow top container.
Kleihauer Test (Hb F)	SRA	Blood	EDTA (Purple) AND CLOT (Red)	Sent to reference lab	Test for foetal cells in maternal circulation. 2 I.D.'s required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Lactate Dehydrogenase LDH	Biochem	Blood	SST (Yellow)	Daily	Forward to laboratory with next courier. Avoid transport delays. Levels are elevated by haemolysis or delayed centrifugation of specimen.
Lactate Dehydrogenase isoenzymes	SRA	Blood	SST (Yellow)	Sent to reference lab	May include LD1, LD2, LD3 and LD5.
Lactate (Lactic Acid)	SRA	Blood	Fluoride Oxalate (Grey)	Sent to reference lab	
Lactose Tolerance Test	Biochem				Hydrogen Breath Test now preferred test - Contact Laboratory. (03) 8831 3000
Lamotrigine (Lamictal)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose or minimum 6 hrs post dose. State time/date of last dose and time/date of collection.
Lanoxin (Digoxin)	Biochem	Blood	SST (Yellow)	Daily	Trough level. Collect at least 6 - 7 hrs post dose. State time/date of last dose and time/date of collection.
Largactil (Chlorpromazine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre-dose. State time/date of last dose and time/date of collection. Clinical Indications Schizophrenia
LD1	SRA	Blood	SST (Yellow)	Sent to reference lab	Lactate Dehydrogenase IsoEnzyme Type I.
LDL (Low Density Lipoprotein) Cholesterol	SRA/ Biochem	Blood	SST (Yellow)	Sent to reference lab	Calculated from Total Cholesterol and HDL.
Lead whole blood	SRA	Blood	Trace Metal	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
			(Dark Blue)	lab	
Lead urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random.
Lead urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Legionnaires Disease Serology antibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical notes required.
Legionnaires Disease Serology antigen	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random.
Leptospirosis	SRA	Blood	SST (Yellow)	Sent to reference lab	
Leucocyte Differential Count	Haem	Blood	EDTA (Purple)	Daily	Recorded identity of 100 leucocytes expressed as % of total WCC. Cell types are: Neutrophils Lymphocytes Monocytes Eosinophils Basophils.
Levetiracetam (Kepra)	Not done in Australia				
Liver Kidney Microsomes					See ANTI LIVER KIDNEY MICROSOMES
Lipase	Biochem	Blood	SST (Yellow)	Daily	Clinical Indications Suspected acute pancreatitis.
Lipids HDL/LDL ratio	Biochem	Blood	SST (Yellow)	Daily	10 hr fast.
Lipid Screen/Profile/Studies	Biochem	Blood	SST (Yellow)	Daily	10 hr fast. Cholesterol and triglycerides only performed with this request. HDL & LDL must be specified with request if required.
Lipoprotein (a)	Biochem	Blood	SST (Yellow)	Weekly	
Lipoprotein Electrophoresis	SRA	Blood	SST (Yellow)	Sent to reference lab	Alpha Pre-beta Beta and Chylomicron fractions.
Listeria Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Lithium – serum	Biochem	Blood	SST (Yellow)	Daily	Collect 12 hrs post dose. State time/date of last dose and time/date of collection.
Liver Function Test LFT	Biochem	Blood	SST (Yellow)	Daily	Includes Protein Albumin Alk. Phos AST ALT GGT T. Bilirubin.
Long Acting Thyroid Stimulator (LATS)					See ANTI- THYROID RECEPTOR ABS
Lopresor (Metoprolol)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Cardioselective



Test Name	Dept	Specimen	Container	Time	Comments
					β1-blocker. Hypertension; angina pectoris.
Lupus Anticoagulant	SRA	Blood	Citrate (L.Blue) x 2	Sent to reference lab	Refrigerate. Recommend specimen reach Laboratory within 4 hrs of collection. Test cannot be done if patient on heparin therapy (ideally patient not on warfarin therapy but test can be done- this must be stated on referral). Clinical Indications Investigation of prolonged APTT not corrected by normal plasma; SLE: unexplained recurrent foetal loss, vascular thrombosis.
Lupus Inhibitor					See LUPUS ANTICOAGULANT
Lupus Serology (ANA)	Immuno	Blood	SST (Yellow)	Daily	
Luteinizing Hormone – LH	Biochem	Blood	SST (Yellow)	Daily	
Lyme Disease Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Lymph Node Aspirate for Cytology	Cytology	Aspirate	70 ml yellow top container	As requested	An appt. is necessary. Book procedure through Patient Centre Head Office on 8831 3000.
Lymphocyte Surface Markers (LSM)	SRA	Blood	Lithium Heparin (Green) EDTA (Purple)	Collected at same time & Sent to reference lab	Collect specimens Mon. to Thurs. only. Clinical Indications Assessment of Immune deficiency states lymphocytosis of unknown aetiology and haematological malignancies. A new referral is required for the second specimen.
Magnesium Urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Random urine.
Magnesium Urine	Biochem	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Magnesium - serum/plasma	SRA	Blood	SST (Yellow)	Daily	
Magnesium - red cell	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Malabsorption screen - Faeces for reducing substances	Micro	Faeces		Daily	Fresh specimen for reducing substances in brown/white sterile faeces container. Freeze immediately. Specimen must stay frozen in transit. Recommend labelled specimen be placed in sealable section of two part specimen bag then placed in plastic container
Malabsorption screen - microscopy for fat globules	Micro	Faeces	White lid container (no preservative)	Daily	Fresh sample for fat globules.
Malarial Parasites	Haem	Blood	EDTA (Purple)	Daily	
Malaria Serology	SRA	Blood	SST (Yellow)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Manganese serum/plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Manganese whole blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Manganese in hair	Integ Med	Hair	Hair collection kit	Weekly	Contact laboratory for hair kit
Manganese urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Manganese urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Mantoux Test	SRA	Intradermal Skin Test			Contact Home Visits Head Office for information on 8831 3000.
Marijuana	Biochem	Spot Urine	70 ml yellow top container	Three times Weekly	Supervised. Spot urine. See DRUG SCREEN - URINE.
Maternal Antibodies	Blood Bank	Blood	Plain (Red)	Daily	Three I.D's required. Label tube with: 1. Full Name 2. Date of Birth 3. Signature of collector.
Maternal Screening	SRA	Serum	SST (Yellow)	One week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Measles IgM	Serology	Blood	SST (Yellow)	Sent to reference lab	IGM - VIDRL
Measles IgG - in house	Serology	Blood	SST (Yellow)	Daily	IGG in house
Melatonin	Integ Med	Saliva		Daily	This test is NOT Medicare Rebatale. Collect at 12 midnight – 2 AM
Melleril (Thioridazine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Schizophrenia
Melliodosis Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Mercury (Hg) Whole blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Mercury Hair	Integ Med	Hair	Hair collection	Weekly	Contact laboratory for Hair Kit



