

# Blood Sciences - Sample Requirements

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
1,25 DIHYDROXYCALCIFEROL	DIHY	Blood	S.S.T.	86	
11 DEOXYCORTISOL	DEOX	Blood	S.S.T.	7	
17 HYDROXYPROGESTERONE	17H	Blood	S.S.T.	8	Assay requires at least 0.3ml of serum or plasma.
18-HYDROXYCORTISOL		Urine	24hr Urine Container - No Preservative		
18-OH CORTICOSTERONE	18OH	Blood	S.S.T.		
25 OH CHOLECALCIFEROL	25OH	Blood	S.S.T.		
25 OH ERGOCALCIFEROL	250E	Blood	S.S.T.		
5 HIAA - URINE 24HR	HIAA	Urine	24hr Urine Container - ACETIC Acid	1	24hr urine containers with ACETIC Acid preservative are available from the Laboratory. Please ring 2283. Boric acid containers are unsuitable for analysis.
7 DEHYDRO CHOLESTEROL	CHO7	Blood	Lithium Heparin	11	
AASA					
ABNORMAL HB SCREEN MIDDLESEX	HBM	Blood	E.D.T.A	14	For investigation of abnormal bands found on haemoglobin electrophoresis and alpha thalassaemia. Consent forms are needed and are available from Q-pulse HFT49.  <a href="https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT49">https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT49</a>
ABNORMAL HB SCREEN OXFORD	HBX	Blood	E.D.T.A	42	For investigation of abnormal bands found on haemoglobin electrophoresis and alpha thalassaemia. Consent forms are needed and are available from Q-pulse HFT59  <a href="https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT59">https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT59</a>
ACE (ANGIOTENSIN CONVERTING ENZ	SACE	Blood		1	See entry under SACE
ACETYLCHOLINE RECEPTOR ABS	ACRA	Blood	S.S.T.		
ACTH	ACTH	Blood	E.D.T.A	8	Cortisol (SST/Heparin) should also be tested. Indication: Investigation of proven Cushing's or adrenal insufficiency.
ACTIVATED PROTEIN C RESISTANCE	APCR	Blood			Please see THROMBOPHILIA SCREEN for sample details.  New Reference Range 29/08/18 (2.61 - 3.32)
ACUTE LEUKAEMIA FACS		Blood	E.D.T.A		
ACUTE LEUKAEMIA PANEL		Blood	E.D.T.A		
ACYLCARNITINE PROFILE	CAPR	Blood Spot		19	See carnitine profile.
ADALIMUMAB DRUG & ANTIBODY	ADAL	Blood	S.S.T.		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
ADAMTS13	AD13	Blood	Sodium Citrate	15	Samples sent and prepared using special form. Links below  BRI request form: <a href="https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT67">https://qpulse.ipp-uk.com/QPulseDocumentServiceSPS/Documents.svc/documents/active/attachment?number=HFT67</a>
ADH (ANTI DIURETIC HORMONE)	ADH	Blood			
ADRENAL ANTIBODIES	ADAB	Blood	S.S.T.	12	
AFP TUMOUR MARKER	AFPT	Blood	S.S.T.	1	Assay requires 0.5ml of sample.  0 - 7.5 ku/L
ALBUMIN	ALB	Blood	S.S.T.	1	Test is performed as part of the LFT and Calcium investigations. Routine method is Bromocresol Green (BCG).
ALBUMIN - ASCITIC FLUID	ASAL	Ascitic Fluid	Plain 25ml Universal	1	
ALBUMIN - FLUID	FALB	Misc Fluid	Plain 25ml Universal	1	
ALCOHOL - BLOOD	ALC	Blood	Fluoride/Oxalate	1	Fluoride/Oxalate is the preferred sample type.
ALCOHOL - FLUID	FALC	Misc Fluid	Fluoride/Oxalate		
ALCOHOL - POST MORTEM BLOOD	PMAL	Blood			Post mortem samples are now assayed at Southmead via MPH Mortuary.
ALCOHOL - POST MORTEM URINE	PMUA	Urine			Post mortem samples are now assayed at Southmead via MPH Mortuary.
ALCOHOL - POST MORTEM VITREOUS	PMVA	Misc Fluid			Post mortem samples are now assayed at Southmead via MPH Mortuary.
ALCOHOL - RANDOM URINE	UALC	Urine	Plain 25ml Universal	1	Not normally available on Urine samples.
ALDOSTERONE		Blood			
ALDOSTERONE - URINE 24HR	UALD	Urine	24hr Urine Container - No Preservative	78	
ALK.PHOS. ISOENZYMES	API	Blood	S.S.T.	65	Minimum 1ml serum required. Overnight Fasting sample is preferred.
ALKALINE PHOSPHATASE	ALK	Blood	S.S.T.	1	Test is performed as part of the LFT
ALPHA 1 ANTITRYPSIN (BLOOD)	AAT	Blood	S.S.T.	1	Assay performed at HUB only.
ALPHA 1 ANTITRYPSIN (FAECES)	FA1A	Faeces	Faecal Specimen Container	60	
ALPHA 1 ANTITRYPSIN GENOTYPE		Blood	E.D.T.A		
ALPHA 1 ANTITRYPSIN PHENOTYPE	PI	Blood	S.S.T.	32	
ALPHA GALACTOSIDASE ACTIVITY (FA)	AFAG	Blood	E.D.T.A	33	
ALPHA GALACTOSIDASE DNA (FABRY)	AFDA	Blood	E.D.T.A	59	
ALPHA GLUCOSIDASE POMPE	AGLU	Blood Spot	E.D.T.A	23	
ALPHA SUBUNIT TSH	ASU	Blood	S.S.T.	72	
ALPHA THAL INVESTIGATIONS		Blood	E.D.T.A		
ALPHA-1-ACID GLYCOPROTEIN		Blood	S.S.T.		
ALPHA-AMINOADIPIC SEMIAL. (BLOOD)		Blood	E.D.T.A		Indication: Pyridoxine-Dependent Epilepsy (Antiquitin – ALDH7A1 gene) See: <a href="http://www.labs.gosh.nhs.uk/media/524668/PDE%20v5.pdf">http://www.labs.gosh.nhs.uk/media/524668/PDE%20v5.pdf</a>

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
ALPHA-AMINOADIPIC SEMIAL. (URINE)	AASU	Urine	Plain 25ml Universal	56	Indication: Pyridoxine-Dependent Epilepsy See: <a href="https://www.ucl.ac.uk/child-health/research/genetics-and-genomic-medicine/biological-mass-spectrometry-centre/bioanalytical-services">https://www.ucl.ac.uk/child-health/research/genetics-and-genomic-medicine/biological-mass-spectrometry-centre/bioanalytical-services</a>
ALT	ALT	Blood	S.S.T.	1	Test is performed as part of the LFT
ALUMINIUM	AL	Blood	Trace Metal Serum Tube	61	The blood must be taken into a Trace Metal Serum Tube.
AMA TITRE	AMAT	Blood	S.S.T.		Requested when AMA is positive on the AIP.
AMINO ACIDS - BLOOD	AA	Blood	Lithium Heparin		For reference ranges and age groups please see:  <a href="https://www.nbt.nhs.uk/severn-pathology/requesting/test-information/amino-acid-profile">https://www.nbt.nhs.uk/severn-pathology/requesting/test-information/amino-acid-profile</a>
AMINO ACIDS - RANDOM URINE	UAA	Urine	Plain 25ml Universal	13	Use a random urine in a sterile container. A Boric Acid container is unsuitable.
AMIODARONE	AMIO	Blood	E.D.T.A	4	Assay requires 1ml of sample.
AMITRYPTYLLINE	AMIT	Blood	Plastic Plain Clotted		NOTE:- The blood should be taken just before the dose.
AML 17 TRIAL		Bone Marrow	E.D.T.A		
AMMONIA	AMMO	Blood	Lithium Heparin	1	Sample must be taken on ice and sent to the laboratory immediately.
AMNIOTIC FLUID AFP	AAFP	Amniotic Fluid			
AMPHETAMINE	UDS	Urine	Plain 25ml Universal	1	Boric acid containers are unsuitable for analysis
AMYLASE	AMYL	Blood	S.S.T.	1	
AMYLASE - ASCITIC FLUID	ASAM	Ascitic Fluid	Plain 25ml Universal	1	
AMYLASE - FLUID	FAMY	Misc Fluid	Plain 25ml Universal	1	
AMYLASE - PLEURAL FLUID	PFAM	Pleural Fluid	Plain Clotted	1	
AMYLASE - RANDOM URINE	UAMY	Urine	Plain 25ml Universal	1	
AMYLOID A	AMYA	Blood	S.S.T.	15	
ANA TITRE	ANAT	Blood	S.S.T.		Requested when ANA is positive
ANAPHYLLAXIS SCREEN					
ANCA	ANCA	Blood	S.S.T.		AIP, C3 and C4 also requested. If urgent please telephone Immunology.
ANDERSON FABRY					
ANDROSTENEDIONE	ANDR	Blood	S.S.T.	7	Assay requires at least 0.3ml of serum or plasma.
ANGIOTENSIN CONVERTING ENZYME (	SACE	Blood		1	See entry under SACE
ANION GAP	AG	Blood		1	
ANTI BASAL GANGLIA ANTIBODIES	ABGA	Blood	S.S.T.	17	
ANTI CHOLINESTERASE ANTIBODIES	ACRA	Blood	S.S.T.		
ANTI ERYTHROID (GLYCOPHORIN A)		Blood	E.D.T.A		
ANTI GAD 65 ANTIBODIES		Blood	S.S.T.		
ANTI GAD ANTIBODIES	AGAD	Blood	S.S.T.	9	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
ANTI GANGLIOSIDE M1 ANTIBODIES	M1	Blood	S.S.T.	15	
ANTI GANGLIOSIDE Q1B ANTIBODIES	D1B	Blood	S.S.T.	14	
ANTI GLOM. BASEMENT MEMBRANE AB	AGBM	Blood	S.S.T.	4	
ANTI HISTONE ANTIBODIES	HIST	Blood	S.S.T.	5	
ANTI INFLIXIMAB ANTIBODIES ASSAY	AIAB	Blood	S.S.T.	14	Effective use of Infliximab in clinical practice. To assess reasons for a lack of clinical response.
ANTI INFLIXIMAB DRUG LEVEL	INFL			14	
ANTI INTERFERON NEUTRALISING Ab	INTF			21	
ANTI MAG ANTIBODIES	MYG	Blood	S.S.T.	9	
ANTI Mi2 ANTIBODIES	MYO	Blood	S.S.T.	21	
ANTI MOG ANTIBODIES		Blood	S.S.T.		
ANTI MULLERIAN HORMONE	MULL	Blood	S.S.T.	18	
ANTI NUCLEAR ANTIBODY	HEP2	Blood	S.S.T.		If positive dsDNA and ENA screen will be requested
ANTI PAROTID ANTIBODIES	PARO	Blood	S.S.T.		
Anti Phospholipase A2 receptor	PL2R	Blood	S.S.T.		
ANTI PLA2R ANTIBODIES	PL2R	Blood	S.S.T.		
ANTI PM SCL		Blood	S.S.T.		
ANTI XA ASSAY	HEP	Blood	Sodium Citrate	1	
ANTI ZNT8 ANTIBODIES					
ANTIBODY TITRE (A/N)	TITRE	Blood	E.D.T.A		
ANTICARDIOLIPIN - IgG	ACA	Blood	S.S.T.	6	May also be requested as part of antiphospholipid screen with lupus anticoagulant
ANTICARDIOLIPIN I - IgM	ACA	Blood	S.S.T.	6	May also be requested as part of antiphospholipid screen with lupus anticoagulant
ANTI-NEURONAL ABS	ANAB	Blood	S.S.T.	10	Immunofluorescence with all Positives confirmed by Immunoblot
Anti-Neuronal ABS CSF	ANAC	CSF	Plain 25ml Universal	11	
ANTIPHOSPHOLIPID	PHAB	Blood	Sodium Citrate	8	Samples required - 4 x Sodium Citrate, 1 x SST Refer to 'Lupus Anticoagulant' or 'Anticardiolipin' for details.
ANTITHROMBIN	AT3	Blood		1	Please see THROMBOPHILIA SCREEN for sample details.  New Reference Range 29/08/18 (83 - 128)
ANTITHROMBIN ANTIGEN	ATAG	Blood	Sodium Citrate		
ANTITHROMBIN MOLECULAR	ATAM	Blood	E.D.T.A		
AP50	CA50	Blood	S.S.T.		This is tested with CH50 as a functional alternative complement assay. Requests must be spun & frozen within 30mins & are sent frozen to Southmead.
APIXABAN	APIX	Blood	Sodium Citrate	1	This test is only performed after discussion with a Haematology Consultant otherwise is not routinely available. Results available within 2 hours of receipt at MPH and will be reported to Haematology consultant.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
APOLIPOPROTEIN A (Lp(a))	LPA	Blood	S.S.T.	42	
APOLIPOPROTEIN ApoA1 & B	APAB	Blood	S.S.T.	7	
APOLIPOPROTEIN ApoE GENOTYPE	APEG	Blood	E.D.T.A	1	Assay requires 4mls EDTA whole blood.
APOLIPOPROTEIN ApoE PHENOTYPE	APEP	Blood	E.D.T.A		Assay requires 4mls EDTA whole blood.
APTT	CS, APT	Blood	Sodium Citrate		
APTT RATIO	CS	Blood	Sodium Citrate	1	THERAPUTIC GUIDE FOR HEPARIN : APTTR 1.5 - 2.5
AQUAPORIN ABS (BLOOD)	AQUA	Blood	S.S.T.	13	Requestor name and location must be added to the clinical details. This is to ensure the referral laboratory can contact the requestor if required.
AQUAPORIN ABS (CSF)	AQUC	CSF	Plain Clotted	15	Requestor name and location must be added to the clinical details. This is to ensure the referral laboratory can contact the requestor if required.
ARGININE VASOPRESSIN	ADH	Blood			
ARSENIC (BLOOD)	ARS	Blood	E.D.T.A	61	Patient must be on a fish and seafood free diet for at least 1 week before test.
ARSENIC (URINE)	UARS	Urine	24hr Urine Container - No Preservative	40	Patient must be on a fish and seafood free diet for at least 1 week before test.
ASPERGILLUS - SPECIFIC IGE	ASPG	Blood	S.S.T.		Assay requires 0.5ml of sample.
ASPIRIN - SPECIFIC IGE	ASPN	Blood		8	See request item Rast - for details on analysis of specific allergens
AST	AST	Blood	S.S.T.	1	
ATENOLOL	ATEN	Blood	S.S.T.		
AUTOIMMUNE LIVER BLOT (EXTENDED)	AILB	Blood	S.S.T.	25	This panel includes the following tests: M2.M2-3E, sp100, PML, gp201, LKM-1, LC-1, SLA-LP and Ro-52
AUTO-IMMUNE PROFILE	AIP	Blood	S.S.T.	4	Includes anti-nuclear, parietal cell, smooth muscle and mitochondrial antibodies tested on mouse tissue by IFA.
B12	B12	Blood	S.S.T.	1	If strong clinical features of vitamin B12 deficiency (e.g. anaemia, glossitis, paraesthesia, with normal folate) levels up to 200 ng/L may indicate deficiency.
