



Synovial Fluid

Synonyms

Joint fluid, bursa fluid, olecranon bursa fluid, wrist aspirate, ankle aspirate, shoulder aspirate, knee aspirate.

Clinical Indication

Inflamed joints. Specimens are examined for the presence of pyrophosphate or urate crystals.

Part of Profile / See Also

N/A

Request Form

Manual request form or ICE request

Availability / Frequency of

On request.

Turnaround Time

Analysis

Reports are normally available 1-2 working days after the date of the procedure. Samples requiring extra work may take longer, please contact the Basildon Hospital Cellular Pathology Department for further information on delayed reports or for clinical advice (01268 524900 Ext:3033).

Patient Preparation

As per clinical requirements.

Sample Requirements

There must be at least 3 matching patient identifiers on both sample pot and request form. Patient Identifiers must include any 3 of the following:

Patient's full name, Date of Birth (D.O.B) and NHS number or Hospital number.

Specimen Type

Synovial Fluid. Must be fresh and unfixed.

Volume

Send as much fluid as can be conveniently obtained.

Container



Sterile universal container.

Sample should be collected in a Sterile Universal container or a white top 40ml pot.

Acceptance/Rejection

Criteria

Samples should be sent to the laboratory as soon as possible after collection. If there is a delay between collection and transport, the sample should be refrigerated.

Sample must be accompanied with a corresponding fully completed request form. Both the sample and request form must be legibly labelled with a minimum of three patient identifiers (patient's full name, DOB and NHS number or Hospital number.

There should be no discrepancies between the sample pot and the request form.

Please note that samples failing to meet these criteria will be given attempt to contact requester for the correction of error and sign disclaimer but failing to this may result in rejection of sample.





Reference Range & Units

N/A

Interferences

Old or un-refrigerated specimens may be poorly preserved and any crystals may be lost.

If a specimen is required by another department, such as Microbiology, this can result in a delay in processing and therefore a sub-optimal sample.

Please send separate samples with appropriate request forms to different departments, if required.

Debris or tiny fragments of glass from around the edge of the coverslip may sometimes mimic crystals.

Please make it clear on the request form if a fixed slide is also required for cytological analysis of the cells.

Interpretation & Clinical

Decision Value (if applicable)

References

Test code

Lab Handling

Specimen Transport

N/A

N/A

JOI

Store at 2-8°C until the sample is prepared.

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From Basildon Hospital: Ward and clinic samples should be taken to the Pathology Specimen Reception hatch on Level C.

From Southend Hospital: Southend Hospital: Ward and clinic samples to Pathology Reception in the Essential Services Lab on the 2nd Floor in the Pink Zone.

GP/Community Samples: All GP work is collected by the Courier Service and brought to the address below.

Location of Laboratory

The Diagnostic (Non-Gynae) Cytology Laboratory is located at:

Cellular Pathology Department **Basildon University Hospital**

Nethermayne Basildon SS16 5NL

Contact numbers

Cellular Pathology Tel: 01268 524 900 Ext: 8888/ 3033

Open 8.30am-5.00pm; Monday – Friday excluding Bank Holidays.