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Test Name	Dept	Specimen	Container	Time	Comments
			kit		
Mercury urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Mercury urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Metabolic Screen	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Refrigerate.
Methaemalbumin	SRA	Blood	SST (Yellow)	Sent to reference lab	
Methaemoglobin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Monday to Thursday only.
Methotrexate	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Broad spectrum anti- neoplastic.
Methyl Bromide	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Methyl Histamine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Methyl Malonic Acid	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Metoprolol (Betaloc)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Methyl Phenobarbitone	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time.date of last dose and time/date of collection.
Mexiletine (Mexitil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Micro albumin	Biochem	12hr Urine and 24hr Urine	5ltr screw top container.	Daily	12 hr (or 24 hr collection if requested) into plain bottle. Accurate and complete emptying of the bladder is essential. Timed overnight urine advisable.
Micro albumin	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine Early morning (first void recommended). N.B. Only performed when Doctor specifies 'Spot'.
Microglobulin (β_2) serum	SRA	Blood	SST (Yellow)	Daily	
Microsomal Antibodies					See ANTI THYROID ABS
Mid Stream Urine - MSU microscopy/culture	Micro	Spot Urine	70 ml yellow top container	Daily	Fresh mid stream urine. Collect in 70mL sterile yellow top container. Refrigerate. See page 22 and 23
Mitochondrial Antibodies (AMA)					See ANTI- MITOCHONDRIAL AB
Mogadon (Nitrazepam)	SRA	Blood	SST (Yellow)	Sent to reference	Wrap in foil. Avoid transport delays. Collect pre- dose. State



Test Name	Dept	Specimen	Container	Time	Comments
				lab	time/date of last dose and time/date of collection. Clinical Indications Insomnia
Molybdenum (Molybdate)	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Molybdenum (Molybdate)	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Molybdenum (Molybdate)	SRA	24hr Urine	5ltr screw top container.		Acid-washed bottle.
Monospot	Haem	Blood	SST (Yellow)	Daily	See GLANDULAR FEVER SCREEN
Morphine	Biochem	Spot Urine	70 ml yellow top container	Three times Weekly	Supervised spot urine. See DRUG SCREEN - URINE
Mouth Swab microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
MTHFR	SRA	Blood	EDTA (purple)		
Mucopolysaccharide Screen	SRA	Spot Urine	70 ml yellow top container	Send out	Spot urine. Refrigerate. Avoid transport delays
Mycobacterium Tuberculosis	Micro	Sputum or early morning Urine	70 ml yellow top container	Daily	See ACID FAST BACILLI (TB)
Mumps Serology IgG	Serology	Blood	SST (Yellow)	Daily	
Mumps Serology IgM	Serology	Blood	SST (Yellow)	Sent to reference lab	IgM sent to VIDRL
Murray Valley Encephalitis Ab	SRA	Blood	SST (Yellow)	Sent to reference lab	
Myasthenia Gravis Screen	SRA	Blood	SST (Yellow)	Sent to reference lab	
Methicillin Resistant Staphylococcus Aureus (MRSA) Screen	Micro	Swabs		As requested	Swabs as specified by Doctor collected in transport media.
Mycoplasma Pneumonia Ab /Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Mycoplasma pneumoniae by PCR - (M. pneumoniae PCR)	Integ Med & Micro	Sputum	70 ml yellow top container	Weekly	Fresh specimen in sterile yellow top container. Refrigerate.
Myoglobin urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Qualitative. Screening test for muscle cell damage. CK is better



Test Name	Dept	Specimen	Container	Time	Comments
Myoglobin serum	SRA	Blood	SST (Yellow)	Sent to reference lab	Contact Laboratory before collection.
Mysoline (Primadone)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Epilepsy.
Na+ (sodium) - serum	Biochem	Blood	SST (Yellow)	Daily	
Na+ - urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle. Indication nutritional studies
Na+ - urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine.
Nail Clippings/Scrapings	Micro	Nail	70 ml yellow top container	Daily	Instructions for collection procedures are available from Laboratory.
Nasal Smear for Eosinophils	Micro	Smear	Glass Slide	As requested	Roll material from nasal swab of discharge onto clean glass slide. Air dry.
Nasopharyngeal swab microscopy/culture					See BORDETELLA PERTUSSIS CULTURE
Neisseria Gonorrhoeae PCR Swab	Micro	Charcoal Swab/ Plain		As requested	Genital sites - urethral cervical vaginal. Plain swab with or without transport media. Keep at Room Temp. N.B. N. gonorrhoeae PCR must be specifically requested for swabs.
Neisseria Gonorrhoeae PCR Urine	Micro	1 st catch Urine	70 ml yellow top container	As requested	1st void urine in sterile yellow top container. Minimum 5mL. 5-10 mL First catch urine (at least two hr after urine was last passed) into sterile urine container. Refrigerate. If only one specimen is provided for chlamydia and microculture the preferred specimen is mid -stream urine.
Neonatal Bilirubin	SRA	Blood	Special paediatric	Daily	Microtainer tube. Dark brown yellow top. Minimum 0.5ml required.
Neoral					See Cyclosporin
Neurone Specific Enolase	SRA	Blood	SST (Yellow)	Sent to reference lab	
Neutrophil Alkaline	SRA	Blood	EDTA (Purple)	Sent to reference lab	Include 6 fresh thin films from syringe. Air dry.
Neutrophil Cytoplasmic Ab (ANCA)					See ANTI - NEUTROPHIL CYTOPLASMIC AB



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Test Name	Dept	Specimen	Container	Time	Comments
Neutrophil Antibodies	SRA	Blood	Lithium Heparin (Green) SST (Yellow)	Sent to reference lab	Contact Laboratory for details.
Nickel - serum/plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Nickel - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine. Acid washed bottle.
Nickel - Hair	Integ Med	Hair	Hair collection kit		See Hair Analysis
Nipple Discharge Cytology	Cytology	Body Fluid	70 ml yellow top container	As requested	Smear discharge on clean glass slide frosted one end for labelling. Fix immediately with cytospray. If sufficient discharge make second smear and air dry. Label slides F(Fixed) and AD(Air dried)
Nitrazepam (Mogadon)	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil. Avoid transport delays. Collect pre- dose. State time/date of last dose and time/date of collection.
Nitroglycerine	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Noradrenaline	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid bottle. Part of Catecholamine investigation. Forward questionnaire.
Nortriptyline	SRA	Blood	Lithium Heparin (Green) (must be GEL-free)	Sent to reference lab	Collect sample pre- dose. State time/date of last dose and time/date of collection.
Nose Swabs microscopy/culture	Micro	Charcoal Swab		Daily	
Nutritional Health Testing					Enquiries can be made to the Laboratory Dept of Integrated Medicine on 8831 3000.
Occult Blood Faeces	Micro	Faeces			Patient collection instructions available from Laboratory. Refer page 16.
Oestrone (E1) - Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Oestrone (E1) - Urine	Integ Med	24 Hr Urine	5ltr screw top container.	Weekly	
Oestradiol (E2) - Blood	Biochem	Blood	SST (Yellow)	Daily	Patient must be non-pregnant.
Oestradiol (E2) -Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Oestradiol (E2) - Urine	Integ Med	24 Hr Urine	5ltr screw top	Weekly	