BARBITURATES	UDS, BA	Urine	Plain 25ml Universal		Boric acid containers are unsuitable for analysis
B-Cell Clonality (BLOOD)	BCCB	Blood	E.D.T.A	70	
B-Cell Clonality (BONE MARROW)	BCCM	Bone Marrow	E.D.T.A		
Bcr-Abl Kinase (BLOOD)	BCKB	Blood	E.D.T.A	68	
Bcr-Abl Kinase (BONE MARROW)	BCKM	Bone Marrow	E.D.T.A		
Bcr-Abl Mutation Analysis (BLOOD)	BCKB	Blood	E.D.T.A	68	
Bcr-Abl Mutation Analysis (BONE MARRO	BCKM	Bone Marrow	E.D.T.A		
Bcr-Abl Quantitative PCR (BLOOD)	T9MB	Blood	E.D.T.A	58	These samples must be tested within 48hrs of collection, samples more than 48hrs old are unsuitable for quantitative t(9;22) analysis.
Bcr-Abl Quantitative PCR (BONE MARRO	T9MM	Bone Marrow	E.D.T.A	61	These samples must be tested within 48hrs of collection.
Bcr-Abl Screen (BLOOD)	T9SB	Blood	E.D.T.A	23	
Bcr-Abl Screen (BONE MARROW)	T9SM	Bone Marrow	E.D.T.A	69	
BEE - SPECIFIC IGE	BEE	Blood	S.S.T.		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
BENCE JONES PROTEIN - URINE 24HR	24BJ	Urine	24hr Urine Container - No Preservative	16	
BENCE JONES PROTEIN - URINE RAND	BJP	Urine	Plain 25ml Universal	13	Samples collected into boric acid are NOT suitable for BJP analysis Ideally collect EMU and deliver to Laboratory as soon as possible
BENZODIAZEPINES	UDS	Urine	Plain 25ml Universal	1	Boric acid containers are unsuitable for analysis
BETA 2 GLYCOPROTEIN I ANTIBODIES	B2GI	Blood	S.S.T.	14	
BETA 2 MICROGLOBULIN	B2M	Blood	S.S.T.	7	Assay requires 0.5ml of sample. Normal range changed on 19/12/06
BETA 2 MICROGLOBULIN - RANDOM UR	UB2M	Urine	Plain 25ml Universal	11	Same protocol as blood. See Record 41
BETA 2 TRANSFERRIN (TAU PROTEIN) -	B2TT	CSF	Plain 25ml Universal	3	
BETA GALACTOSIDASE	WCE	Blood	E.D.T.A	38	
BETA HYDROXYBUTYRATE	FFA	Blood	Fluoride/Oxalate	4	Check first with Duty Biochemist (07770645278 or Duty.Biochemist@SomersetFT.nhs.uk)
BETA-INTERFERON NEUTRALISING Ab	INTF	Blood	S.S.T.	21	
BETHESDA ASSAY	BETH	Blood	Sodium Citrate	9	Samples Required - 2 x Sodium Citrate
BHCG (HYDATIDIFORM MOLE)	BHCG	Blood	S.S.T.	3	
BHCG (PREGNANCY TEST)	SPG	Blood	S.S.T.	1	
BHCG (TUMOUR MARKER)	HCGT	Blood	S.S.T.	1	Reference Range: <5 iu/L
BICARBONATE	BIC	Blood	S.S.T.	1	Analysis should preferably take place on the day of collection
BICARBONATE - RANDOM URINE	UBIC	Urine	Plain 25ml Universal	1	
BILE ACIDS	BA	Blood	S.S.T.	1	
BILE PIGMENTS - RANDOM URINE		Urine	Plain 25ml Universal		
BILIRUBIN	BILI	Blood	S.S.T.	1	Done as part of an LFT. Haemolysed samples are unsatisfactory.
BIOTINIDASE	BIOT	Blood	E.D.T.A	26	Min Vol Adult - 2 ml blood Min Vol Paediatric - 250 ul blood
BLEEDING TIME	BT	Blood			Test no longer available please refer to consultant haematologist
BLOOD FILM	GPF	Blood	E.D.T.A	1	
BNP (NT Pro BNP)	BNP	Blood	S.S.T.	1	
BONE MARO FAIL NGS PNL (BM)	MFM	Bone Marrow	E.D.T.A		
BONE MARRO FAIL NGS PNL (B)	MFB	Blood	E.D.T.A	60	
BONE MARROW ASPIRATE	BM	Bone Marrow	E.D.T.A		Slides are prepared and stained by Haematology lab. Examined by consultants. Reported by secretaries.
Bone Marrow Molecular (Non-Bristol)	BMTR	Bone Marrow	E.D.T.A		
Bone Marrow Molecular (Unspecified)	BMMO	Bone Marrow	E.D.T.A	1	
BONE SPECIFIC ALK PHOS	BSAP	Blood	S.S.T.	2	Lithium Heparin is unsuitable.
BP3	IPB3	Blood			
Braf V600e Mutation (BLOOD)	BRAF	Blood	E.D.T.A		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
Braf V600e Mutation (BONE MARROW)	BRAM	Bone Marrow	E.D.T.A	1	
BROMIDE	BROM	Blood	S.S.T.		This test is no longer available. Refer any enquiries to Duty Biochemist (07770645278 or Duty.Biochemist@SomersetFT.nhs.uk)
BUTYRYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
C. REACTIVE PROTEIN	CRP	Blood	S.S.T.	1	
C1 ESTERASE INHIBITOR	C1ES	Blood	S.S.T.		Complement C3/C4 must also be requested. Samples must arrive in Lab within 8hrs of collection, they are then spun and frozen.  ReferenceRanges:- Immunochemical 0.21-0.38g/L, Functional >70%
C1Q BINDING	C1QB	Blood		35	No longer available
C3	C3	Blood	S.S.T.	1	C3 and C4 are also performed as part of an ANCA screen. Assay performed at HUB only.
C3 NEPHRITIC FACTOR	C3NF	Blood	S.S.T.	6	
C3F3R - CNL (B)	C3FB	Blood	E.D.T.A		
C3F3R - CNL (BM)	C3FM	Bone Marrow	E.D.T.A		
C4	C4	Blood	S.S.T.	1	C3 and C4 are also performed as part of an ANCA screen. Assay performed at HUB only.
CA 125	C125	Blood	S.S.T.	1	Assay requires 2ml of sample.  Reference Range: 0 - 35 ku/l
CA 153	C153	Blood	S.S.T.	1	Assay requires 2ml of sample.
CA 19-9	C199	Blood	S.S.T.	1	Assay requires 2ml of sample.  0 - 35 ku/l
CA 19-9 - FLUID	FL19	Misc Fluid		5	
CADMIUM	CD	Blood	E.D.T.A	1	
CAERULOPLASMIN	CAER	Blood	S.S.T.	4	Used in the investigation of Wilson's disease. Assay requires 1ml of sample. Please only request this test in patients more than 3 years and less than 40 years. Caeruloplasmin is used in the investigation of abnormal ALT/AST or if presenting with neurological symptoms consistent with Wilson's (BSG guidelines, 2017). For an other queries contact the Duty Biochemist 0777 064 5278 or Duty.Biochemist@SomersetFT.nhs.uk
CAFFEINE	CAFF	Blood			
CALCITONIN	CALC	Blood	S.S.T.	91	Contact laboratory for correct tubes. The blood must be taken into a plastic syringe and then placed in ice cooled plastic tubes. Also take blood for Calcium.
CALCIUM	CA	Blood	S.S.T.	1	All requests are now accompanied by a mathematically calculated Adjusted Calcium
CALCIUM - RANDOM URINE	UCA	Urine	Plain 25ml Universal	1	Boric acid samples are unsuitable.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
CALCIUM - URINE 24HR	24CA	Urine	24hr Urine Container - HCL Acid	1	24hr urine containers with HCL preservative are available from the Laboratory. Please ring 2283. Boric acid containers are unsuitable for analysis.
CALCIUM/CREAT RATIO	CCR	Urine	Plain 25ml Universal	1	No preservative required if the sample is fresh and sent straight to the laboratory.
CALCIUM:CREATININE CLEARANCE RA	CACR	Urine	24hr Urine Container - HCL Acid	2	24hr urine sample required along with a paired serum sample.
CALCULUS	CLUT	Stone	Plain 25ml Universal		
Calreticulin (BLOOD)	CALR	Blood	E.D.T.A	80	
CANNABINOIDS	CANN, U	Urine	Plain 25ml Universal		Assay performed at Musgrove Park only. Boric acid containers are unsuitable for analysis.
CARBAMAZEPINE	CABZ	Blood	S.S.T.	1	This test is now performed only at MPH Blood is normally taken during trough level immediately before the next dose.
CARBO DEFICIENT TRANSFERRIN	CDT	Blood	S.S.T.	6	
CARBON MONOXIDE	CO	Blood	Heparinised Syringe		Done on blood gas analyser.
CARNITINE (FREE/TOTAL) (BLOOD)	CARN	Blood	S.S.T.	28	A minimum of 0.15ml of plasma. Plasma is preferred.
CARNITINE (FREE/TOTAL) (URINE)	UCAR	Urine	Plain 25ml Universal		A minimum of 300ul of urine is required.
CARNITINE PROFILE	CAPR	Blood Spot	Guthrie Card (Li Hep Whole Blood)	19	The sample should arrive on a blood spot Guthrie card.
CAROTENES		Blood	S.S.T.		
CART	GAST	Blood	E.D.T.A	24	This test is done as part of the Gut Hormone Profile. For a full set of instructions see GASTRIN  Please ensure that this is just a 'CART' request, and not the full Gut Hormone, if in doubt enclosed a copy of the original form when sending away.
CAT - SPECIFIC IGE	CAT	Blood			
CATECHOLAMINES	CATS	Urine	24hr Urine Container - No Preservative	3	Plain containers are the specimen type of choice, the performing lab is still accepting acidified containers.  Boric acid containers are unsuitable for analysis.
CD4	FID	Blood	E.D.T.A	3	CD4 Monitoring for HIV patients
CD4 SEND-AWAY	TCS	Blood	E.D.T.A		
CEA	CEA	Blood	S.S.T.	1	0 - 5 ug/l
CEA - FLUID	FCEA	Misc Fluid			
CELL MARKERS		Blood	E.D.T.A		
CENTROMERE ANTIBODIES	CEN	Blood	S.S.T.		
CH50	CA50	Blood	S.S.T.		Functional assay to check the classical pathway of the complement system. Requests must be spun & frozen within 30mins & are sent frozen to Southmead.
Chimaerism Post Monitoring (BLOOD)		Blood	E.D.T.A		
Chimaerism Post Monitoring (BONE MARR)		Blood	E.D.T.A		
CHIMERISM MONITORING (B)	CHIB	Blood	E.D.T.A	56	
CHIMERISM MONITORING (BM)	CHIM	Bone Marrow	E.D.T.A		



<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
CHLORIDE	CL	Blood	S.S.T.	1	
CHLORIDE - URINE	UCL	Urine	Plain 25ml Universal	1	
CHOLESTEROL	CHOL	Blood	S.S.T.	1	
CHOLESTEROL - FLUID	FCHO	Misc Fluid	Plain 25ml Universal	1	
CHOLINESTERASE STUDIES	CHOS	Blood	E.D.T.A	26	Used to test for suxamethonium sensitivity and occupational monitoring in workers handling organophosphate pesticides. Please discuss with Duty Biochemist on 0777 064 5278 or email Duty.Biochemist@SomersetFT.nhs.uk before sending away.
CHR	CHR	Blood	E.D.T.A	2	Analysis is performed on the Advias
CHROMIUM (EDTA)	CHRE	Blood	E.D.T.A		
CHROMIUM (TRACE METAL)	CHRM	Blood	Trace Metal Serum Tube	14	
CHROMOGENIC FACTOR VIII (8)	CR8	Blood	Sodium Citrate	1	Factor 8 level specifically for Haemophilia A patients being monitored on any factor 8 replacement products including Advate/Elocta/Refacto
CHROMOGRANIN	CHRO	Blood	E.D.T.A	23	This is a test for Chromogranin only, for Gastrin or Gut Hormone see relevant protocol. Patient should be Fasting.
CHRONIC B-CELL PANEL		Blood	E.D.T.A		Request comprises: CD3, CD4, CD8, CD5, CD10, CD19, TNK, CD20, CD23, FMC7, CD79b, CD38, Kappa, Lambda.
CHRONIC LEUKAEMIA FACS		Blood	E.D.T.A		
CITRATE - RANDOM URINE	CIT	Urine	Plain 25ml Universal		
CITRATE - URINE 24HR	24CT	Urine	24hr Urine Container - HCL Acid	14	24hr urine must contain 50ml of 10% HCl as preservative.
C-KIT D816V (B)	CKTB	Blood	E.D.T.A	77	
C-KIT D816V (BM)	CKTM	Bone Marrow	E.D.T.A		
CK-MB MASS	MASS	Blood	S.S.T.		Only available to Chest Pain Assessment Unit, form MUST be signed by chest pain assessment nurse
CLOBAZAM	CLOB	Blood	Plain Clotted	129	Use plain or Lithium Heparin tube WITHOUT gel separation.
CLOMIPRAMINE	CLOM	Blood	S.S.T.		
CLONAZEPAM	UDS	Urine	Plain 25ml Universal	1	
CLOZAPINE	CLOZ	Blood	Plain Clotted	21	SST samples are unsuitable.
COAGULATION PROFILE	COPR	Blood	Sodium Citrate		Only requestable with approval of Consultant Haematologist Samples Required - 4 x Sodium Citrate
COBALT (EDTA)	COBE	Blood	E.D.T.A		
COBALT (TRACE METAL)	COB	Blood	Trace Metal Serum Tube	14	
COCAINE	UDS, CO	Urine	Plain 25ml Universal		Boric acid containers are unsuitable for analysis
CODEINE - RANDOM URINE	CODU	Urine	Plain 25ml Universal		
COELIAC SCREEN	CSC	Blood	S.S.T.		Performed when positive tTG or igA deficient
COLLAGEN ABS	COAB	Blood	S.S.T.		Test no longer available.
CONJUGATED BILIRUBIN	CONJ	Blood	S.S.T.	1	Haemolysed samples are unsatisfactory.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
CONNEXIN 26 GENETIC TEST	C26G	Blood	E.D.T.A		
CONTACT FACTORS	CFAC	Blood	Sodium Citrate		
CONTACTIN 2 ASSOC PROT AB CSF	C2AC	CSF	Plain 25ml Universal	9	
CONTACTIN 2 ASSOCIATED PROT AB	C2AA	Blood	S.S.T.	8	
COOMBS TEST	DAT	Blood	E.D.T.A		EDTA sample required. If blood group also required sample must be labelled as per Transfusion sample acceptance policy
COPEPTIN	COPT	Blood	S.S.T.	23	Discuss all requests with Duty Biochemist (07770645278 or Duty.Biochemist@SomersetFT.nhs.uk) before sample is taken.