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Test Name	Dept	Specimen	Container	Time	Comments
			container.		
Oestriol (E3) - Serum	Biochem	Blood	SST (Yellow)	Daily	Patient must be pregnant.
Oestriol - Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Oestriol - Urine	Integ Med	24hr Urine	5ltr screw top container.	Weekly	Plain bottle.
Olanzapine	SRA	Blood	Lithium Heparin (Green) or Plain Red	Sent to reference lab	State time/date of last dose and time/date of collection. C. I. Schizophrenia
Oligoclonal bands CSF	SRA	Blood	70 ml yellow top container	Sent to reference lab	Must be accompanied by a serum sample. See CEREBROSPINAL FLUID and CSF IMMUNOGLOBULIN STUDIES
Opiates	Biochem	Spot Urine	70 ml yellow top container	Three times Weekly	Supervised spot urine. See DRUG SCREEN- URINE
Organochlorine Pesticides	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Exposure details required.
(DDT Dieldrin)				Sent to reference lab	
Organophosphorus Screen	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Exposure details required.
Osmolality - serum	SRA	Blood	SST (Yellow)	Sent to reference lab	
Osmolality - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Ospolot (Sulthiame)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date last dose and time/date of collection. Clinical Indications Epilepsy
Osteocalcin	SRA	Blood	SST (Yellow)	Sent to reference lab	Avoid transport delays.
Osteoporosis Screen	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	20mL first am urine. See TESTING FOR DEOXPYRIDINOLINE IN BONE DISEASE Section 6.0
Ovarian Abs	SRA	Blood	SST (Yellow)	Sent to reference lab	
Oxalate	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid bottle.
Oxazepam (Serepax)	SRA	Blood	SST (Yellow)	Sent to reference	Collect pre- dose. State time/date of last dose and



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	time/date of collection. Clinical Indications Anxiety disorders.
17OH Progesterone	SRA	Blood	SST (Yellow)	Sent to reference lab	
P.C.B. (Poly Chlorinated Biphenyls)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
P24 Antigen	SRA	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications HIV infection.
Packed Cell Volume	Haem	Blood	EDTA (Purple)	Daily	
Pancreatic Antibodies (Islet Cell Antibodies)					No longer performed. GAD (Glutamic Acid Decarboxylase) Antibodies recommended instead.
Pap Smear	Cytology	Cx Smear	PAP KIT	Daily	Pap Smear kits for traditional smears and ThinPrep are available from Stores. Record patient details on frosted end of glass slide including date of birth and date of collection. Provide relevant clinical history.
Paracetamol (Acetaminophen)	SRA	Serum	SST (Yellow)	Sent to reference lab.	Collect at least 4 hours after (over)dose. State time/date of dose and time/date of collection.
Parainfluenza A and B serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Parapertussis Culture microscopy/culture	SRA	Special Swab		Sent to reference lab	Pernasal swab and charcoal slope available from Microbiology Burwood.
Paraproteins serum	SRA	Blood	SST (Yellow)	Daily	Paired serum and first a.m. spot urine samples preferred.
Paraproteins urine	SRA	Spot Urine	70 ml yellow top container	Daily	Clinical Indications Multiple myeloma.
Parathyroid Hormone (PTH)	Biochem	Blood	SST (Yellow)	Weekly	MUST be sent to lab ASAP on melting ice. Avoid transport delays.
Parietal Cell Antibody					See ANTI PARIETAL CELL ABS
Parotid Antibodies	SRA	Blood	SST (Yellow)	Sent to reference lab	
Parvovirus B19 Abs	SRA	Blood	SST (Yellow)	Sent to reference lab	
Paternity Testing	SRA	Blood		Sent to reference lab	Contact Laboratory for information on 8831 3000.



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Test Name	Dept	Specimen	Container	Time	Comments
Paul Bunnell	Haem	Blood	EDTA (Purple) or SST (Yellow)	Daily	
PCV (Packed Cell Volume)	Haem	Blood	EDTA (Purple)	Daily	
Pemphigoid Ab					See ANTI- BASEMENT MEMBRANE AB
Pemphigus Ab					See ANTI -INTERCELLULAR AB
Penicillin	SRA	Blood	SST (Yellow)	Sent to reference lab	
Penicillin Allergy Assay	SRA	Blood	SST (Yellow)	Sent to reference lab	Provide comprehensive history to ensure correct request.
Penile swab microscopy/culture	Micro	Charcoal swab		Daily	Collect in transport medium.
Perhexiline	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect 8-24 hrs.hrs post dose. State time/date of last dose and time/date of collection.
Perianal/Anal Swab - microscopy/culture	Micro	Charcoal swab		Daily	Collect in transport medium.
Perineal Swab - microscopy/culture	Micro	Swab		Daily	Collect in transport medium.
Pertussis Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab Weekly	
Pertussis Culture microscopy/culture	SRA	Special swab		Sent to reference lab Daily	
Pesticide/Exposure Screen	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Exposure details required.
Pexid					See PERHEXILINE
Pharynx Swab - microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
Phase Contrast Microscopy (for red cell morphology)	Micro	Spot Urine	70 ml yellow top container	Daily	Fresh mid stream urine specimen is required. Collect into sterile yellow top container. Do not send patient away with container for home collection.
Phenobarbitone	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Epilepsy
Phenytoin (Dilantin)	Biochem	Blood	SST (Yellow)	Daily	Collect pre- dose. State time/date of last dose and time/date of collection.
Philadelphia Chromosome	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect Monday to Thursday only.



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Test Name	Dept	Specimen	Container	Time	Comments
Phosphatase alkaline	Biochem	Blood	SST (Yellow)	Daily	
Phosphatase acid	SRA	Blood	SST (Yellow)	Daily	Forward to testing laboratory (RCH) within 4 hrs. of collection.
Total and /or prostatic acid phosphatase					N.B. Test no longer routinely used. Recommend PSA instead.
Phosphate serum	Biochem	Blood	SST (Yellow)	Daily	
Phosphate urine	Biochem	24hr Urine	5ltr screw top container.	Sent to reference lab	Plain bottle.
Phosphate urine	Biochem	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Phospholipid Ab					See ANTI-PHOSPHOLIPID AB
Phytanic Acid	SRA	Blood	SST (Yellow)	Sent to reference lab	
Platelet Antibodies (Indirect)	Haem	Blood		Sent to reference lab	See ANTI-PLATELET ANTIBODY
Platelet Count	Haem	Blood	EDTA (Purple)	Daily	
Platelet Function Test	Haem	Blood	Citrate (L. Blue) x 4 tubes	Sent to reference lab (ASAP)	Clinical Indications: Post-operative bleeding. Bruising Menorrhagia. Patient should not take Asparin or any other NSAID's in the two weeks prior to testing. MUST be sent to reference lab within 2 hours.
Pleural Fluid microscopy/culture	Micro	Body Fluid	70 ml yellow top container		Collect in sterile containers.
Polio Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	Test is not readily available. Doctor must contact VIDRL before referring patient.
Porphyrin Screen	SRA	Urine	70 ml yellow top container	Sent to reference lab	Tests are performed according to the doctor's request. Random urine. Refrigerate.
Porphyrin Screen	SRA	Blood	Lithium Heparin (Green) EDTA (Purple)	Sent to reference lab	All specimens must be foiled.
Porphyrin Screen	SRA	Faeces		Sent to reference lab	Minimum 2g faeces in sterile brown/white faecal container. Refrigerate.
Post Vasectomy Semen Analysis	Micro	Semen	70 ml yellow top container	Daily	Collect into sterile yellow top container. Send to Laboratory with next courier. Patient instructions available from Laboratory or collection centre.
Potassium K+ Serum	Biochem	Blood	SST (Yellow)	Daily	Recommend specimen reach testing laboratory within 4 hrs of collection. (Delayed centrifugation may cause elevated