COPPER - BLOOD	CU	Blood	Trace Metal Serum Tube	7	Used in the assessment of nutritional status. Assay requires 2ml of sample.  Please only request this test in the investigation of possible copper deficiency. For ?Wilson's, request Caeruloplasmin levels only. For any other queries contact the Duty Biochemist on 0777 064 5278 or Duty.Biochemist@SomersetFT.nhs.uk
COPPER - TISSUE		Tissue	Plain 25ml Universal		Requires 10mg fresh tissue (DO NOT USE FORMALIN).  For paediatric requests, smaller sample volumes than those quoted for each assay may be acceptable.
COPPER - URINE 24HR	24CU	Urine	24hr Urine Container - No Preservative	8	Used in the investigation of Wilson's disease. Please only request this test in the investigation of ? Wilson's. For any other queries contact the Duty Biochemist on 0777 064 5278 or Duty.Biochemist@SomersetFT.nhs.uk.
CORRECTION TESTS	CORR	Blood	Sodium Citrate	1	Performed in the investigation of an abnormal PT or APTT. If the times correct a factor deficiency is suspected but if it does not an inhibitor is suspected. Samples Required - 3 x Sodium Citrate
CORTISOL	COR	Blood	S.S.T.	1	Random serum cortisol is a poor indicator of adrenal insufficiency. Samples should be taken around 9 am. Early morning cortisol (8-9 am): <150 nmol/L Adrenal insufficiency must be considered. 150-400 nmol/L Adrenal function may be normal but insufficiency possible if there are clinical features to suggest adrenal insufficiency (listed below) >400 nmol/L Adrenal insufficiency very unlikely. Results may be unreliable in the presence of oral exogenous oestrogens (COCP, HRT), anticonvulsants and steroids. If there are clinical features of adrenal insufficiency in the presence of a cortisol <400 nmol/L (e.g. weight loss, skin pigmentation, postural hypotension, electrolyte abnormalities - hyponatraemia, hyperkalaemia), pituitary tumour or radiotherapy to the head and neck discuss with Endocrinology via A&G.
CORTISOL - RANDOM URINE		Urine	Plain 25ml Universal		Must be 24hr sample, spot urine not acceptable.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
CORTISOL - URINE 24HR	UCOR	Urine	24hr Urine Container - No Preservative	2	Must be 24hr sample, spot urine not acceptable.
CORTISOL/CREATININE RATIO	COCR	Urine	Plain 25ml Universal		
COTININE	COTI	Blood		69	
C-PEPTIDE (PLASMA)	CPTD	Blood	E.D.T.A	6	
C-PEPTIDE/CREAT RATIO (URINE)	UPEP	Urine	Boric Acid Universal	4	Sample stable for 72hrs at room temperature.
CPK	CK	Blood	S.S.T.	1	Haemolysed samples are unsuitable for analysis.
CREATINE (URINE)	CRET	Urine	Plain 25ml Universal	63	
CREATINE PHOSPHOKINASE	CK			1	
CREATININE	CR	Blood	S.S.T.	1	
CREATININE - ASCITIC FLUID	ASCR	Ascitic Fluid	Plain 25ml Universal	1	
CREATININE - RANDOM URINE	UCRE	Urine	Plain 25ml Universal	4	Boric acid containers may be used.
CREATININE - URINE 24HR	24CR	Urine	24hr Urine Container - No Preservative	1	24hr urine containers available from the Laboratory ring 2283. Requires no preservative. . No preservative is required.
CREATININE CLEARANCE - 24HR	CC	Urine	24hr Urine Container - No Preservative	1	A ward blood may be collected 24hrs before or after the urine collection. GP bloods may be collected 48hrs before or after collection.. No preservative is required. Specimens which contain HCl may be used.
CREATININE CLEARANCE - 4HR	CC4	Urine	24hr Urine Container - No Preservative		
CRITHIDIA	CRIT	Blood	S.S.T.	14	Requests processed only after discussion with Immunology.
CRYOGLOBULIN	CRYO	Blood	S.S.T.	8	Contact laboratory to arrange use of the portable incubator. Once the blood is taken it should be placed immediately in a pre-warmed 37°C incubator and delivered to the Laboratory as soon as possible. (Samples Required 2 x SST, 2 x EDTA)
CSF ACE	CASE	CSF	Plain 25ml Universal		If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
CT-proAVP	COPT	Blood	S.S.T.	23	
CTX (C-TERMINAL TELOPEPTIDE)	CTX	Blood	E.D.T.A	30	Sample must reach lab within 8hrs of collection.
CYCLIC AMP	CAMP	See Info			Assay requires 5ml of blood taken into a special tube. The tube must be kept on ice prior to venepuncture and centrifuged immediately. Also take a 2hr urine sample. Measure the urine volume and send away a frozen 5ml aliquot with the blood. The blood should be frozen immediately after centrifugation. Use SAS form. For Anticoagulant:- Dissolve 1.86g of Disodium EDTA in 9.5ml of water. Add dilute NaOH to pH 7.5 and make up to 10mls with water. Use 0.5ml for the blood sample.
Cyclin D1 Overexpression (BLOOD)	CD1B	Blood	E.D.T.A		NO LONGER AVAILABLE
Cyclin D1 Overexpression (BONE MARRO	CD1M	Bone Marrow	E.D.T.A		NO LONGER AVAILABLE
CYCLOSPORIN - OTHER	CYCL	See Info	E.D.T.A	4	See separate record for destinations of individual patients blood. If possible note time since last dose.
CYCLOSPORIN - SOUTHMEAD	CYCB	Blood	E.D.T.A	2	The assay at Southmead requires a minimum of 50ul unless otherwise stated. If result required urgently - contact Southmead Toxicology for result or expedite analysis.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
CYSTINE - 24HR URINE QUANTITATIVE	24CY	Urine	24hr Urine Container - HCL Acid		Normal range is sex related.
CYSTINE - RANDOM URINE SCREEN	CYST	Urine	Plain 25ml Universal		
CYTOCHEMISTRY	CYTO	Blood	E.D.T.A		Prepared by Haematology Lab, reported by Consultant. (Largely replaced by modern immunophenotyping methods). May comprise Sudan Black and/or Dual Esterase dependent upon morphology
CYTOGENETICS (BLOOD)	CGEN	Blood	Lithium Heparin	1	NOTE:- Blood which is more than 3 days old cannot be processed. NOTE:- An EDTA sample is required to exclude Fragile X.  A "Bristol Cytogenetics Form" MUST BE COMPLETED by requesting clinician & sent with the specimens to biochemistry, this form is available here:  <a href="http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf">http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf</a>
CYTOGENETICS (BONE MARROW)	BGEN	Bone Marrow	Plain 25ml Universal	1	NOTE:- Blood which is more than 3 days old cannot be processed. NOTE:- An EDTA sample is required to exclude Fragile X. Bone Marrow Aspirate samples must reach external lab within 48hrs.  A "Bristol Cytogenetics Form" MUST BE COMPLETED by requesting clinician & sent with the specimens to biochemistry, this form is available here:  <a href="http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf">http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf</a>
CYTOGENETICS (SALIVA)	SGEN	Saliva	Sterile Container (appropriate size)		NOTE:- An Blood EDTA sample is required to exclude Fragile X.  A "Bristol Cytogenetics Form" MUST BE COMPLETED by requesting clinician & sent with the specimens to biochemistry, this form is available here:  <a href="http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf">http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf</a>
CYTOSPIN FILM	CYSP	CSF	Plain 25ml Universal	4	Cytospin is prepared by Haematology lab and examined by consultants.  If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
CYTOTOXIC ANTIBODIES	CYTA	Blood	S.S.T.	1	
DDAVP TRIAL	DAVP	Blood	Sodium Citrate		Request for FVIII and vWF Ag pre and post DDAVP.  Minimum of 2x Citrate samples required for PRE or POST. If both PRE & POST are required, then take 4x Citrate samples.
DDIMER	DD	Blood	Sodium Citrate	1	Normal <0.5 mg FEU/ml PE usually >0.6 mg FEU/ml DVT as per protocol If it for the investigation of DIC please request XDP.
DEOXYPYRIDINOLINE CROSSLINKS	CROS	Blood			
DESETHYLAMIODARONE	DEAM	Blood	S.S.T.		
DEXAMETHASONE	DBSS	Blood	S.S.T.	8	
DHEAS	DHEA	Blood	S.S.T.	8	Assay requires at least 0.3ml of serum.
DIGOXIN	DIGO	Blood	S.S.T.	1	The sample should be taken at least 6hrs post dose.
DIHYDROTESTOSTERONE	DHT	Blood	S.S.T.	2	This test requires an absolute Minimum of 600ul of Serum.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
DIRECT ANTIGLOBULIN TEST (DAT)	DAT	Blood	E.D.T.A		EDTA sample required. If blood group also required sample must be labelled as per Transfusion sample acceptance policy
DIRECT COOMBS TEST (DCT)	DAT	Blood	E.D.T.A		EDTA sample required. If blood group also required sample must be labelled as per Transfusion sample acceptance policy
DNA ANTIBODIES - DOUBLE STRANDED	ADNA	Blood	S.S.T.	8	Test includes C3 and C4.
DOTHIEPIN	AMIT	Blood	Plastic Plain Clotted		
DOWNS/NTD SCREENING	D	Blood	S.S.T.	1	Downs screening is now performed by Sheffield Immunology Lab. Samples are sent on a daily basis (Mon to Thurs) Any high risk results will be returned to the lab and telephoned to the requestor/anti-natal clinic Low risk results returned to the requestor via paper reporting
DPD DIHYDROPYRIMIDINE DEHYDROG		Blood	E.D.T.A		
DPD MPH / DPD YDH	DPDM /	Blood	E.D.T.A		This should only be requested once per patient
DRUG SCREEN - POST MORTEM BLOO	PMDS	Blood			
DRUG SCREEN - POST MORTEM URINE	PMUD	Urine			
DRUG SCREEN (URINE)	UDS	Urine	Plain 25ml Universal	1	Boric Acid container is unsuitable for analysis.
ELF (ENHANCED LIVER FIBROSIS)	ELF	Blood	S.S.T.	6	
EMA BINDING ASSAY	EMAB	Blood	E.D.T.A	100	An "Haemopath Req Form v2" Request Form MUST BE COMPLETED by requesting clinician & sent to biochemistry with the bloods, this form is available on Q-Pulse "HFT12" or contact the Lab.
ENA SCREENING	ENA	Blood	S.S.T.		If positive anti RO, LA, Sm, RNP, Jo1 and SCL70 will be tested for.
ENDOMYSIAL ANTIBODY	CSC	Blood	S.S.T.		Part of coeliac screen
EOSINOPHIL CATIONIC PROTEIN (ECP)	ECP	Blood	S.S.T.	12	
EPANUTIN	PHT	Blood	S.S.T.	1	
EPILIM		Blood	S.S.T.		
ERYTHROCYTE PORPHYRIN	BPOR	Blood	E.D.T.A	21	
ERYTHROPOIETIN	ERYT	Blood	S.S.T.	12	A minimum volume of 500ul of serum is required for analysis.
ESR	ESR	Blood	E.D.T.A	1	Only done on patients with Temporal arteritis, cranial arteritis, Giant Cell arteritis, PMR or those on steroid treatment.
ESSENTIAL FATTY ACIDS	EFA	Blood	E.D.T.A		Ensure sample is sent to the Laboratory immediately upon taking.
ETHANOL	ALC			1	
ETHOSUXIMIDE	ETHO	Blood	S.S.T.		Assay requires 0.5ml of sample. The sample is normally taken 3hrs post dose.
ETHYL GLUCURONIDE + E. SULPHATE	EGES	Urine	Plain 25ml Universal	17	Only Requestable by gastroenterology for investigation of alcohol use in liver transplant patients.  Due to the possibility of false positive and false negative EtG results it is advisable to transport and store samples at -20 °C until analysis.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
ETHYLENE GLYCOL (ESTIMATION)		Blood			Estimation of Ethylene Glycol is no longer performed at SPS as it is subject to too many possible interferences. Osmolar Gap (request item OGAP) is requested instead to give an indication of the presence of osmotically active substances. This should be backed up if required clinically by the consultant Chemical Pathologist with a quantitative Ethylene Glycol (request item EGLY, sent away to City Hospital Birmingham - N.B. Gel separator tubes (SST) are not suitable for analysis).
ETHYLENE GLYCOL (QUANTITATION)	EGLY	Blood	Fluoride/Oxalate	1	Gel separator tubes (SST) are NOT suitable for this test. Osmolar Gap (OGAP) should be performed first if required to demonstrate the presence of osmotically active substances. Discuss with Chemical Pathologist 24/7
ETON LAMBERT	VCAB	Blood	S.S.T.	20	
Exon 12 Mutation (Jak2) (BLOOD)	JAEB	Blood	E.D.T.A	1	
Exon 12 Mutation (Jak2) (BONE MARROW)	JAEM	Bone Marrow	E.D.T.A		
FACS		Blood	E.D.T.A		
FACTOR II ASSAY	F2	Blood	Sodium Citrate	10	New Reference Range 29/08/18 (79 - 131)
FACTOR II MUTATION	F2M	Blood		9	Please see THROMBOPHILIA SCREEN for sample details.
FACTOR IX ASSAY	F9	Blood	Sodium Citrate	6	New Reference Range 29/08/18 (65 - 150)
FACTOR IX POST IDELVION	I9	Blood	Sodium Citrate		For Patients on on Idelvion post infusion
FACTOR V ASSAY	F5	Blood	Sodium Citrate	8	New Reference Range 29/08/18 (62 - 139)
FACTOR V LEIDEN	F5L	Blood		19	Please see THROMBOPHILIA SCREEN for sample details.
FACTOR VII ASSAY	F7	Blood	Sodium Citrate	8	New Reference Range 29/08/18 (50 - 129)
FACTOR VIII ASSAY	F8	Blood	Sodium Citrate	6	
FACTOR VIII GENE INVESTIGATIONS	F8GE	Blood	E.D.T.A		
FACTOR X ASSAY	F10	Blood	Sodium Citrate	13	New Reference Range 29/08/18 (77 - 131)
FACTOR XI ASSAY	F11	Blood	Sodium Citrate	7	New Reference Range 29/08/18 (65 -150)
FACTOR XII ASSAY	F12	Blood	Sodium Citrate	7	
FACTOR XIII ASSAY	F13	Blood	Sodium Citrate	23	
FAECAL CALPROTECTIN	FCAL	Faeces	Faecal Specimen Container	11	
FAECAL CALPROTECTIN	FCAL	Faeces	Faecal Specimen Container	179	
FAECAL CHYMOTRYPSIN	FCHY	Faeces			No longer available - send for Faecal Elastase instead.
FAECAL ELASTASE	FELA	Faeces	Faecal Specimen Container	7	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
Faecal Electrolytes	FAEE	Faeces	Faecal Specimen Container	3	Liquid Stool samples only, formed samples are not suitable for analysis.  Contains: Sodium, Potassium, Chloride and calculated Osmotic Gap tests  Osmotic gap equation used: $290 - 2 * (\text{Faecal sodium result} + \text{Faecal Potassium result})$  Faecal osmotic gap interpretation: >100 mOsm/kg suggests osmotic diarrhoea <50 mOsm/kg suggests secretory diarrhoea 50 to 100 mOsm/kg is equivocal
FAECAL FAT	FFAT	Faeces			No longer available. Please contact Duty Biochemist
FAECAL LACTOFERRIN		Faeces	Faecal Specimen Container		
FAECAL OCCULT BLOOD	FOB	Faeces	Faecal Specimen Container	3	Test No Longer Routinely Available - Book in as FOB and store sample in -20 freezer in HUB specimen reception. Samples are kept for two weeks prior to discarding.