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Test Name	Dept	Specimen	Container	Time	Comments
					levels). Keep at Room Temp.
Potassium – 24hr urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Potassium - Spot urine	Biochem	Spot Urine	70 ml yellow top container	Daily	
Pre Albumin	SRA	Blood	SST (Yellow)	Sent to reference lab	
Pregnancy Test - Serum	Biochem	Blood	SST (Yellow)	Daily	Routine testing is Quantitive but reported as Qualitative.
Pregnancy Test - Urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine. Qualitative.
Pregnanediol - Urine	SRA	24hr Urine	5ltr screw top container	Sent to reference lab	Plain bottle.
Pregnenolone - Blood	SRA	Blood	SST (Yellow)	Sent to reference Lab.	
Primidone	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Request phenobarb
Progesterone - Blood	Biochem	Blood	SST (Yellow)	Daily	
Progesterone - Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Progesterone 17 OH	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect between 0800hrs and 1000hrs. State time of collection on tube and form.
Prolactin	Biochem	Blood	SST (Yellow)	Daily	
Prominal (Phenobarbitone)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Propranolol (Inderal)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect predose. State time/date of last dose and time/date of collection.
Prostatic Acid Phosphatase					See PHOSPHATASE -ACID PROSTATIC See PSA
Prostatic Specific Antigen Free/Total PSA ratio	Biochem	Blood	SST (Yellow)	Daily	Free/Total PSA ratio must be specifically requested - useful if PSA is between 2 -10 g/L. Medicare rebate is conditional. Clinical notes must include clinically suspected prostatic disease or previously diagnosed prostatic disease.
Free PSA	SRA			Sent to reference Lab	
Protein - serum	Biochem	Blood	SST (Yellow)	Daily	
Protein - urine	Biochem	24hr Urine Spot Urine	5ltr screw top container.	Daily	Plain bottle.
Protein C and/or Protein S	SRA	Blood	Citrate (L. Blue)	Sent to reference	Refrigerate. Recommend specimens reach Laboratory



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Test Name	Dept	Specimen	Container	Time	Comments
			x 2	lab 14 Days	within 4 hrs of collection or contact nearest regional laboratory for advice. Patient must be off warfarin for one month prior to testing. Clinical Indications Deep vein thrombosis Pulmonary embolism Superficial thrombop
Protein Electrophoresis - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. First am specimen preferred. Can also be performed on plain 24 hr urine if requested.
Protein Electrophoresis - serum	SRA	Blood	SST (Yellow)	Sent to reference lab	
Proteus (Rickettsial) Agglutinins	SRA	Blood	SST (Yellow)	Sent to reference lab	
Prothiedin (Dothiepin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect predose. State time/date of last dose/time date of collection.
Prothrombin 20210A Mutation	SRA	Blood	Citrate (L. Blue) x 1	Sent to reference lab	Refrigerate. Recommend specimen reach Laboratory within 4 hrs of collection or contact nearest regional laboratory for advice.
Prothrombin Gene Mutation	SRA	Blood	EDTA (Purple)		
Prozac (Fluoxetine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose time/date of collection. Clinical Indications Major depression; obsessive compulsive disorder.
Pseudocholinesterase	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Psittacosis (Chlamydia) Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
PTH	Immuno	Blood	SST (Yellow)	Weekly	Send with next courier. Avoid transport delays.
PTHrP	SRA	Blood	EDTA with trasylol additive. Austin will supply tube on request	Sent to reference lab (monthly)	Specimen taken onsite at Burwood OR Epping and frozen immediately Test processed at Sydpath in NSW. Contact Lyn Boscato (02) 8382 9100. Non rebatable – Cost approx \$50
PTTK (Partial Thromboplastin Time -Kaolin)					See ACTIVATED PARTIAL THROMBOPLASTIN TIME
Pyridoxine					See VITAMIN B6
Pyruvate Kinase Red Cell	SRA	Blood	EDTA (Purple)	Sent to reference lab	Clinical Indications Investigation of haemolytic anaemia.
Q Fever Antibody	SRA	Blood	SST (Yellow)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Quadruple Test (See Maternal Screening)	SRA	Serum	SST (yellow)	One Week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Quinidine (Kinidin)	Micro	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Maintenance therapy to prevent atrial fibrillation and/or flutter recurrence following electrical conversion.
Quantiferon TB Assay (Gamma Interferon Assay for Mycobacterial Infection)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Contact Specimen Reception before sample collection on 8831 3000. Do not refrigerate. Patient will be privately billed \$34.10 unless Medicare criteria are fulfilled. Medicare reimbursement if patient is immunosuppressed or immunocompromised.
RA Test (Rheumatoid Arthritis)	Biochem	Blood	SST (Yellow)	Daily	
Rapid Plasma Reagin - (RPR)	Serology	Blood	SST (Yellow)	Weekly	RPR only performed on Syphilis serology positive patients.
RAST Inhalant Allergy Test	Immuno	Blood	SST (Yellow)	Weekly	If allergens are not specified a general screen is performed on Phadiatop and Sample Food mix panels. Information sheet is available from Laboratory.
RAST Allergy Testing	Immuno	Blood	SST (Yellow)	Weekly	
RAST for Antibiotics Penicillin (G and V) Ampicillin Amoxycillin	SRA	Blood	SST (Yellow)	Sent to reference lab	
RAST for Others	SRA	Blood	SST (Yellow)	Sent to reference lab	
Red Cell Count	Haem	Blood	EDTA (Purple)	Daily	
Red Cell Morphology Urine	Micro	Urine	70 ml yellow top container	Daily	Fresh mid stream urine. Collect 1:1 in formalin
Red Cell Copper	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Red Cell Cholinesterase	SRA	Blood	EDTA (Purple)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Red Cell Ferritin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Red Cell Folate	Biochem	Blood	EDTA (Purple)	Daily	Overnight fast recommended but not essential.
Red Cell Fragility	SRA	Blood	Lithium Heparin (Green) EDTA (Purple)	Sent to reference lab	Contact Laboratory before Collection on 8831 3000.
Red Cell Indices	Haem	Blood	EDTA (Purple)	Daily	Part of full blood examination.
Red Cell Magnesium	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Red Cell Membrane Disorder Screening Test	Haem	Blood	EDTA	Sent to reference lab	In addition to the test sample, 6 normal EDTA blood samples are required. This test is not Medicare rebatable. A charge of \$150 will be invoiced.
Red Cell Mercury	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Red Cell Zinc	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Reducing Substances/Sugars faeces	Micro	Faeces			When specimen is frozen transport to Collection Centre or directly to Laboratory. Specimen must stay frozen in transit to laboratory. Freeze immediately.
Reducing Substances/Sugars urine	Micro	Urine	70 ml yellow top container		Fresh random urine. Refrigerate.
Renal Function Test	Biochem	Blood	SST (Yellow)	Daily	Includes Sodium Potassium Chloride Bicarb. Creatinine Urea.
Renin	SRA	Blood	EDTA (Purple) x 1	Sent to reference lab	
Respiradone	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Respiratory Swabs microscopy/culture	Micro	Swab		Daily	Collect in transport medium (except B. pertussis). Includes mouth sputum, nose, throat, tonsil, pharynx, eye (conjunctival) ear.
Respiratory Syncytial Virus Serology (RSV)	SRA	Blood	SST (Yellow)	Sent to reference lab	