FAECAL REDUCING SUBSTANCES		Faeces	Faecal Specimen Container		
FAECAL THIN LAYER CHROMATOGRAP	FTLC	Faeces	Faecal Specimen Container		
FAMILY ORIGIN QUESTIONNAIRE TAUNT	FOQT	Blood	E.D.T.A	1	
FAMILY ORIGIN QUESTIONNAIRE YEOVIL	FOQY	Blood	E.D.T.A	1	
FAT SOLUBLE VITAMIN PROFILE	VITS	Blood	Lithium Heparin	30	This request includes Vitamin A, Vitamin E.
FEATHER - SPECIFIC IGE	FEAT	Blood		5	
FELTY'S SYNDROME	3E			106	See page 2 of form 3E for sample requirements For further information refer to <a href="http://www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS">www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS</a>
FERRITIN	FER	Blood	S.S.T.	1	Female: 11 - 307 ug/L Male: 24 - 336 ug/L This request item should be used for all routine Ferritin requests and is analysed at the HUB. Ferritin (For iron infusion), request code IFER, is analysed only at MPH and is requestable via Order Comms by the Haematology Consultants. See specific entry for further detail. Ferritin (For COVID Panel), request code CFER, is analysed only at MPH and is requestable via Order Comms for cases where a diagnosis of COVID has been made. See specific entry for further detail.
FERRITIN (For COVID Panel)	CFER	Blood	S.S.T.	1	Ferritin (For COVID Panel) is analysed only at MPH and is requestable via Order Comms as part of a panel of tests used only for COVID cases. This request code must be used ONLY where a diagnosis of COVID has been made. ALL routine ferritin requests should be made using request code FER and will be analysed at the HUB laboratory. See 'Ferritin (For Iron Infusion)' for requesting in acute cases where urgent Iron infusion may be indicated.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
FERRITIN (For Iron Infusion)	IFER	Blood	S.S.T.	1	Ferritin (For iron infusion) is analysed only at MPH and is requestable via Order Comms by the Haematology Consultants. This request code must be used ONLY where an urgent iron infusion may be indicated. ALL other ferritin requests should be made using request code FER and will be analysed at the HUB laboratory. See 'Ferritin (For COVID Panel)' for requesting in acute cases where a diagnosis of COVID has been made.
FETAL GENOTYPING FROM MATERNAL	FGMB	Blood	E.D.T.A		16 mls of EDTA blood required. Request forms held and completed by Obs and Gyn - <a href="https://nhsbtdbe.blob.core.windows.net/umbraco-assets-corp/1432/frm4674.pdf">https://nhsbtdbe.blob.core.windows.net/umbraco-assets-corp/1432/frm4674.pdf</a> Need to be at IBGRL within 48 hours of collection Advise send by guaranteed next day delivery by Royal Mail  Please advise that samples must be sent to laboratory and be received before 5pm Monday to Friday as have to be sent to IBGRL within 48 hours of collection
FETAL MATERNAL HAEMORRHAGE (FL	FLOW (F	Blood	E.D.T.A		Referred on RCI form 1A by Blood Transfusion following a positive or indeterminate result by acid elution
FETO MATERNAL HAEMORRHAGE	FHM	Blood	E.D.T.A		Microscopy elution based test to quantitate fetal cells in maternal circulation (fetal maternal haemorrhage (FMH)) Requirement for prophylactic anti-D is based on FMH result, Antibody screen result and clinical need.
FIBRIN DEGRADATION PRODUCTS	XDP	Blood	Sodium Citrate		These is a semi-quantitative assay used in the workup to detect DIC. They are not to used for investigation of venous thrombosis. This test is no longer available - it has been replaced by the D-Dimer assay.
FIBRINOGEN	FIB	Blood	Sodium Citrate	1	New reference Range 29/08/18
FIBRINOLYSIS STUDIES	FILY	Blood	Sodium Citrate		
FID Immuno Deficiency Panel	FID	Blood	E.D.T.A	3	See 'CD4' for Details
FIP1L1-PDGFRA MONITRING (B)	FIPB	Blood	E.D.T.A	60	
FIP1L1-PDGFRA MONITRING (BM)	FIPM	Bone Marrow	E.D.T.A		
FIT - QUANT FAECAL IMMUNOCHEM TE	FIT	Faeces		4	Strictly Cancer Office use only
FK506	TAC	Blood	E.D.T.A	17	
FLECAINIDE	FLEC	Blood	Plain Clotted	25	Optimum time to collect sample: 1 hour before next dose
FOLATE - SERUM	FOL	Blood	S.S.T.	1	<3 ug/L suggests deficiency
FOOD ALLERGENS - SPECIFIC IGE	FOOD	Blood	S.S.T.	5	
FREE ANDROGEN INDEX	FAI	Blood		5	
FREE DPD		Urine	24hr Urine Container - No Preservative		
FREE FATTY ACIDS	FFA	Blood	Fluoride/Oxalate	4	Ensure sample is sent to the Laboratory immediately upon taking.
FREE FETAL DNA		Blood	E.D.T.A		16 mls of EDTA blood required. Request forms held and completed by Obs and Gyn Need to be at IBGRL within 48 hours of collection Advise send by guaranteed next day delivery by Royal Mail



<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
FREE LIGHT CHAINS	FLC	Blood	S.S.T.	6	Separate sample required for FLC if other assays requested.  Renal impairment may increase both kappa and lambda light chain concentrations, and the free light chain ratio may also be increased to 3.17
FREE T3	FT3	Blood	S.S.T.	1	TSH is the Thyroid first line screening test. If the Clinical details include one or more of the following a FT3 will be automatically be performed: Hyperthyroidism, treatment with amiodarone & Hypopituitarism.  4.0 - 6.6 pmol/L
FREE T4	FT4	Blood	S.S.T.	1	TSH is the Thyroid first line screening test. If the Clinical details include one or more of the following a FT4 will be automatically be performed: Hyperthyroidism, treatment with amiodarone & Hypopituitarism.  7.9 - 20 pmol/L  1st Trimester: 6.7 - 20 pmol/L 2nd Trimester: 5.8 - 20 pmol/L 3rd Trimester: 6.1 - 20 pmol/L
FREE TESTOSTERONE		Blood			
FRIEDRICH'S ATAXIAS	FRIE	Blood			
FRUCTOSAMINE	FRUC	Blood	S.S.T.	20	
FSH	FSH	Blood	S.S.T.	1	Male: 1.3 - 19.3 u/L Female Follicular: 4.1 - 13.3 u/L Female Mid-Cycle: 3.1 - 24.2 u/L Female Mid-Luteal: 1.7 - 9.5 u/L Female Post-Menopausal: 16.7 - 113.6 u/L
FULL BLOOD COUNT	B	Blood	E.D.T.A	1	At least 2ml blood required.
FVIII binding assay (normandy)	F8B	Blood	Sodium Citrate		see plasma warfarin,
FVIII DOSE RESPONSE	F8D	Blood	Sodium Citrate		Please contact Coagulation and mark forms pre and post FVIII (Samples Required - 2 x Sodium Citrate)
G6PD (SEND)	G6PD	Blood	E.D.T.A	13	
G6PD SCREENING TEST	G6PS	Blood	E.D.T.A	1	
GABA B, AMPA 1 and 2 RECEPTOR ANT	GAMP	Blood	S.S.T.	6	Serum 1ml; plasma is acceptable but CSF not required
GABA-A RECEPTOR ABS	GABA	Blood	S.S.T.	30	
GAD 65 ANTIBODIES		Blood			
GAD ANTIBODIES		Blood			
GALACOSAEMIA SCREEN (GAL-1-PUT)	GALA	Blood	Lithium Heparin		It is important that the patient has NOT received any transfused erythrocytes for this test to be valid.
GALACTITOL - RANDOM URINE	UGAL	Urine	Plain 25ml Universal	10	Assay requires 10ml of sample. Send away daily via NPEX by 1st class post. Use our form.
GALACTOSE 1 PHOSPHATE	G1P	Blood	Lithium Heparin	67	NOTE:- The acceptable level for galactosaemic patients on a galactose free diet is <155 umol/l. Use our form. Please indicate if patient has been Transfused.  Requires minimum of 1ml whole blood or 0.75mls from Paediatric patients.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
GALACTOSIDASE	WCE	Blood	E.D.T.A	38	
GAMMA GT	GGT	Blood	S.S.T.	1	
GANGLIONIC ACETYLCHOLINE RECEPT	GARA	Blood	S.S.T.	26	
GANGLIOSIDE D1B ANTIBODIES		Blood	S.S.T.		
GANGLIOSIDE M1 ANTIBODIES	M1	Blood	S.S.T.	15	
GANGLIOSIDE M2 ANTIBODIES		Blood	S.S.T.		
GANGLIOSIDE Q1B ANTIBODIES	D1B	Blood	S.S.T.	14	
GASTRIN	GAST	Blood	E.D.T.A	24	This is a test for Gastrin, for a Full Gut Hormone Profile or Chromogranin see relevent protocol, if in doubt enclose a copy of the original form when sending away.  Sample must be taken immediately to the laboratory on ice. If the sample is haemolysed then the test must be repeated. Also do a calcium and urea.
GENETICS OF OBESITY STUDY (GOOS)	GOOS	Blood	E.D.T.A		
GENTAMYCIN	GENT	Blood	Plain Clotted	1	Time of collection is critical, collection should be within 6 hours pre-dose and the time of the last dose should be stated on the request. Dosing regimen should also be indicated. Incorrect timing can result in meaningless or difficult to interpret results. For this reason, antibiotic assays should not be placed on the phlebotomy list. Post-dose levels are no longer tested and should not be sent without prior discussion with Consultant Microbiologist. This should be noted on the request.
GFR ESTIMATION	GFR	Blood	S.S.T.	1	eGFR has not been validated for use in acute renal failure, pregnancy, oedematous states, muscle wasting disorders, amputees and malnourished people. eGFR should be multiplied by 1.212 for African-Caribbean patients. GFR estimates between 60-89 do not indicate CKD unless there is other existing laboratory/clinical evidence of disease.
GLIADIN ANTIBODIES - IgA	GLA	Blood			Test not available. Request coeliac screen.
GLIADIN ANTIBODIES - IgG	GLA	Blood			Test not available. Request coeliac screen.
GLOM. BASEMENT MEMBRANE ABS	AGBM	Blood	S.S.T.	4	If urgent please contact Immunology
GLUCAGON	GGON	Blood	E.D.T.A	103	This is a test for Glucagon, for a Full Gut Hormone Profile or Chromogranin or Gastrin see relevent protocol, if in doubt enclose a copy of the original form when sending away.  Sample must be taken immediately to the laboratory on ice. If the sample is haemolysed then the test must be repeated. Also do a calcium and urea.
GLUCOSE - ASCITIC FLUID	ASGL	Ascitic Fluid	Fluoride/Oxalate	1	
GLUCOSE - BLOOD	GLUC	Blood	Fluoride/Oxalate	1	If there is to be a delay in analysis then use the fluoride sample.
GLUCOSE - BLOOD (FASTING)	FAGL	Blood	Fluoride/Oxalate	1	Fasting Glucose Range:- 3.8 - 5.5 mmol/l
GLUCOSE - CSF	CGLU	CSF	Fluoride/Oxalate	1	Assay may be performed on sample from universal container, however a fluoride/oxalate sample is preferred.
GLUCOSE - FLUID	FGLU	Misc Fluid	Fluoride/Oxalate	1	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
GLUCOSE - PLEURAL FLUID	PFGL	Pleural Fluid	Fluoride/Oxalate	1	
GLUCOSE - RANDOM URINE	UGLU	Urine	Plain 25ml Universal	1	
GLUCOSE - VITREOUS HUMOUR	VGLU	See Info	Fluoride/Oxalate		
GLUCOSE TOLERANCE TEST	GTT	Blood	Fluoride/Oxalate	1	Two samples required, Fasting and 2hs. Protocol from pathology office.  Information is available by copying and pasting the following link into your Web Browser: <a href="http://intranet.tsft.nhs.uk/portals/pathology/Pathology/ChemHaem/Oral%20GTT%20Instructions.pdf">http://intranet.tsft.nhs.uk/portals/pathology/Pathology/ChemHaem/Oral GTT Instructions.pdf</a>
GLUTATHIONE REDUCTASE	BGR	Blood			No longer routinely available at Somerset Pathology Service. Haemolytic Anaemias of unknown etiology should be referred to a Clinical Haematologist.
GLYCINE - BLOOD		Blood	Lithium Heparin		
GLYCINE - CSF		CSF	Plain Clotted		If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
GLYCINE RECEPTOR ANTIBODIES	GRAB	Blood	S.S.T.		
GLYCOSYLATED HAEMOGLOBIN	GHB	Blood	E.D.T.A	1	Duplicate requests will NOT be assayed if the previous request was performed <60 days ago, this does not apply to pregnant or paediatric patients. Individual cases will be reviewed if clinical justification is given.
GM1 ANTIBODIES	M1	Blood	S.S.T.	15	
GQ1B ANTIBODIES	D1B	Blood	S.S.T.	14	
GRANULOCYTE IMMUNOLOGY	3E	Blood		106	See page 2 of form 3E For further information refer to <a href="http://www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS">www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS</a>
GROWTH HORMONE	GH	Blood	S.S.T.	6	Lithium Heparin is unsuitable.
GROWTH HORMONE - RANDOM URINE	UGH	Urine	Plain 25ml Universal		This test is no longer available
GROWTH HORMONE ANTIBODIES	GHAB	Blood	S.S.T.		
GUANIDINOACETATE (URINE)	GUAN	Urine	Plain 25ml Universal	22	
GUT HORMONE	GHFP		E.D.T.A	22	This is a test for the full Gut Hormone Profile, for Gastrin or Chromogranin see relevant protocol, if in doubt enclose a copy of the original form when sending away.  Sample must be taken immediately to the laboratory on ice. If the sample is haemolysed then Gastrin is unsuitable. Also do a calcium and urea.
HAEMATOPOIETIC STEM CELL TRANSP	3C	Blood	E.D.T.A	1	Requires completion of NBS form 3C for testing of patient and potential donor
HAEMOCHROMATOSIS GENE (HFE)	HGEN	Blood	E.D.T.A	16	
HAEMOGLOBIN A2	HBOP	Blood	E.D.T.A	2	
HAEMOGLOBIN ELECTROPHORESIS	HBOP	Blood	E.D.T.A	2	
HAEMOGLOBIN F	HBOP	Blood	E.D.T.A	2	
HAEMOGLOBIN S	HBOP	Blood	E.D.T.A	2	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
HAEMOGLOBINOPATHY SCREEN (ANTE HBAN		Blood	E.D.T.A	2	
HAEMOPEXIN		Blood	S.S.T.		