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Test Name	Dept	Specimen	Container	Time	Comments
Respiratory Viruses PCR	Micro	Respiratory sample	Plain swab	As requested	Full screen includes Adenovirus Influenza A & B Parainfluenza 1 2 & 3 Respiratory Syncytial Virus.
Reticulin Antibodies					See ANTI RETICULIN AB
Reticulocyte (Retics) count	Haem	Blood	EDTA (Purple)	Daily	Preferably done with FBE.
Retinol					See VITAMIN A
Reverse T3	Integ Med	Blood	SST (Yellow)	Weekly	This test is not Medicare Rebatable
Rhesus Factor Rh (D)	Blood Bank	Blood	Plain (Red)	Daily	Blood group typing 2 I.D.'s required. Label tube with: Full name & DOB Signature of collector.
Rheumatic Fever Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	ASOT / Anti- DNase B performed.
Rheumatoid Factor	Biochem	Blood	SST (Yellow)	Daily	Rheumatoid arthritis serology/RA latex test.
Riboflavine					No longer available.
Rickettsia PCR	SRA	Blood	EDTA (Purple)	Sent to reference lab	
Rickettsial Serology (WeilFelix)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Ringworm microscopy/culture	Micro	Skin Scraping		Daily	Essential no creams applied to site for 24 hrs prior to testing. Cleanse skin lesions first with 70% alcohol/alcohol swab. Scrape leading edge and collect onto fungal scraping card or in sterile mid stream urine container. N.B. Do not enclose surgical blade with card or container.
Ristocetin (Factor VIII studies) Cofactor	SRA	Blood	Citrate (L. Blue)	Sent to reference lab	Refrigerate. Fill to line exactly. Recommend specimen reach Laboratory within 4 hrs of collection or contact nearest regional laboratory for advice.
Rivotril	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Rohypnol	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Supervised. State time/date of last dose and time/date of collection. Clinical Indications Severe insomnia.
Ross River Virus Antibody	SRA	Blood	SST (Yellow)	Daily	
Rotavirus Antigen (Faecal Viral Studies)	Micro	Faeces	White lid (no preervative0	Daily	Fresh faecal sample collected in a sterile Pathlab container. Min. requirement 1g.



Test Name	Dept	Specimen	Container	Time	Comments
RPR					See RAPID PLASMA REAGIN
Rubella Antibody - IgM / IgG	Immuno	Blood	SST (Yellow)	Daily	<10 IU/ml - NonImmune - 10-40 IU/ml - low levels of Rubella Immunity. - >40 IU/ml - Past exposure to Rubella
Rythmodan (Disopyramide)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Sabril (Vigabatrin)	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Collect at least 8 hrs. post dose or pre -dose. State time/date of last dose and time/date of collection. Clinical Indications Epilepsy
Salicylate (Aspirin)	SRA	Blood	SST (Yellow)	Sent to reference lab	Peak Level - State time/date last dose and time/date of collection.
Saliva - IgA	SRA	Saliva	70 ml yellow top container	Sent to reference lab	Collect in sterile container.
Saliva Hormones	Integ Med	Saliva	5 ml white top container	Daily	E1, E2, E3, Cortisol Progesterone DHEAS Testosterone Melatonin.
Salmonella Typhi Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Scabies (Sarcoptes Scabiei)	Micro	Skin Scraping		Daily	Diagnosis is based on microscopic identification of the scabies mites eggs or faecal material. The mites are located under the surface of the skin therefore scrapings must be made from the infected area. Technique: 1. Place a drop of mineral oil on a ste
Schillings Test					No longer performed. Recommend Intrinsic Factor Antibodies and Gastric Parietal Cell Antibodies instead.
Schistosomiasis (Bilharzia) - faeces	Micro	Faeces	Brown top container	Daily	Fresh faeces sample in brown top container.
Schistosomiasis (Bilharzia) - urine	Micro	Urine	70 ml yellow top container	Daily	Terminal stream (final void) urine into 250mL sterile container. Collect only between 12 midday and 3pm. Refrigerate.
Schistosoma Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Scoline Sensitivity (Dibucaine Fluoride Numbers)	SRA	Blood	SST (Yellow)	Sent to reference lab	



Test Name	Dept	Specimen	Container	Time	Comments
Second Trimester Screen (See Maternal Screening)	SRA	Serum	SST (yellow)	One Week	Cost is about \$90 Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Selenium - Hair	Integ Med	Hair	Hair collection kit	Weekly	See Hair Analysis
Selenium - serum/plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Selenium - whole blood	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Semen Analysis - microscopy/culture	Micro	Semen	70 ml yellow top container	Daily	Collect sample by masturbation or withdrawal method into sterile container. Forward to laboratory on same day as collection. See page 15
Semen Analysis - fertility/vasectomy reversal	Micro	Semen	70 ml yellow top container	Daily	Patient collection instructions available from Laboratory. Specimens for fertility/vasectomy reversal must reach The Lab within 1½ - 2 hrs of collection. See page 15
Semen Analysis - post vasectomy	Micro	Semen	70 ml yellow top container	Daily	Collection procedure same as for fertility/vasectomy reversal except that sample can be delivered to any PathLab Collection Centre promptly on day of collection. See page 14
Serenace	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Serepax (Oxazepam)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Serotonin	SRA	Blood			See 5 HIAA (Urine) or Urine Serotonin (Integrative)
Sex Hormone Binding Globulin (SHBG)	Biochem	Blood	SST (Yellow)	Three times weekly	
SGOT					See ASPARTATE TRANSFERASE
SGPT					See ALANINE TRANSAMINASE
Sickle Cell Preparation	SRA	Blood	EDTA (Purple)	Sent to reference lab	
Silicon - urine	SRA	Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Silicon - urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.



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Test Name	Dept	Specimen	Container	Time	Comments
Sinequan	SRA	Blood	SST (Yellow)	Sent to reference lab	
Skeletal Muscle Abs	SRA	Blood	SST (Yellow)	Sent to reference lab	
Skin Scrapings - microscopy/culture	Micro	Skin scraping	70 ml yellow top container	Daily	Essential that no creams be used for minimum 24 hrs prior to scraping. Cleanse lesions with 70% alcohol or sterile water wipe before scraping. Scrape from leading edge of lesion.
Skin Auto Antibodies					See ANTI - SKIN AUTOANTIBODIES
Smooth Muscle Antibodies					See ANTI - SMOOTH MUSCLE AB
Protein urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Random urine
Sodium serum	Biochem	Blood	SST (Yellow)	Daily	
Sodium urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle. Indication nutritional studies
Sodium urine	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine. Indication to evaluate cause of low serum sodium
Sodium Valproate	Biochem	Blood	SST (Yellow)	Daily	Collect pre- dose. State time/date of last dose and time/date of collection.
Somatomedin-C	SRA	Blood	SST (Yellow)	Sent to reference lab	See IGF-1
Sotalol (Sotacor)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Supraventricular and ventricular arrhythmias.
Specific Gravity	Micro	Spot Urine	70 ml yellow top container	Daily	Spot urine. Specific gravity not performed. Osmolality tested instead.
Sperm Antibodies					See ANTI-SPERM ANTIBODIES
Sperm Count	Micro	Semen	70 ml yellow top container	Daily	See SEMEN ANALYSIS - fertility/vasectomy reversal/post vasectomy. See page 14/15
Sputum AFB	Micro	Sputum	70 ml yellow top container	Daily	3 early morning deep cough sputum samples collected on 3 consecutive days into 70 mL sterile yellow top containers. Forward to laboratory on third day. Keep at Room Temp.
Sputum Cytology	Cytology	Sputum	70 ml yellow top container	Daily	Collection instructions available from Laboratory.
Sputum microscopy/culture	Micro	Sputum	70 ml yellow top	Daily	Fresh sample required. Collect in sterile yellow top