HAEMOSIDERIN	HSID	Urine	Plain 25ml Universal	2	
HAPTOGLOBIN	HAPT	Blood	S.S.T.	15	Assay requires 0.5ml of sample (minimum)
HbA1c	GHB	Blood	E.D.T.A	1	Duplicate requests will NOT be assayed if the previous request was performed <60 days ago, this does not apply to pregnant or paediatric patients. Individual cases will be reviewed if clinical justification is given. Duplicate assay not performed if previous GHB was less than 60 days ago unless agreed with Duty Biochemist.
HBH BODIES	HBH	Blood	E.D.T.A		Contact Lab first
HDL CHOLESTEROL	HDL	Blood	S.S.T.	1	The sample must be taken after an overnight fast.
HEINZ BODIES	HZ	Blood	E.D.T.A		
HEP2 INVESTIGATION OF ANA PATTERN	HEP2	Blood	S.S.T.		
HEPARIN ASSAY	HEP	Blood	Sodium Citrate	1	THERAPUTIC RANGE FOR LMW HEPARIN = 0.35-0.70 i.u/ml
HETEROPHILIC ANTIBODIES		Blood	Plain Clotted		
HEXANOYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
HHT MUTATION	HHT	Blood	E.D.T.A		
HIGH SENSITIVITY MYASTHENIA GRAVIS	MYGS	Blood	S.S.T.	16	
HIT	HIT	Blood	S.S.T.	1	Complete a NBS 3D platelet referral form, which can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a> . This and samples must be handwritten as per transfusion requirements. Samples are sent to Filton.
HLA (DISEASE ASSOCIATION)	3A		E.D.T.A	1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
HLA /HPA ANTIBODY SCREENING	3A	Blood	Plain Clotted	1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
HLA A29	HA29	Blood	E.D.T.A	16	Assay requires 1x EDTA (minimum of 3mls Blood).
HLA B27	B27S	Blood	Sodium Citrate		Assay requires 2x 2.7ml Citrate Tubes.
HLA B5	B5S	Blood	Sodium Citrate	15	Assay requires 2x 2.7ml Citrate Tubes.
HLA B51 (5)	HB51	Blood	E.D.T.A	15	Assay requires 1x EDTA (minimum of 3mls Blood).

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
HLA DQ2 & HLA DQ8	HL28	Blood	E.D.T.A	1	Used by Blood Transfusion Laboratory only to refer specialist investigations to the Red Cell ImmunoHaematology Laboratory at NBS Bristol Such investigations include crossmatching in cases of Cold/Warm Haemolytic Anaemia and quantitation of antibody levels in antenatal patients.  Please use a NBS Histocompatibility & Immunogenetics 3F form, which can be obtained from: <a href="https://nhsbtbde.blob.core.windows.net/umbraco-assets-corp/25667/2122-0010-3f_specbagfrm6425-2_zxu2119.pdf">https://nhsbtbde.blob.core.windows.net/umbraco-assets-corp/25667/2122-0010-3f_specbagfrm6425-2_zxu2119.pdf</a>
HLA TYPING FAMILY FOR TRANSPLANT	3A	Blood	E.D.T.A	1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS Blood and Transplant - Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
HMGCR autoantibodies	HMGC	Blood	S.S.T.	5	
HNF1a		Blood	E.D.T.A		
HOLD SAMPLES	KEEP	Blood	S.S.T.		
HOMOCYSTEINE	HOMO	Blood	E.D.T.A	17	Fasting samples must be brought to lab on ice.
HOMOGENITISIC ACID - RANDOM URINE	UHGA	Urine	Plain 25ml Universal		Assay requires 10ml of sample. Use a random urine in a sterile container.This is the test for alcaptonuria.
HUNTINGTON'S CHOREA MARKER	HCM	Blood			Patients require counselling before the blood is taken, Contact Heather Skirton (Genetic Nurse).
HVA - URINE 24HR	HIAA	Urine		1	Normally a 24hr container is required but for paediatrics use random urine in a sterile container
HYALURONIC ACID	HA	Blood	S.S.T.		
HYDROXYCARBAZEPINE		Blood	Plain Clotted		
HYDROXYPROLINE	HP	Urine	Plain 25ml Universal		Assay requires 20ml of sample. Use random urine in a streile container. A plain bottle may be used for 24hr collections.
HYPOCHROMIC CELLS		Blood			No longer avaiable with Sysmex, refer to CHR for alternative test
IGA	IGA	Blood	S.S.T.	1	Assay is also done as part of the Coeliac screen, and as part of Immun
IGD	IGD	Blood	S.S.T.	44	
IGE	IGE	Blood	S.S.T.	1	<165 kU/L
IGF	INGF	Blood	S.S.T.	14	Lithium Heparin is unsuitable.
IGF BP3	IPB3	Blood	S.S.T.		
IGG	IGG	Blood	S.S.T.	1	
IGG SUBCLASSES	IGSB	Blood	S.S.T.		
IGG1	IGSB	Blood	S.S.T.		
IGG2	IGSB	Blood	S.S.T.		
IGG3	IGSB	Blood	S.S.T.		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
IGG4	IGSB	Blood	S.S.T.		
IGLON5 ANTIBODIES	LON5	Blood	S.S.T.	6	
IGM	IGM	Blood	S.S.T.	1	
IGVH MUTATION (B)	IVHB	Blood	E.D.T.A	60	
IGVH MUTATION (BM)	IVHM	Bone Marrow	E.D.T.A	1	
IMIPRAMINE	TRIC	Urine	Plain 25ml Universal	31	
IMMUNE COMPLEX	ICOM	Blood			Test not available. Please contact Immunology to discuss
IMMUNE REACTIVE TRYPSIN	IRT	Blood			Blood spots on Guthrie Card.
IMMUNODEFICIENCY CELL MAKERS	IDCM	Blood	E.D.T.A		A panel of lymphocyte markers to detect Immunodeficiencies.
IMMUNOGLOBULIN IDENTIFICATION	IMFX	Blood	S.S.T.	1	All patients with a newly identified monoclonal band in their serum will have immunoglobulin identification by immunofixation
IMMUNOGLOBULIN IDENTIFICATION - U	UTYP	Urine	Plain 25ml Universal	5	All patients with a newly identified monoclonal band in their urine will have immunoglobulin identification by immunofixation
IMMUNOGLOBULINS (G,A,M)	IMM	Blood	S.S.T.	1	
INDIRECT IMMUNOFUORESCENCE		Blood	S.S.T.		
INFLIXIMAB ANTIBODIES ASSAY					
INFLIXIMAB DRUG LEVEL	INFL	Blood	S.S.T.	14	
INHALANT ALLERGENS - SPECIFIC IGE		Blood	S.S.T.		
INHERITED FEVER SYNDROME		Blood	E.D.T.A		
INHIBIN	INHB	Blood	S.S.T.	116	
INR	CS, INR	Blood	Sodium Citrate		THERAPUTIC GUIDE FOR WARFARIN AF, DVT/PE : INR 2.0 to 3.0 Most Valve prosthesis : INR 3.0 to 4.0
INSULIN	INSN	Blood	E.D.T.A	8	Centrifuge and freeze within 24 hours. Sent Frozen weekly.
INSULIN & C-PEPTIDE	INCP	Blood	E.D.T.A		Centrifuge and freeze within 24 hours. Sent Frozen weekly.
INSULIN ANTIBODIES	ISLE	Blood	S.S.T.	11	Assay requires 2ml of sample (Serum) (Gel 5ml).
INSULIN LIKE GROWTH FACTOR		Blood			
INTRINSIC FACTOR		Blood	S.S.T.		
INTRINSIC FACTOR ANTIBODIES	IFAB	Blood	S.S.T.	13	Minimum of 0.3ml serum or plasma required.
IODINE/CREATININE RATIO	UIOD	Urine	Plain 25ml Universal		
IONISED CALCIUM		Blood	S.S.T.		Done on blood gas analyser
IRON - BLOOD	FE	Blood	S.S.T.	1	Haemolysed samples are unsuitable for analysis
IRON - TISSUE		Tissue	Plain 25ml Universal		Requires 10mg fresh tissue (DO NOT USE FORMALIN).
					For paediatric requests, smaller sample volumes than those quoted for each assay may be acceptable.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
ISLET ANTIGEN IA2 ANTIBODIES		Blood	S.S.T.		
ISLET AUTOANTIBODY PROFILE	IAAP	Blood	S.S.T.	21	
ISLET CELL ANTIBODIES	PAAB	Blood	S.S.T.	16	
ISOCYANATES	ISOC	Urine	Boric Acid Universal		This test is requested s prt of the "Paint Sprayer Medical" Request as a private patient. Collect 20ml of urine at end of shift or after spraying. Send by 1st class post
ISOHAEMEAGGLUTININS	ISOH	Blood	E.D.T.A		Assay requires 2ml of EDTA blood. Some requests may indicate an alternative destination in which case send away to the appropriate laboratory.
ISOVALERYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
JAK2 IF NEG CALR/MPL (B)	JK2B	Blood	E.D.T.A	29	
JAK2 IF NEG CALR/MPL (BM)	JK2M	Bone Marrow	E.D.T.A		
Jak2 Exon 12 Sequencing (BLOOD)	JAEB	Blood	E.D.T.A	1	
Jak2 Exon 12 Sequencing (BONE MARRO	JAEM	Bone Marrow	E.D.T.A		
Jak2 V617f Mutation Screen (BLOOD)	JAVB	Blood	E.D.T.A	22	
Jak2 V617f Mutation Screen (BONE MARR	JAVM	Bone Marrow	E.D.T.A		
Jo1 ANTIBODY	ENAP	Blood	S.S.T.	8	Tested when ENA screen is positive
KEEP SAMPLES	KEEP	Blood	S.S.T.		These samples are normally kept for about 6 months. Whole Blood samples are kept for 1 month. They will then be discarded.
KETAMINE	KETM	Urine	Plain 25ml Universal	4	
KETONES	KE	Blood	Fluoride/Oxalate	1	
KETONES - RANDOM URINE	UKET	Urine			This test is no longer available. Refer any enquiries to Duty Biochemist.
KIT CBF AML EXON 8/17 (B)	E17B	Blood	E.D.T.A		
KIT CBF AML EXON 8/17 (BM)	E17M	Bone Marrow	E.D.T.A		
KIT IN CBF AML EXON 8 (B)	E08B	Blood	E.D.T.A		
KIT IN CBF AML EXON 8 (BM)	E08M	Bone Marrow	E.D.T.A		
KLEIHAUER TEST	FHM	Blood	E.D.T.A		Microscopy elution based test to quantitate fetal cells in maternal circulation (fetal maternal haemorrhage (FMH)) Requirement for prophylactic anti-D is based on FMH result, Antibody screen result and clinical need.
LA ANTIBODY	ENAP	Blood	S.S.T.	8	Tested when ENA screen is positive
LACTATE	LACT	Blood	Fluoride/Oxalate	1	IMPORTANT NOTE:  It is advisable that the lab be contacted prior to sample being taken. No ICE is required if sample is sent to lab immediately - preferably via Air-Tube system. otherwise the blood must be placed on ice immediately and sent to the laboratory. The sample is centrifuged at 4deg on arrival and analysed immediately.
LACTATE - CSF	CLAC	CSF	Fluoride/Oxalate	1	The CSF is sent to the laboratory immediately and analysed on arrival.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
LACTATE - FLUID	FLAC	Misc Fluid	Plain Clotted	1	
LAMOTRIGINE	LAM	Blood	E.D.T.A	30	SST samples are unsuitable. Collect sample 30 to 60mins before next dose.
LATEX - SPECIFIC IGE	LATX	Blood	S.S.T.		
LAXATIVE SCREEN (BLOOD)	LAX	Blood	S.S.T.		
LAXATIVE SCREEN (URINE)	ULAX	Urine	Plain 25ml Universal	32	
LDH	LDH	Blood	S.S.T.	1	The sample must be spun on the day of collection. Haemolysed samples are unsuitable for analysis.
LDH - ASCITIC FLUID	ASLD	Ascitic Fluid	Plain 25ml Universal	1	
LDH - CSF	CLDH	CSF	Plain 25ml Universal	1	If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
LDH - FLUID	FLDH	Misc Fluid	Plain Clotted	1	
LDH - PLEURAL FLUID	PFLD	Pleural Fluid	Plain Clotted	1	
LDL CHOLESTEROL	H	Blood	S.S.T.	1	Result is calculated by the computer using Cholesterol HDL and Triglyceride result. Result is only calculated if the Triglyceride is less than 4.5 mmol/l
LEAD	LEAD	Blood	E.D.T.A	15	Assay requires at least 1ml of sample. Zinc Protoporphyrin assay is also done.
LEBEN'S OPTIC ATROPHY	MDNA	Blood	E.D.T.A	68	Assay requires 20ml of Blood. This is the DNA study for Leben's Optic Atrophy. Signed permission from the patient (or requesting Dr's confirmation) must be sent with samples.
LEPTIN	LEPT	Blood	S.S.T.		Please refer any requests to Duty Biochemist.
LEUCINE RICH GLIOMA INACT 1 AB	LGI1	Blood	S.S.T.	8	
LEUCINE RICH GLMA INACT AB CSF	LRGC	CSF	Plain 25ml Universal	9	
LEUKAEMIA ACUTE (BONE MARROW)	FALM	Bone Marrow	E.D.T.A		Request comprises:CD2, CD7, CD10, CD19, CD13, CD33, CD34, CD117, DR and cytoplasmic/nuclear markers if indicated. Additional markers may be included dependent upon morphology e.g. CD11c etc..
LEUKAEMIA ACUTE FACS (BLOOD)	FALS	Blood	E.D.T.A	8	
LEUKAEMIA ACUTE FACS (BONE MARR)	FAMS	Bone Marrow	E.D.T.A	30	
LEUKAEMIA ACUTE FACS (CSF)	FACF	CSF	Plain 25ml Universal		
LEUKAEMIA ACUTE FACS (CSF) SEND	FACS	CSF	Plain 25ml Universal	7	
LEUKAEMIA ACUTE PANEL (BLOOD)	FAL	Blood	E.D.T.A		Request comprises: CD2, CD7, CD10, CD19, CD13, CD33, CD34, CD117, DR and cytoplasmic/nuclear markers if required. Additional markers may be included dependent upon morphology, e.g. CD11c etc..
LEUKAEMIA CHRONIC B-CELL (BONE M	FCBM	Bone Marrow	E.D.T.A		Request comprises: CD3, CD4, CD8, CD5, CD10, CD19, TNK, CD20, CD23, FMC7, CD79b, CD38, Kappa, Lambda.
LEUKAEMIA CHRONIC B-CELL PANEL	FCB	Blood	E.D.T.A		Request comprises: CD3, CD4, CD8, CD5, CD10, CD19, TNK, CD20, CD23, FMC7, CD79b, CD38, Kappa, Lambda.
LEUKAEMIA CHRONIC FACS (BLOOD)	FCBS	Blood	E.D.T.A	9	
LEUKAEMIA CHRONIC FACS (BONE MA	FCMS	Bone Marrow	E.D.T.A	32	
LEUKAEMIA CHRONIC FACS (CSF)	FCC	CSF	Plain Clotted	1	



<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
LEUKAEMIA CHRONIC FACS (CSF) SEN	FCCS	CSF	Plain Clotted	7	
LEUKAEMIA CHRONIC FACS (PF) SEND	FCPS	Pleural Fluid	Plain Clotted	8	
LEUKAEMIA CHRONIC FACS (PLEURAL	FCPF	Pleural Fluid	Plain Clotted		
LGI1	LGI1	Blood	S.S.T.	8	
LH	LH	Blood	S.S.T.	1	Male: 1.2 - 8.6 u/L Female Follicular: 2.1 - 10.9 u/L Female Mid-Cycle: 19.2 - 103 u/L Female Mid-Luteal: 1.2 - 12.9 u/L Female Post-Menopausal: 10.9 - 58.6 u/L
LINDANE	LIN	Blood	S.S.T.		Assay requires 1ml of sample.
LIPASE	LIPA	Blood	S.S.T.	2	
LIPOPROTEIN (a) (Lp(a))	LPA	Blood	S.S.T.	42	
LIPOPROTEIN ApoA1 & B	APAB	Blood	S.S.T.	7	
LIPOPROTEIN ELECTROPHORESIS	LIPO	Blood	E.D.T.A		Spin the sample. Separate into a plain bottle. Place in BJ's rack in the freezer in Acute. Show the form to Duty Biochemist. Requests for Beta Lipoprotein are treated in the same way.
LIPOPROTEIN Lp(a)	LPA	Blood	S.S.T.	42	
LITHIUM	LI	Blood	S.S.T.	1	Sample is normally taken Pre-dose.
LIVER LINE BLOT	LLBB	Blood	S.S.T.	9	
LKM ANTIBODIES	LKM	Blood	S.S.T.	4	Samples are screened by AIP first and any positives are sent to Southmead for confirmation
LUPUS ANTICOAGULANT	PHAB	Blood	Sodium Citrate	8	Samples required - 4 x Sodium Citrate, 1 x SST Part of an antiphospholipid screen with anticardiolipins
LYMPHOCYTE CELL MARKERS		Blood	E.D.T.A		
LYMPHOCYTE PROLIFERATION TESTS	LPRO	Blood	Lithium Heparin	9	Need to arrange with Immunology. Test needs to be taken first thing am and is unavailable on Fridays.
LYMPHOCYTE SUBSETS (IDCM)	IDCM	Blood	E.D.T.A		
LYSOSOMAL ENZYMES	WCE			38	See - White Cell Enzymes
M1 ANTIBODIES	M1	Blood	S.S.T.	15	
M2 ANTIBODIES	M2	Blood	S.S.T.		The sample is first screened for an AMA on the AIP and any positives sent for conformation by Southmead
MACROPROLACTIN	MPRL	Blood	S.S.T.		No longer available
MAGNESIUM	MG	Blood	S.S.T.	1	Very haemolysed samples are unsuitable for analysis.
MAGNESIUM - RANDOM URINE	UMG	Urine	Plain 25ml Universal	1	
MAGNESIUM - URINE 24HR	24MG	Urine	24hr Urine Container - HCL Acid	1	24hr urine containers with HCL preservative are available from the Laboratory. Please ring 2283. Boric acid containers are unsuitable for analysis.
MALARIAL PARASITES	MP	Blood	E.D.T.A	1	Contact Lab first. Test comprises thick&thin films and immunochromatographic kit. Parasitaemia will be reported if appropriate. All positives will be phoned.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
MANGANESE	MN	Blood	E.D.T.A	14	Plastic EDTA tube with a minimum of 1ml whole blood is required. Invert tube after collecting as sample is unsuitable if it clots.
MANNOSE BINDING LECTIN (MBL)	MBL	Blood	S.S.T.	44	
Mantle Cell Screen t(11;14) (BLOOD)	MCSB	Blood	E.D.T.A		NO LONGER AVAILABLE
Mantle Cell Screen t(11;14) (BONE MARR)	MCSM	Bone Marrow	E.D.T.A		NO LONGER AVAILABLE
MAST CELL TRYPTASE	MAST	Blood	S.S.T.		1x SST to be taken at 1 hour after the suspected reaction and another 1x SST to be taken between 3-6 hrs after the suspected reaction. Very important to put the time on samples. Put full Clinical details on form, eg. Drugs administered that day, degree of hypotension, previous anaesthetic history, risk factors.  If necessary contact laboratory for full protocol.
MCAD	MCAD	Blood		23	Medium Chain Acyl-CoA Dehydrogenase Deficiency. This supercedes the Phenylpropionic load test. A urine for amino and organic acids is required as early as possible in acute illness or stress or fasting. Southmead must be informed before this test is undertaken.
MEAN CELL FRAGILITY (FRESH)	OF	Blood			Test no longer available, please refer to EMA BINDING ASSAY.
MEAN CELL FRAGILITY (INCUBATED)	OF	Blood			Test no longer available, please refer to EMA BINDING ASSAY.
MERCURY (URINE)	UHG	Urine	Plain 25ml Universal	11	
METABOLIC SCREEN - RANDOM URINE	UOA	Urine	Plain 25ml Universal	11	Boric acid containers are unsuitable for this analysis.
METADRENALINES - RANDOM URINE	METU	Urine	Plain 25ml Universal		
METADRENALINES - URINE 24HR	CATS	Urine	24hr Urine Container - No Preservative	3	Plain containers are the specimen type of choice, the performing lab is still accepting acidified containers  Boric acid containers are unsuitable for analysis.
METANEPHRINES	CATS	Urine	24hr Urine Container - No Preservative	3	Plain containers are the specimen type of choice, the performing lab is still accepting acidified containers  Boric acid containers are unsuitable for analysis.
METANEPHRINES (PLASMA)	PMET	Blood	E.D.T.A	10	Samples should be sent to lab on ice within 30 mins of collection, contact lab for protocol.
METFORMIN	METF	Blood	S.S.T.		Test not routinely available in UK. Contact consultant to discuss.
METHADONE	UDS	Urine	Plain 25ml Universal	1	Boric acid containers are unsuitable for analysis
METHAEMOGLOBIN (BLOOD)	MHB	Blood	Heparinised Syringe		Done on blood gas analyser
METHANOL	MEOH	Blood	Fluoride/Oxalate	3	
METHOTREXATE	MTX	Blood	S.S.T.	1	Prior arrangements must be made with the laboratory.
METHYL MALONIC ACID (BLOOD)	MMA	Blood	Plain Clotted	33	
METHYL MALONIC ACID (URINE)	UMMA	Urine	Plain 25ml Universal		
MEXILETINE LEVELS	MEXL	Blood	E.D.T.A	25	
Mi2 ANTIBODIES	MYO	Blood	S.S.T.	21	See Anti Mi2 Antibodies.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
MICROALBUMIN	MALB	Urine	Microalbumin tube	1	Available only to Somerset GP's. (Not wards or OPD's) (from 1/4/06) Boric acid container is unsuitable.
MICROALBUMIN - URINE 24HR	24MA	Urine	24hr Urine Container - No Preservative	4	
MICROSCOPY - FAECES	FMIC	Faeces	Faecal Specimen Container		Faecal microscopy includes tests for split fats and neutral fats.
MINIMAL RESIDUAL DISEASE (BLOOD)	MRD	Blood	E.D.T.A		
MINIMAL RESIDUAL DISEASE (BONE M	MRDM	Bone Marrow	E.D.T.A		
MISC FLUID		Misc Fluid	Plain 25ml Universal		
MITOCHONDRIAL ANTIBODY	AIP	Blood	S.S.T.	4	If positive a titre will be performed and if at a significant titre sample will be sent off to detect antibodies to M2
MITOCHONDRIAL DNA MUTATIONS	MDNA	Blood	E.D.T.A	68	NOTE:- Blood which is more than 3 days old cannot be processed. NOTE:- An EDTA sample is required to exclude Fragile X.  A "Bristol Cytogenetics Form" MUST BE COMPLETED by requesting clinician & sent with the specimens to biochemistry, this form is available here:  <a href="http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf">http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf</a>
MITOTANE		Blood	E.D.T.A		Volume of 1ml required.  Avoid serum separating gels
MIXED NUTS - SPECIFIC IGE	NUTX	Blood	S.S.T.	3	
MMPN METABOLITES	TPGN	Blood	E.D.T.A		
MODY Molecular Genetic Testing (BLOOD		Blood	E.D.T.A		A "MODY Molecular Genetic Testing Request Form" MUST BE COMPLETED by requesting clinician & sent back to biochemistry, this form is available here:  <a href="http://www.diabetesgenes.org/sites/default/files/mody_request_form.doc">http://www.diabetesgenes.org/sites/default/files/mody_request_form.doc</a>
MOG ANTIBODIES	MOG	Blood	S.S.T.	14	
MOG Antibodies (CSF)	CMOG	CSF	Plain 25ml Universal	13	
MOLECULAR GENETICS (BLOOD)	MGEN	Blood	E.D.T.A	1	NOTE:- Blood which is more than 3 days old cannot be processed. NOTE:- An EDTA sample is required to exclude Fragile X.  A "Bristol Cytogenetics Form" MUST BE COMPLETED by requesting clinician & sent with the specimens to biochemistry, this form is available here:  <a href="http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf">http://www.nbt.nhs.uk/sites/default/files/filedepot/incoming/BGL_request_form.pdf</a>
MOLECULAR GENETICS BLD (OTHER)	MGNO	Blood	E.D.T.A	1	This request can be for multiple labs  A Genetic testing request form must be completed and sent with sample  EXETER: <a href="https://www.exeterlaboratory.com/images/REQUEST-FORM_GENERIC.pdf">https://www.exeterlaboratory.com/images/REQUEST-FORM_GENERIC.pdf</a>
MONOCLONAL QUANTITATION	MQS	Blood	S.S.T.		DO NOT REQUEST - done as part of serum electrophoresis if monoclonal band is present.
MORPHINE - RANDOM URINE		Urine	Plain 25ml Universal		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
MOXIFLOXACIN POST-DOSE	MXPO	Blood	S.S.T.		
MOXIFLOXACIN PRE-DOSE	MCPR	Blood	S.S.T.		
MPO ANCA	ANCT	Blood	S.S.T.	2	Performed by Southmead on positive ANCA's
Mpox PCR	MKPC	Swab		10	
Mpox PCR (EDTA)	MKPE	EDTA Blood	E.D.T.A	9	
Mpox PCR (Urine)	MKPU	Urine	Plain 25ml Universal		
MRD STUDIES (BLOOD)	MRD	Blood	E.D.T.A		
MRD STUDIES (BONE MARROW)	MRDM	Bone Marrow	E.D.T.A		
MTDNA PROBE 3243	MDNA	Blood		68	
MTDNA PROBE 8344	MDNA	Blood		68	
MTDNA PROBE 8993	MDNA	Blood		68	
MTHFR GENE TESTING	MTHF	Blood	E.D.T.A		Analysis of the MTHFR gene by PCR amplification and sequencing of the coding region and splice junctions.
MUCOPOLYSACCHARIDES	MUCO	Urine	Plain 25ml Universal	17	Assay requires 2ml of sample. Use a fresh random urine in a sterile container.
MULTIMETRIC ANALYSIS	MULT	Blood	Sodium Citrate		
MuSK ANTIBODY	MUSK	Blood	S.S.T.	34	
MYCOPHENOLATE	MYCO	Blood	E.D.T.A	14	
MYD88 (B)	M88B	Blood	E.D.T.A	37	
MYD88 (BM)	M88M	Bone Marrow	E.D.T.A	1	
MYELIN ASSO'TD. GLYCOPROT. ABS	MYG	Blood	S.S.T.	9	
MYELIN OLIGODEND GLYCOPT ABS	MOG	Blood	S.S.T.	14	
MYELOID TARGET NGS PANL (B)	MTNB	Blood	E.D.T.A	54	
MYELOID TARGET NGS PNL (BM)	MTNM	Bone Marrow	E.D.T.A	1	
MYOCARDIAL ABS	MYAB	Blood	S.S.T.	24	
MYOGLOBIN - RANDOM URINE	UMYO	Urine	Plain 25ml Universal		
MYOSITIS AUTOANTIBODY PROFILE	MYO	Blood	S.S.T.	21	Myositis-specific and myositis-associated autoantibody profile includes Jo-1, PL-7, PL-12, SRP, Ku, Mi-2 and PM-Scl antibodies
MYSOLINE	PHB	Blood	S.S.T.	1	This test is now performed only at MPH
NBS 3A H+I DIAGNOSTICS	3A	Blood		1	Request form available in Transfusion, second page details specimen requirements. Some requests may require Consultant Haematologist approval. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
NBS 3A,3B,3C,3D,3E,2B,2E,2J (SEND)		Blood			Used by Blood Transfusion Laboratory only to refer specialist investigations to the Red Cell ImmunoHaematology Laboratory at NBS Bristol. Such investigations include crossmatching in cases of Cold/Warm Haemolytic Anaemia and quantitation of antibody levels in antenatal patients.  Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
NEOBONA	NEOB	Blood			
NEURON SPECIFIC ENOLASE	NSPE	Blood	S.S.T.	2	Neuron specific enzyme can be used as a potentially useful marker for brain damage and can be considered to be a relevant parameter for assessing the prognosis of brain injury.  Sample to be spun within 2hrs of collection.  Telephone the Duty Biochemist on 07770 645 278 before sending
NEUROTENSIN	GAST	Blood	E.D.T.A	24	This test is done as part of the Gut Hormone Profile. For a full set of instructions see GASTRIN  Please ensure that this is just a 'CART' request, and not the full Gut Hormone, if in doubt enclosed a copy of the original form when sending away.
NEUTRAL FAT - FAECES	FMIC	Faeces			
NEUTROPENIA (ADULT/INFANT AUTOIMMUNE)	3E			106	See page 2 of form 3E. For further information refer to <a href="http://www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS">www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS</a>
NEUTROPENIA (DRUG RELATED)	3E			106	See page 2 of form 3E For further information refer to <a href="http://www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS">www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS</a>
NEUTROPENIA (NEONATAL ALLOIMMUNE)	3E	Blood	E.D.T.A	106	For further information refer to <a href="http://www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS">www.blood.co.uk/HOSPITALS/LIBRARY/REQUEST_FORMS</a>
NEUTROPHIL FUNCTION TESTS	NFT	Blood	Lithium Heparin	40	Please avoid sending this test on a Friday.  A travel control (1x Lithium Heparin sample) also needs to be taken in addition to the patient's sample.
NILS		Blood	S.S.T.		See Non-Invasive Liver Screen
NMDA RECEPTOR ANTIBODIES (BLOOD)	NMDA	Blood	S.S.T.	7	
NMDA RECEPTOR ANTIBODIES (CSF)	NMDC	CSF	Plain 25ml Universal	8	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
NON-INVASIVE LIVER SCREEN		Blood	S.S.T.		This group contains the following tests: Alpha-1-Antitrypsin AST Auto-Immune Profile Coeliac Screen (IgA TTG Antibody) HbA1c Fasting Lipids (Chol, Trig, HDL, LDL) Ferritin Full Blood Count (FBC) Gamma GT Hepatitis B (HBsAg/Infection Screen) Hepatitis C (Infection Screen) Immunoglobulins (IgA, IgG, IgM) Liver Function Tests (LFT) NILS Test Group Dummy Test Transferrin Saturation (Transferrin, Iron, TSAT) TSH (Thyroid Function) U+E and Creatinine (UEC) ALSO if the patient is <40 Years Old Caeruloplasmin
NORMETADRENALINE - RANDOM URIN	METU	Urine	Plain 25ml Universal		
NPM1 FLT3 DIAGNOSIS (B)	NFDB	Blood	E.D.T.A		
NPM1 FLT3 DIAGNOSIS (BM)	NFDM	Bone Marrow	E.D.T.A	1	
NPM1 MONITORING (B)	NMB	Blood	E.D.T.A	1	
NPM1 MONITORING (BM)	NMM	Bone Marrow	E.D.T.A	1	
NTX (N-Telopeptide Cross-Links) (URINE)	NTX	Urine	Plain 25ml Universal		
OCTANOYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile.