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Test Name	Dept	Specimen	Container	Time	Comments
			container		container.
Steroids urinary	Integ Med	24hr Urine	5ltr screw top container.	Weekly	Steroids must be specified. Plain bottle.
Stelazine	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre-dose. State time/date of last dose and time/date of collection.
Sterility of Water infection control/environmental	Micro	Water	70 ml yellow top container	As requested	Min. 100mL in sterile container preferably 200mL. Refrigerate. Date and Time of receipt of sample must be recorded on form.
Steroid Profile urinary	Integ Med	24hr Urine	5ltr screw top container.	Weekly	Plain bottle.
Stippled Cells	Haem	Blood	EDTA (Purple)	Daily	
Stone Analysis renal/gall	SRA	Calculus	70 ml yellow top container	Sent to reference lab	Forward sample in dry yellow top container.
Streptococcal Ab	SRA	Blood	SST (Yellow)	Weekly	
Striated Muscle Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Strongyloides faeces	Micro	Faeces	Brown top with preservative	Sent to reference lab	Fresh faecal sample in brown top container.
Strongyloides serum	SRA	Blood	SST (Yellow)	Sent to reference lab	
Strontium Urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Strontium Urine	SRA	Urine 24hr	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Strychnine Level	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Supervised.
Sulphaemoglobin	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Sulthiame (Ospolot)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre-dose. State time/date of last dose and time/date of collection.
Surmontil (Trimipramine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Major depression
Suxamethonium Sensitivity	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Surface Markers (Lymphocyte)	SRA	Blood	Lithium Heparin	Sent to reference	Collect specimens: Mon -Thurs only. Clinical Indications



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Test Name	Dept	Specimen	Container	Time	Comments
			(Green) EDTA (Purple)	lab	Assessment of Immune deficiency states lymphocytosis of unknown aetiology and haematological malignancies.
Swabs - Genital microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium. Cervical vaginal urethral vulval penile anal/perianal perineal .(IUD in sterile cont.)
Swabs - Respiratory microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium (except naso-pharyngeal) Sputum nose throat ear eye mouth tonsil pharynx.
Swabs - Wound microscopy/culture	Micro	Swab & CVC site swab & CVC Tip		Daily	Wound (superficial deep surgical/culture) skin boil abscess. IV collection site swab (Central Venous Catheter) Collect in transport medium. IV collection tip (Central Venous Catheter) Collect in sterile container.
Swabs - Chlamydia PCR	Micro	Swab		Daily	Cervical urethral conjunctival Keep at Room Temp.
Swab - Herpes genital PCR	Micro	Swab/ Genital	Plain swab	Send to reference lab	
Swabs Viral (site other than genital)	SRA	Swab		Sent to reference lab	Transport in viral medium. Refrigerate.
Sympathomimetic Amines	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine. Supervised. See DRUG SCREEN – URINE
Synovial Fluid	Cytology	Synovial fluid	70 ml yellow top container	Daily	Collect in sterile yellow top container. Keep at Room Temp.
Synovial Fluid Microscopy/culture cells crystals	Micro	Synovial fluid	70 ml yellow top container	Daily	Collect in sterile yellow top container. Keep at Room Temp.
Synovial Fluid Chemistry/ rheumatoid factor	Biochem	Synovial fluid	70 ml yellow top container	Daily	Collect in sterile yellow top container. Keep at Room Temp.
Syphilis Serology	Immuno	Blood	SST (Yellow)	Daily	
T3 (free Tri-iodo thyronine) Serum	Biochem	Blood	SST (Yellow)	Daily	Requested with TFT with no relevant clinical history- T3 is not performed. Requested with TFT with relevant clinical history -T3 is performed
T3 (free Tri-iodo thyronine) Urine	Integ Med	24hr Urine	5ltr screw top container.	Weekly	
T4/T8 Lymphocyte Ratio T & B Cells (Lymphocytic Enumeration)	Haem	Blood	Lithium Heparin (Green) EDTA (Purple)	Daily	Collect specimens: Mon to Thurs. Only. Clinical Indications Assessment of Immune deficiency states lymphocytosis of unknown aetiology and haematological malignancies.
Tacrolimus (FK506)	SRA	Blood	EDTA (Purple) x2	Sent to reference lab	Collect pre-dose or 8 hrs. post dose. State time/date of last dose and time/date of collection.



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Test Name	Dept	Specimen	Container	Time	Comments
Tambocor (Flecainide)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Tartrate Resistant Acid Phosphatase	SRA	Blood	SST (Yellow)	Sent to reference lab	Send with next courier. Avoid transport delays. Not for Prostate Cancer.
TB (Tuberculosis) sputum	Micro	Sputum	70 ml yellow top container	Daily	3 early morning deep cough sputum samples collected on 3 consecutive days into 70 mL sterile yellow top containers. Forward to laboratory on third day. Keep at Room Temp. 3 complete early morning (first void) urine specimens collected on 3 consecutive day
TB (Tuberculosis) urine	Micro	Early morning Urine	70 ml yellow top container	Daily	3 consecutive daily samples
Tegretol (Carbamazepine)	Biochem	Blood	SST (Yellow)	Daily	Collect pre- dose. State time/date of last dose and time/date of collection.
Testosterone -Serum	Biochem	Blood	SST (Yellow)	Daily	
Testosterone -Saliva	Integ Med	Saliva	5 ml white top container	Daily	
Tetanus Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Thalassaemia Screen	SRA	Blood	EDTA (Purple) x2	Sent to reference lab	
Thallium plasma	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Thallium urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Thallium urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Theophylline	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Asthma
THF Reductase (MTHFR)	SRA	Blood	EDTA (purple)		
Thiamine					See VITAMIN B1
Thick and Thin Films for Malarial	Haem	Blood	EDTA (Purple)	Daily	



Test Name	Dept	Specimen	Container	Time	Comments
Parasites					
Thiocyanate	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	
Thioridazine (Melleril)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Threadworm (Pinworm)	Micro	Faeces	Sticky tape	Daily	Special requirements. Refer patient to any Pathlab Collection Centre.
Throat Swabs microscopy/culture	Micro	Swab		Daily	Collect in transport medium.
Thrombin Clotting Time	Haem	Blood	Citrate (L.Blue)	Daily	Refrigerate. Recommend specimen reach Laboratory within 4 hrs of collection or contact nearest regional laboratory for advice.
Thrombophilia screen (Venous)	Haem	Blood	Citrate (blue) x 4 EDTA (purple) x 1	Sent to reference laboratory (3 times / week)	Screen consists of: 1. Activated Protein C Resistance (APCR) 2. Anti-Thrombin III (AT3) 3. Lupus Anticoagulant 4. Protein C 5. Protein S Must be received in laboratory in morning to arrive at Reference Lab on same day. Usage: Investigation of tendency to Venous Thromboembolism.
Thyroglobulin	SRA	Blood	SST (Yellow)	Sent to reference lab	
Thyroglobulin Antibody	Immuno	Blood	SST (Yellow)	Twice weekly	
Thyroid Auto-Antibodies					See ANTI-THYROID ANTIBODIES
Thyroid Binding Globulin	SRA	Blood	SST (Yellow)	Sent to reference lab	
Thyroid Function Tests	Biochem	Blood	SST (Yellow)	Daily	The Medical Benefits Schedule since November 1994 has limited the number of thyroid function tests that can be performed with a relevant clinical history. If no clinical history is supplied a FT4 can only be performed if the TSH result is abnormal.
Thyroid Stimulating Hormone - TSH	Biochem	Blood	SST (Yellow)	Daily	
Thyroid Stimulating-Immunoglobulin (TSI)	SRA	Blood	SST (Yellow)	Sent to reference lab	



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Test Name	Dept	Specimen	Container	Time	Comments
Thyrotrophin Receptor Abs	Immuno	Blood	SST (Yellow)	Weekly	Clinical Indications Graves Disease
Thyroxine Free - FT4 Serum	Biochem	Blood	SST (Yellow)	Daily	TSH must be included. See THYROID FUNCTION TESTS
Thyroxine Free - FT4 Urine	Integ Med	Spot Urine	70 ml yellow top container	Weekly	
TIBC (Total Iron Binding Capacity)	Biochem	Blood	SST (Yellow)	Daily	Part of Iron study profile. Must be specifically requested
Tissue Plasminogen Activator (TPA) pre venous occlusion	SRA	Blood	Citrate (L. Blue)	Sent to reference lab	Refrigerate. Recommend specimen reach Haematology Burwood within 4hrs of collection or contact nearest regional laboratory for advice. Clinical Indications Transient Ischaemic Attacks (TIA) Strokes.
Tissue Plasminogen Activator (TPA) post venous occlusion	SRA	Blood	Citrate (L. Blue)	Sent to reference lab	Refrigerate. Recommend specimen reach Haematology Burwood within 4hrs of collection or contact nearest regional laboratory for advice. Clinical Indications Transient Ischaemic Attacks (TIA) Strokes.
Tissue Plasminogen Activator Inhibitor Type 1 (PAI1)	SRA	Blood	Citrate (L. Blue)	Sent to reference lab	Refrigerate. Recommend specimen reach Haematology Burwood within 4hrs of collection or contact nearest regional laboratory for advice. Clinical Indications TIAs strokes.
Tissue Transglutaminase					See ANTI -TISSUE TRANSGLUTAMINASE
Tissue Typing (HLA Typing)	SRA	Blood	Yellow	Sent to reference lab	Special Requirements. Refer patient to any Gribbles Collection Centre. Testing is performed by Australian Red Cross Blood Service Victorian Transplantation and Immunogenetics Service.
Tobramycin	SRA	Blood	SST (Yellow)	Sent to reference lab	Trough level: Collect immediately pre- dose. Best indicator for toxicity. State time/date of last dose and time/date of collection.
Tocopherol					See VITAMIN E
Tofranil (Imipramine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date last dose and time/date of collection.
Toluene	SRA	Urine	70 ml yellow top container	Sent to reference lab	Spot urine.



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Test Name	Dept	Specimen	Container	Time	Comments
Tolvon	SRA	Blood	SST (Yellow)	Sent to reference lab	State time/date of last dose and time/date of collection. Clinical Indications Major depression
Tonsil Swab microscopy/culture	Micro	Swab		Daily	Collect in transport medium.
TORCH Screen	Serology	Blood	SST (Yellow)	Daily	Includes Toxoplasma Rubella CMV Serology Herpes serology. (Herpes done weekly)
Total Bilirubin (Adult)	Biochem	Blood	SST (Yellow)	Daily	Wrap in foil.
Total Iron Binding Capacity (TIBC)	Biochem	Blood	SST (Yellow)	Daily	Not done as part of Iron study profile. Must be specifically requested
Total Protein - serum	Biochem	Blood	SST (Yellow)	Daily	
Total Protein - urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Toxocara Serology	SRA	Blood	SST (Yellow)	Sent to reference lab	
Toxoplasma Antibody	Immuno	Blood	SST (Yellow)	Daily	
TPHA (Treponema Pallidum Haemagglutination)	Immuno	Blood	SST (Yellow)	Daily	
T.Pallidum IgG Antibody	Serology	Blood	SST (Yellow)	Daily	
Transferrin	Biochem	Blood	SST (Yellow)	Daily	Part of Iron Studies
Transfusion Group/Hold/CrossMatch	Blood Bank	Blood	Plain (Red)x2 AND EDTA (pink)	Daily	Essential Requirements. 3 IDs required Label tube with 1. Full Name. 2. Date of Birth. 3. Signature of collector. All request forms for cross match and group/hold must be labelled 'URGENT'. Full particulars of operation or transfusion to be written in history selection of request form.
Trifluoperazine (Stelazine)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Chronic psychotic disorders.
Triglycerides	Biochem	Blood	SST (Yellow)	Daily	Fast 10 hrs.
Tri-iodothyronine Free - FT3 Serum	Biochem	Blood	SST (Yellow)	Daily	Requested with TFT with no relevant clinical history -T3 is not performed. Requested with TFT with relevant clinical history - T3 is performed.
Tri-iodothyronine Free - FT3 Urine	Integ Med	24 Hr Urine	5ltr screw top container.	Weekly	
Trimipramine (Surmontil)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date last dose and time/date of collection.
Triple Test	SRA	Serum	SST (yellow)	One Week	Cost is about \$90



Test Name	Dept	Specimen	Container	Time	Comments
(See Maternal Screening)					Take blood at 10 weeks for first trimester screen (Down & trisomy 18) and 14-20 weeks for second trimester (Down, trisomy 18 and neural tube defects)
Troponin I	Biochem	Blood	SST (Yellow)	Daily	Clinical Indications Investigation of possible myocardial damage or chest pain. See also CARDIAC ENZYMES
Tryptanol (Amitriptyline)	SRA	Blood	Lithium Heparin (Green) (must be GEL free)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Tryptase	SRA	Blood	SST (Yellow)	Sent to reference lab	Sample must be collected within 6 hrs. of anaphylactic reaction.
Tryptic Activity - Faeces	SRA	Faeces		Sent to reference lab	Refrigerate.
TSH Receptor Abs	External	Blood	SST (Yellow)	Sent to reference lab	Clinical Indications Graves Disease
Tuberculosis Screen - urine	Micro	Spot Urine	70 ml yellow top container	Daily	3 complete early morning (first void) urine specimens collected on 3 consecutive days are recommended for initial diagnosis. Specimen volume should be 30 -50mL. 24 hour collections are not suitable, due to over growth of non mycobacterial micro-organisms.
Tumour Markers	Biochem	Blood	SST (Yellow)	Variable	Individual markers must be specified.
Typhoid Agglutination	SRA	Blood	SST (Yellow)	Sent to reference lab	
Urate (Uric Acid) - serum	Biochem	Blood	SST (Yellow)	Daily	
Urate (Uric Acid) - urine	Biochem	24 Hr Urine	5ltr screw top container.	Daily	Plain bottle
Urea - serum	Biochem	Blood	SST (Yellow)	Daily	
Urea - urine	Biochem	24 Hr Urine	5ltr screw top container.	Daily	Plain bottle
Urea Breath Test - C14	Integ Med	Breath sample	Balloon	As requested Daily	Test performed at any Collection Centre. Contact nearest centre for details & supply of kits
Urethral Swabs microscopy/culture	Micro	Charcoal Swab		Daily	Collect in transport medium.
Urethral Swabs chlamydia (PCR)	Micro	Chlam		Daily	Plain white swab