OESTRADIOL	E2	Blood	S.S.T.	1	Male: < 55.1 - 115.6 pmol/L Female Post-Menopausal: < 55.1 - 92.1 pmol/L Female Early Follicular: 82.2 - 422.2 pmol/L Female Mid Follicular: 91.8 - 422.2 pmol/L Female Mid Luteal: 134 - 903 pmol/L Female Ovulatory Peak 117.8 - 1898 pmol/L
OLANZAPINE	OLAN	Blood	E.D.T.A	23	
OLIGOCLONAL BANDS - CSF	OLIG	CSF	Plain 25ml Universal	13	If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur). A paired sample of blood (Serum or Fluoride/Oxalate) must be sent with the CSF.
OLIGOSACCHARIDES	MUCO			17	See - Mucopolysaccharides
OMEGA 5 GLIADIN - SPECIFIC IGE	OMEG	Blood	S.S.T.		
OPIATES	UDS, OP	Urine	Plain 25ml Universal		Boric acid containers are unsuitable for analysis
OREXIN - CSF	CSOR	CSF	Plain 25ml Universal	26	
ORGAN TRANSPLANTATION INVESTIGA 3B		Blood	E.D.T.A	68	Organ Transplant Investigations - Solid Organs (recipient or donor) require completion of NBS form 3B
ORGANIC ACIDS - RANDOM URINE	UOA	Urine	Plain 25ml Universal	11	Boric acid containers are unsuitable for this analysis
OSMOLALITY	OSMO	Blood	S.S.T.	1	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
OSMOLALITY - RANDOM URINE	UOSM	Urine	Plain 25ml Universal	1	Plain universal container required. Boric acid and 24 hour Urine samples are NOT SUITABLE. No Reference range quoted for random urine samples due to variability. Results should be interpreted in context with serum results, paired urine and serum osmolalities, current medications and fluid status
OSMOLAR GAP	OGAP	Blood	S.S.T.	1	Osmolar Gap is measured in order to give an indication of the presence of osmotically active substances. If elevated, the clinical presentation may dictate that this is investigated further utilising specific measurements (Ethylene Glycol, Methanol etc.) Discuss with Duty or On-call biochemist if required.
OSMOTIC FRAGILITY	OF	Blood	E.D.T.A		Test no longer available, please refer to EMA BINDING ASSAY.
OSTEOCALCIN	OSTE	Blood	E.D.T.A		Samples must be taken to laboratory immediately on collection.
OTOBLOT	BLOT	Blood	S.S.T.		
OVARIAN ABS	OVAB	Blood	S.S.T.	40	
OXALATE - RANDOM URINE	UOXA	Urine	Plain 25ml Universal		
OXALATE - URINE 24HR OUTPUT	24OX	Urine	24hr Urine Container - HCL Acid	16	24hr urine must contain 50ml of 10% HCl as preservative.
OXCARBAZEPINE	OCBP	Blood	E.D.T.A		Oxcarbazepine is a derivative of carbamazepine with similar actions. It is used as monotherapy or adjunctive therapy in the treatment of partial seizures with or without secondarily generalised tonic-clonic seizures. Oxcarbazepine is used in the treatment of epilepsy and may be a useful alternative in patients unable to tolerate carbamazepine. Oxcarbazepine is rapidly metabolised to hydroxycarbazepine and it is this metabolite that is routinely monitored.
P1NP	P1NP	Blood	E.D.T.A	14	This is Procollagen 1N Extension Peptide.
P3NP	P3NP	Blood	S.S.T.	6	This is Procollagen 3N Terminal Peptide.
PALMITOYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
PANCREATIC ISLET CELL ABS	PAAB	Blood	S.S.T.	16	
PANCREATIC POLYPEPTIDE	GAST	Blood	E.D.T.A	24	Part of Gut Hormone Profile. See GASTRIN for protocol.  Please ensure that this is just a Pancreatic Polypeptide request, and not the full Gut Hormone, if in doubt enclosed a copy of the original form when sending away.
PARACETAMOL	PMOL	Blood	S.S.T.	1	
PARANEOPLASTIC ANTIBODIES	ANAB	Blood	S.S.T.	10	
PARANODAL ANTIBODY TEST	PNAB	Blood	S.S.T.	41	
PARAPROTEIN		Blood			
PARAQUAT - RANDOM URINE	UPQT	Urine	Plain 25ml Universal	35	
PARATHORMONE	PTH	Blood	E.D.T.A	1	Assay requires 0.4ml of sample. Refer to stability advice (above) for sample timing information. Please note time of collection on form. Also request calcium/albumin. Order Comms will now request a separate EDTA sample for PTH and will also add calcium/albumin.
PARIETAL CELL ANTIBODY	AIP	Blood	S.S.T.	4	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PEMPHIGOID ANTIBODIES	PEMA	Blood	S.S.T.	10	
PEMPHIGUS ANTIBODIES	PEMA	Blood	S.S.T.	10	
PENICILLOYL G - SPECIFIC IGE	PECG	Blood	S.S.T.	4	
PENICILLOYL V - SPECIFIC IGE	PECV	Blood	S.S.T.	4	
PERLS STAIN (BONE MARROW)	PERL	Bone Marrow	E.D.T.A	1	
PFA - 100	PFA	Blood	Sodium Citrate	1	Sample needs to be processed within 4 hours of venepuncture. Please contact coagulation. (Sample Required - 2 x Sodium Citrate)
PFA - ADP	PFA	Blood	Sodium Citrate	1	Sample needs to be processed within 4 hours of venepuncture. Please contact coagulation. (Sample Required - 2 x Sodium Citrate)
PFA - EPINEPHRINE	PFA	Blood	Sodium Citrate	1	Sample needs to be processed within 4 hours of venepuncture. Please contact coagulation. (Sample Required - 2 x Sodium Citrate)
PH	PH	Blood	Heparinised Syringe	1	As the laboratory no longer has a blood gas machine, the requestor will need to make arrangements for the sample to be analysed at one of the Trust areas which do have a blood gas analyser. The appropriate heparinised syringe is the required sample type.
PH - ASCITIC FLUID	ASPH	Ascitic Fluid	Heparinised Syringe	1	Note: Only samples received in syringes will be analysed for pH. ENSURE THE NEEDLE HAS BEEN REMOVED BEFORE SENDING TO LABORATORY
PH - FAECAL	FPH	Faeces			
PH - FLUID	FLPH	Pleural Fluid	Heparinised Syringe	1	Only samples in heparinised syringes will be suitable for analysis
PH - PLEURAL FLUID	PFPH	Pleural Fluid	Heparinised Syringe	1	Only samples in a heparinised syringe are suitable for analysis
PH - RANDOM URINE	UPH	Urine	Plain 25ml Universal	1	
PHENOBARBITONE	PHB	Blood	S.S.T.	1	This test is now performed only at MPH Sample is normally taken 3hrs post dose. Trough levels are taken just before the dose.
PHENYLALANINE		Blood	Lithium Heparin		Range is in umol/l:- Phenylalanine 50-105
PHENYL-PROPRIONIC LOADING TEST	PPLT	Blood	Lithium Heparin		Medium Chain Acyl-CoA Dehydrogenase Deficiency now supercedes this Phenylproprionic load test. A urine for amino and organic acids is required as early as possible in acute illness or stress or fasting. For Unsaturated C10 fatty acids take 10mls of heparinised blood. This should be separated and immediately. Southmead must be informed before this test is undertaken. Use our form.
PHENYTOIN	PHT	Blood	S.S.T.	1	This test is now performed only at MPH Trough levels are taken just before the dose.
PHOSPHATE	P	Blood	S.S.T.	1	Sample must be spun on the day of collection. Haemolysed samples are unsatisfactory.
PHOSPHATE - RANDOM URINE	UP	Urine	Plain 25ml Universal	1	Boric acid container is unsuitable.
PHOSPHATE - URINE 24HR	24PH	Urine	24hr Urine Container - HCL Acid	1	24hr urine containers with HCL preservative are available from the Laboratory. Please ring 2283. Boric acid containers are unsuitable for analysis.



<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PHYTANIC ACID	VLCF	Blood			
PLA2R ANTIBODIES	PL2R	Blood	S.S.T.		
PLACENTAL GROWTH FACTOR	PLGF	Blood	E.D.T.A	1	<p>This test is performed on request only.; the lab should be notified in advance (9:00 - 17:00).</p> <p>Specimens must be delivered to the lab immediately, at room temperature.</p> <p>Samples must be analysed within 4 hours of collection for a valid result.</p> <p>Severely haemolysed samples are unsuitable for testing.</p> <p>Result should be evaluated in the context of all clinical laboratory data available. In those instances where the results do not agree with the clinical evaluation, additional tests should be performed accordingly.</p> <p>Due to the characteristic drop of circulating PLGF concentrations towards the end of the normal healthy pregnancy, a single PLGF measure taken after 34 weeks of pregnancy may have limited diagnostic or prognostic ability. The test is not recommended for use in women with gestational age above 34+6 weeks.</p> <p>The test has not been validated for the use in women with gestational age before 20 weeks.</p> <p>Interpretation:</p> <ol style="list-style-type: none"> <li>1. PLGF results &lt;12pg/mL (Test is positive) are considered highly abnormal and are suggestive of patients who have severe placental dysfunction and an increased likelihood of preterm delivery.</li> <li>2. PLGF results between 12pg/mL and 100pg/mL (Test is positive) are considered abnormal and are suggestive of patients with placental dysfunction and an increased likelihood for preterm delivery.</li> <li>3. PLGF results greater than or equal to 100pg/mL (Test is negative) are considered normal and suggestive of patients without placental dysfunction and are unlikely to progress to delivery within 14 days of the tests.</li> </ol>
PLASMA APIXABAN LEVEL	APIX		Sodium Citrate	1	<p>This test is only performed after discussion with a Haematology Consultant otherwise is not routinely available.</p> <p>If received at Yeovil it needs to be sent to MPH via Taxi immediately. Results available within 2 hours of receipt at MPH and will be reported to Haematology consultant.</p>
PLASMA STEROL ANALYSIS	DBL	Blood	Lithium Heparin	1	<p>For investigation of bile acid synthesis disorders or phytosterolaemia, includes cholestenol for cerebrotendinous xanthomatosis</p> <p>This test is different from usual Bile Acids</p>
plasma warfarin	WARF	Blood	Sodium Citrate	36	
PLATELET ADP	PADP	Blood	Sodium Citrate		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PLATELET AGGREGATION		Blood			Platelet aggregation is no longer available.  Please contact Bristol Haemophilia centre on 0117 342 1872 to book the patient in.
PLATELET GLYCOPROTEIN IPT	PLTG	Blood	Sodium Citrate	11	Samples must not be received by pneumatic tube A normal control sample, also citrated peripheral blood should always accompany the test sample. Control sample will be labelled with age and sex only.  Lab should be contacted prior to sending samples so that prompt transport by taxi can be arranged. Test should be agreed with Haematology consultant and referred to Duty Biochemist before sending. This test is part of a protocol for second line investigations of 'unexplained bruising and bleeding' which also includes: FBG,GPF, CS, F8,F9,VWD and F13
PLATELET MONOAMINE OXIDASE	PMAO	Blood	S.S.T.		
PLATELET MULTIMERS	PLTM	Blood	Sodium Citrate		(Sample Required - 2 x Sodium Citrate)
Platelet nucleotides	PNUC	Blood	Sodium Citrate		
PLATELET REFRACTORINESS	3A	Blood	E.D.T.A	1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
PLATELETS (CITRATE)	PLTC	Blood	Sodium Citrate	1	Request only when platelet count required, but unable to obtain on normal FBC EDTA specimen due to platelet clumping Citrate tube must be filled to the line. Always send a normal FBC EDTA specimen as well
PLATLET IMMUNOLOGY	3D			1	Platelet immunology investigations require completion of 3D request form, which can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a> . Samples must be labelled as per Transfusion labelling policy
PM-SCL ANTIBODIES (PM-1)	PMSC	Blood	S.S.T.	25	PM-Scl antibodies are found in the polymyositis-scleroderma overlap syndrome.
PNH SCREEN	PNH	Blood	E.D.T.A	1	Request in Blood Sciences (T number) Give Transfusion of copy of the original request form and enter Lab Comment note stating that it has been sent away.
POMPE URINARY ORGANIC ACIDS	UORG	Urine	Plain 25ml Universal	13	
PORPHOBILINOGEN (PBG) - URINE (SE	UPBG	Urine	Plain 25ml Universal	21	Done either as a screen for undiagnosed porphyria OR to confirm an active symptomatic attack in a previously diagnosed porphyriac. Assay requires 5ml of sample. The sample must be fresh and kept in the dark. For Acute Porphyria, take the sample during attack. For Non-Acute take an early morning urine sample into a sterile container.
PORPHOBILINOGEN/CREAT RATIO		Urine	Plain 25ml Universal		
PORPHYRIN - BLOOD (SEND)	BPOR	Blood	E.D.T.A	21	DO NOT SPIN. Wrap the sample to keep it in the dark. A minimum of 1.0ml of blood is required on paediatric samples. . Also send 20ml of fresh urine in a sterile container. Do not dispatch samples on Friday.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PORPHYRIN - FAECES (SEND)	FPOR	Faeces	Faecal Specimen Container	21	Avoid exposure to light. Analysis is usually performed on a fresh sample.
PORPHYRIN - URINE		Urine	Plain 25ml Universal		
PORPHYRIN - URINE (SEND)	UPOS	Urine	Plain 25ml Universal	21	Assay requires 20ml of fresh urine in a sterile container. Do not dispatch samples on Friday. The sample must be fresh and kept in the dark.
PORPHYRIN SCREEN	BPOR, U	Blood	E.D.T.A		DO NOT SPIN. Wrap the sample to keep it in the dark. A minimum of 1.0ml of blood is required on paediatric samples. Also send 20ml of fresh urine in a sterile container. Do not dispatch samples on Friday.
PORPHYRIN/CREAT RATIO		Urine	Plain 25ml Universal		
POST TRANSFUSION PURPURA (PTP)	3A	Blood	E.D.T.A	1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
POTASSIUM	EL	Blood	S.S.T.	1	Sample should be spun within 6hrs of venepuncture. Haemolysed samples are unsuitable for analysis. Tests include Sodium and Potassium
POTASSIUM - ASCITIC FLUID	ASEL	Ascitic Fluid	Plain 25ml Universal	1	
POTASSIUM - RANDOM URINE	UEL	Urine	Plain 25ml Universal	1	Boric acid container is unsuitable.