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Test Name	Dept	Specimen	Container	Time	Comments
		Swab			
Urethral Swabs herpes PCR	SRA	Viral Swab	Plain White swab	Daily	Collect in viral transport medium. Refrigerate..
Urethral Swabs Direct antigen/culture from site other than genitalia	SRA	Swab		Sent to reference lab	Collect in viral transport medium. Refrigerate..
Uric Acid serum	Biochem	Blood	SST (Yellow)	Daily	
Uric Acid – urine	Biochem	24hr Urine	5ltr screw top container.	Daily	Plain bottle.
Urine Drug Screen					See DRUG SCREEN – URINE
Urine Mid stream microscopy/culture	Micro	Mid stream Urine	70 ml yellow top container	Daily	Fresh mid stream sample required. Collect in 70 mL sterile yellow top container. Refrigerate. Collection instructions available from Lab. See page 22 and 23.
Urine pH	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine. Recommend specimen reach testing laboratory within 4 hrs of collection.
Urobilinogen	Biochem	Spot Urine	70 ml yellow top container	Daily	Spot urine by urine dipstick procedure.
Urine Porphyrins	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine foiled. Refrigerate.
Vasoactive Intestinal Peptide V.I.P.	SRA	Blood	EDTA (Purple)	Sent to reference lab	Special tube required. Contact Specimen Reception for details before collection or refer patient to St. Vincent's Public Hospital Fitzroy.
Vaccinia	SRA	Blood	SST (Yellow)	Sent to reference lab	
Vaginal Swab microscopy/culture	Micro	Swab charcoal		Daily	Collect in transport medium.
Valium	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date collection.
Valproate	Biochem	Blood	SST (Yellow)	Daily	Collect pre- dose. State time/date of last dose and time/date collection.
Vanadium - urine	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Random urine.
Vanadium - urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Vancomycin Levels Trough and Peak levels	SRA	Blood	SST (Yellow)	Sent to reference lab	Trough level - collect immediately pre-dose best indicator for toxicity. Peak level - IV infused over minimum 60



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Test Name	Dept	Specimen	Container	Time	Comments
					minutes. Draw blood as soon as possible after completion of I.V.
Vancomycin Levels Single specimen	SRA	Blood	SST (Yellow)	Sent to reference lab	Random collection.
Varicella zoster Antibody IgG	Serology	Blood	SST (Yellow)	Daily	
Varicella zoster Antibody VCZ IgM	SRA	Blood	SST (Yellow)	Sent to reference Lab	VC2 IgM - reference lab
Varicella zoster Culture	SRA	Swab		Sent to reference lab	Swab of scrapings from base of lesion or vesicle fluid. Collect in viral transport medium. Refrigerate.
Vasopressin (ADH)	SRA	Blood	EDTA (Purple)	Sent to reference lab	Forward to laboratory with next courier. Avoid transport delays.
VDRL	Serology	Blood	SST (Yellow)	Sent to reference lab	
Verapamil (Isoptin)	SRA	Spot Urine	70 ml yellow top container	Sent to reference lab	Spot urine.
Vigabatrin (Sabri)	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect at least 8 hrs. post dose or pre- dose. State time/date of last dose and time/date of collection. Clinical Indications Epilepsy
Viral Antibodies/Serology Adenovirus	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Arbovirus	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Barmah forest	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Chicken pox VCZ	Immuno	Blood	SST (Yellow)	IgM Sent to reference lab - IgG In house daily	
Viral Antibodies/Serology Chlamydia	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology - CMV (Cytomegalovirus)	Immuno	Blood	SST (Yellow)	Daily	
Viral Antibodies/Serology Coxiella (Q Fever)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology	SRA	Blood	SST (Yellow)	Sent to reference	



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Test Name	Dept	Specimen	Container	Time	Comments
Coxsackie B				lab	
Viral Antibodies/Serology EBV (Epstein Barr Virus)	Immuno	Blood	SST (Yellow)	3 x Weekly	
Viral Antibodies/Serology Herpes Simplex 1 & 2	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Influenza A & B	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Legionella	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Leptospirosis	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Measles	Immuno	Blood	SST (Yellow)	IgM Sent to reference lab - IgG In house daily	
Viral Antibodies/Serology - Mumps	Serology	Blood	SST (Yellow)	Sent to reference lab IgM	IgG in house
Viral Antibodies/Serology - Murray Valley Encephalitis	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Mycoplasma	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Parainfluenza	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Parvovirus B19	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Psittacosis (Chlamydia)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology - Q Fever	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Ross River	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology RSV (Respiratory Syncytial Virus)	SRA	Blood	SST (Yellow)	Sent to reference lab	
Viral Antibodies/Serology Toxoplasma	Immuno	Blood	SST (Yellow)	Daily	



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Test Name	Dept	Specimen	Container	Time	Comments
Viral Culture any swab in viral media other than for genital herpes	SRA	Swab Viral	Green viral swabs	Sent to reference lab	
Viscosity plasma	SRA	Blood		Sent to reference lab	Contact Specimen Reception Burwood before collection.
Vitamin A	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Vitamin B1	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Vitamin B2					No longer available.
Vitamin B6	SRA	Blood	Lithium Heparin (Green)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Vitamin B12 - Vitamin B12 and S.Folate	Biochem	Blood	SST (Yellow)	Daily	Overnight fast recommended but not critical.
Vitamin C	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Vitamin D (Cholecalciferol) 25 (OH) D3	Integ Med	Blood	Lithium Heparin (Green) or SST (Yellow)	Daily	Send with next courier. Avoid transport delays.
Vitamin D - 1 25 (OH) dihydroxy cholecalciferol	SRA	Blood	Lithium Heparin (Green) or SST (Yellow)	Sent to reference lab	
Vitamin E	SRA	Blood	SST (Yellow)	Sent to reference lab	Wrap in foil. Send with next courier. Avoid transport delays.
Vitamin K	Haem				See INR
VMA (Vanillyl Mandelic Acid)	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Performed as Catecholamines. Acid Bottle.
Von Willebrand 's Factor Assay	SRA	Blood	Citrate (L.Blue) x2	Sent to reference lab	Refrigerate. Fill to line exactly. Recommend specimen reach Laboratory within 4 hrs of collection.
Vulval Swab microscopy/culture	Micro	Swab		Daily	Collect in transport medium.
White Cell Count	Haem	Blood	EDTA (Purple)	Daily	FBE includes WCC.
White Cell Count and Differential	Haem	Blood	EDTA (Purple)	Daily	
Whooping Cough Serology					See BORDETELLA PERTUSSIS ANTIBODY
Whooping Cough Swab microscopy/culture					See BORDETELLA PERTUSSIS CULTURE
Widal Test	SRA	Blood	SST (Yellow)	Sent to reference	Salmonella Agglutinins.



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Test Name	Dept	Specimen	Container	Time	Comments
				lab	
Wound Swab microscopy/culture					See SWABSa WOUND
Xylose Absorption Test					Test no longer available.
Yersinia Antibody	SRA	Blood	SST (Yellow)	Sent to reference lab	
Zarontin	SRA	Blood	SST (Yellow)	Sent to reference lab	Collect pre- dose. State time/date of last dose and time/date of collection.
Zinc - serum	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	Request for 'Zinc' = serum zinc unless otherwise specified.
Zinc - red cell	SRA	Blood	Sodium Heparin (Dark Blue)	Sent to reference lab	
Zinc Hair	Integ Med	Hair	Hair collection kit	Weekly	Contact Stores for Hair Collection Kit
Zinc urine	SRA	24hr Urine	5ltr screw top container.	Sent to reference lab	Acid washed bottle.
Zinc urine	SRA	Spot Urine	70 ml yellow top container		Random urine.
Zoster Antibodies VCZ IgG	Serology	Blood	SST (Yellow)	Daily	
Zoster Antibodies IgM	Serology	Blood	SST (Yellow)	Sent to reference lab	Varicella (Chicken Pox). IgM to reference lab