POTASSIUM - URINE 24HR	24K	Urine	24hr Urine Container - No Preservative	1	24hr urine containers available from the Laboratory ring 2283. Requires no preservative. Boric acid containers are unsuitable for analysis.
POTASSIUM/CREATININE RATIO	UKR	Urine	Plain 25ml Universal	1	In hypokalaemia, urine potassium to creatinine ratio >2.5 mmol/mmol is suggestive of inappropriate renal potassium loss
PR3 ANCA	ANCT	Blood	S.S.T.	2	Performed by Southmead on positive ANCA's
PREDNISOLONE COMPLIANCE	PREC	Blood	S.S.T.	15	For the Ix of compliance in severe asthma 'Preferably taken 2 hours post dose. Please provide dose given & time of last dose.
PREDNISOLONE MONITORING	PREM	Blood	S.S.T.	107	For Ix of dosage adequacy in adrenal insufficiency '8hr post-dose sample required.
PREGNANCY TEST (SERUM)	SPG	Blood	S.S.T.	1	
PREVIOUS ABNORMAL CLOTTING SCR	PABN	Blood	Sodium Citrate		Discuss abnormal results with Dr Simon Davies (Cons Haematologist) as clinically appropriate.
PRIMIDONE	PHB	Blood	S.S.T.	1	This test is now performed only at MPH
PRISTANIC ACID	VLCF	Blood			
PROCAINEAMIDE	PROC	Blood	Lithium Heparin		Take 3 blood samples. A pre-dose plus 1hr and 2hr post dose. Send away daily by 1st class post. Write on the form the sample times, the dose time and the amount of dose. Use our form.

<i>Test Request</i>	<i>Order Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PROCALCITONIN	PCTC	Blood	S.S.T.	1	Performed at ESL on day of arrival (whether local or from Hub) Manufacturer's stated stability for all sample types: 16 Hours at Room Temperature 48 Hours at 4°C 75 Days at -20°C The manufacturer recommends that where serial estimations are being performed that the same sample type is maintained. Samples should not be frozen/thawed more than 3 times.
PROCOLLAGEN 1N EXTENSION PEPTID	P1NP	Blood	E.D.T.A	14	
PROCOLLAGEN 3N TERMINAL PEPTIDE	P3NP	Blood	S.S.T.	6	
PROGESTERONE	PROG	Blood	S.S.T.	1	Male 0.3 - 2.7 nmol/l  Female Mid-Follicular 1.0 - 3.8 nmol/l Mid-Luteal 16.4 - 59 nmol/l Post-Menopausal <0.25 - 2.5 nmol/l  Pregnancy 1st Trimester 15 - 161.4 nmol/l 2nd Trimester 61.7 - 144.0 nmol/l
PROINSULIN	PINS	Blood	S.S.T.	7	Sample must be sent to the laboratory and Frozen within 1hr.  Assay requires 0.2ml of sample. Avoid haemolysis. C-Peptide is only done if we note that is needed on the green send away form, and MUST be frozen within 1 hour. An SST sample is preferred for this investigation. Lithium Heparin samples are not suitable for 'Insulin'. Refer any Proinsulin requests to Duty Biochemist.
PROLACTIN	PROL	Blood	S.S.T.	1	Female <50y: 71 - 566 mU/L Female >50y: 58 - 416 mU/L Male: 56 - 278 mU/L
PROPIONYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
PROTEIN - ASCITIC FLUID	ASPR	Ascitic Fluid	Plain 25ml Universal	1	
PROTEIN - CSF	CPRO	CSF	Plain Clotted	1	Test is also performed on investigations for Xanthochromia.  If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
PROTEIN - FLUID	FPRO	Misc Fluid	Plain Clotted	1	
PROTEIN - PLEURAL FLUID	PFPR	Pleural Fluid	Plain Clotted	1	
PROTEIN - RANDOM URINE	UPR	Urine	Plain 25ml Universal	1	Boric acid container is unsuitable.
PROTEIN - URINE 24HR	24PR	Urine	24hr Urine Container - No Preservative	1	Collect as a random urine sample in a sterile container or as a 24hr collection. No preservative is required. Boric acid containers are unsuitable for analysis. Acidified sample is unsuitable
PROTEIN C	PC	Blood			Please see THROMBOPHILIA SCREEN for sample details.  New Reference Range 29/08/18 (70 - 140)
PROTEIN ELECTROPHORESIS	ELP	Blood	S.S.T.	5	Plasma & Haemolysed samples unsuitable for Protein Electrophoresis.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
PROTEIN S	PS	Blood			Please see THROMBOPHILIA SCREEN for sample details.  New Reference Range 29/08/18 (Male - 74.1 - 146.1 Female - 54.7 - 123.7)
PROTEIN/CREATININE RATIO	PCR	Urine	Plain 25ml Universal	1	New units added on 17/08/06
PROTHROMBIN TIME	CS	Blood	Sodium Citrate	1	Reference range from 08/07/19 (10.2-14.1)
PSA	PSA	Blood	S.S.T.	1	Reference Range: Age <50    0-2.5 50-60      0-3.5 60-70      0-4.5 >70        0-6.5
PSA - FREE/TOTAL RATIO	FPSA	Blood	S.S.T.		May be used to help decide if biopsy is required when Total PSA 4-10ug/L, negative DRE and not known prostate cancer. Ratio < 12% suggests higher likelihood of cancer.
PTH	PTH			1	See Parathormone
PTH-RP	PTHR				Test is not Routinely Available, please contact the Duty.Biochemist@somersetft.nhs.uk to discuss prior to testing.
PURINE/PYRIMIDINE SCREEN (BLOOD)	PUR	Blood	E.D.T.A		Requires 5mls EDTA or Lithium Heparin blood (EDTA is preferred). External lab prefer that a "Urine Purine/Pyrimidine Screen" is performed instead.
PURINE/PYRIMIDINE SCREEN (URINE)		Urine	Plain 25ml Universal		Requires 24hr Urine with Thymol crystals as a preservative or Fresh Random Urine in plain universal or with thymol, if plain then freeze sample asap.
PYRUVATE KINASE	BPK	Blood	E.D.T.A		Blood transfusion within the last four months will affect results. Any red cell transfusion given must be declared on the request form.  Raised reticulocyte levels and/or raised Wbc levels may affect assay.
Q1B ANTIBODIES	D1B	Blood	S.S.T.	14	
QUININE	Q	Blood	S.S.T.		
R134 FH PROBAND	R134	Blood	E.D.T.A	46	
R242 CASCADE TESTING	R242	Blood	E.D.T.A	12	

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
RAST - SPECIFIC IGE		Blood	S.S.T.		<p>List of Specific IGE sent to Bristol via NPEX (if other SP IGE are requested check with Richard Brown)</p> <p>           SP IGE ALMOND            SP IGE APPLE            SP IGE BANANA            SP IGE BEE VENOM            SP IGE ASPERGILLUS            SP IGE BIRCH            SP IGE BRAZIL NUT            SP IGE CASHEW            SP IGE CAT            SP IGE MIXED CEREALS            SP IGE MIXED MOULDS            SP IGE DOG DANDER            SP IGE EGG WHITE            SP IGE COW'S MILK            SP IGE CHEESE, CHEDDAR            SP IGE CHILI PEPPER            SP IGE CACAO/CHOCOLATE            SP IGE CHEESE, MOULD            SP IGE COCONUT            SP IGE CODFISH            SP IGE HOUSE DUST MITE            SP IGE HORSE DANDER            SP IGE PEANUT (2813)            SP IGE WHEAT            SP IGE GLUTEN            SP IGE GUINEA PIG EPITHELIUM            SP IGE HAMSTER EPITHELIUM            SP IGE HAZEL NUT (2817)            SP IGE KIWI FRUIT            SP IGE LATEX            SP IGE FEATHERS            SP IGE MIXED CAGED BIRDS            SP IGE FOODS            SP IGE MIXED MEATS            SP IGE ORANGE            SP IGE OVOMUCOID            SP IGE PECAN NUT            SP IGE GRAPEFRUIT            SP IGE PENICILLOYL G            SP IGE PENECILLOYL V            SP IGE RABBIT            SP IGE SESAME            SP IGE SHRIMP (PRAWN)            SP IGE SOYA            SP IGE STRAWBERRY            SP IGE TOMATO            SP IGE TUNA            SP IGE WALNUT            SP IGE WASP            SP IGE WHITE BEAN         </p>

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
					SP IGE SEAFOOD SP IGE MIXED WEEDS SP IGE OAK SP IGE SYCAMORE SP IGE TIMOTHY GRASS
RAST - SPECIFIC IGE - Sheffield		Blood	S.S.T.		List of Specific IGE sent to Sheffield (if other SP IGE are requested check with Richard Brown)  SP IGE SPINACH, SP IGE CHINCHILLA, SP IGE RYE, SP IGE CHICKPEA, SP IGE TREE POLLEN, SP IGE PINEAPPLE, SP IGE ONION, SP IGE PINE NUT, SP IGE RASPBERRY, SP IGE BEEF, SP IGE GRAPE, SP IGE GRASS POLLEN MIX, SP IGE PEAR, SP IGE OMEGA 5 GLIADIN, SP IGE BRUFEN, SP IGE MUSTARD, SP IGE OATS, SP IGE PIGEON, SP IGE UNLISTED, SP IGE BARLEY, SP IGE CRAB, SP IGE OYSTER, SP IGE ASPIRIN
RED CELL CHOLINESTERASE	RPSC	Blood			Assay is no longer available. Refer any enquiries to Duty Biochemist.
RED CELL GALACTOKINASE	GALK	Blood			Do not spin. Use 5ml Lithium heparin container. Send whole sample
RED CELL MAGNESIUM	RCMG	Blood	E.D.T.A		This investigation is no longer available. Refer any enquiries to Duty Biochemist.
RED CELL TRANSKETOLASE	TK	Blood	E.D.T.A		Test Not Available
RENIN		Blood			
RENIN & ALDOSTERONE	ALDO	Blood	E.D.T.A	10	Urea and Electrolytes also need to be tested.
REThe	CHR	Blood	E.D.T.A	2	Analysis is performed on the Advias
RETICS	R	Blood	E.D.T.A	1	Analysis is performed automatically on the Advias
RETICULIN ANTIBODIES	ARA	Blood			Test not available. Please request a coeliac screen.
RETICULOCYTE Hb Concentration	CHR	Blood	E.D.T.A	2	Analysis is performed on the Advias
RETICULOCYTE Hb Content	CHR	Blood	E.D.T.A	2	Analysis is performed on the Advias
RETINAL ANTIBODIES	RETA	Blood	S.S.T.	18	
RETINOL BINDING PROTEIN (BLOOD)	RBP	Blood	S.S.T.	35	
RETINOL BINDING PROTEIN (URINE)		Urine	Plain 25ml Universal		

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
RETINOL ESTERS	RETE	Blood	S.S.T.		
RHEUMATOID FACTOR	RA	Blood	S.S.T.	1	
RHEUMATOID FACTOR - FLUID	FRA	Misc Fluid	Plain Clotted	2	
RITUXIMAB MONITORING	RITM	Blood	E.D.T.A	3	
RIVAROXABAN	RIVA	Blood	Sodium Citrate	1	This test is only performed after discussion with a Haematology Consultant otherwise is not routinely available. Results available within 2 hours of receipt at MPH and will be reported to Haematology consultant.
RNA POLYMERASE III ANTIBODIES	RP3A	Blood	S.S.T.	22	
RNP ANTIBODY	ENAP	Blood	S.S.T.	8	Tested for when ENA screen positive
Ro ANTIBODY	ENAP	Blood	S.S.T.	8	Tested when ENA screen is positive
SACE	SACE	Blood	S.S.T.	1	
SALICYLATE	SAL	Blood	S.S.T.	1	
SALIVARY CORTISOL	SCOR	Saliva	Sterile Container (appropriate size)	8	Test used for Adrenoleukodystrophy - Tubes available on request from Biochemistry.
SALIVARY DUCT ANTIBODIES	SDAB	Blood	S.S.T.	25	
SCHILLING TEST		Urine	24hr Urine Container - No Preservative		
SCL70 ANTIBODY	ENAP	Blood	S.S.T.	8	Requested when ENA screen is positive
SELECTIVE PROTEIN CLEARANCE	PSEL				
SELENIUM	SELN	Blood	Trace Metal Serum Tube	8	The blood must be taken into a Trace Metal Serum Tube or Paediatric clotted tube. Assay requires 0.7ml of sample.
SEROTONIN		Blood	S.S.T.		Sample requires a minimum of 1ml serum. Patient should avoid food high in indoles: avocado, banana, tomato, plum, walnut, pineapple, and eggplant. Patient should also avoid tobacco, tea and coffee three days prior to specimen collection.
SERUM ANGIOTENSIN CONVERTING E	SACE	Blood		1	See entry under SACE
SEX HORMONE BINDING GLOBULIN	SHBG	Blood	S.S.T.	5	Lithium Heparin is unsuitable.
SHORT SYNACTHEN TEST	SST	Blood	S.S.T.	1	Two or more samples required, +0mins, +30mins plus additional times if required. Protocol from pathology office.
SICKLE CELL SCREEN	SSC	Blood	E.D.T.A	2	
SIDS (SUDDEN INFANT DEATH SYNDRO		Blood Spot			
SIROLIMUS - BRISTOL	SIRO	Blood	E.D.T.A	1	This test is sent via NPEX. Trough sample required. Note time since last dose on form
SIROLIMUS - OTHER	SIR	Blood	E.D.T.A		DO NOT SPIN. Send daily by 1st Class post. If possible note time since last dose.
SKELETAL ANTIBODIES	SKAB	Blood	S.S.T.	23	
SKIN BIOPSY	SKIN	See Info	Plain 25ml Universal		Sudden Unexpected Death in Infants (SUDI)  Should be received in a Plain 25ml Universal Container with transport medium or normal saline.



<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
SLA/LP	SLAL	Blood	S.S.T.	24	Soluble liver antigen/Liver Pancreas antigen associated with autoimmune hepatitis.
SM ANTIBODY	ENAP	Blood	S.S.T.	8	Tested when ENA screen is positive
SMA TITRE	SMAT	Blood			Requested when AMA is positive on the AIP.
SMOOTH MUSCLE ANTIBODY	AIP	Blood	S.S.T.	4	If positive a titre will be performed
SODIUM	EL	Blood	S.S.T.	1	
SODIUM - ASCITIC FLUID	ASEL	Misc Fluid	Plain 25ml Universal	1	
SODIUM - RANDOM URINE	UEL	Urine	Plain 25ml Universal	1	Boric acid container is unsuitable.
SODIUM - URINE 24HR	24NA	Urine	24hr Urine Container - No Preservative	1	Collect as a random urine sample in a sterile container or as a 24hr collection. No preservative is required. Boric acid containers are unsuitable for analysis.
SP IGE COR A1 HAZELNUT	HAC1	Blood	S.S.T.	19	
SP IGE COR A14 HAZELNUT	HC14	Blood	S.S.T.	19	
SP IGE COR A9 HAZELNUT	HAC9	Blood	S.S.T.	19	
SP IGE R PEANUT ARA H8	RPA8	Blood	S.S.T.	21	
SP IGE UNLISTED	UIGE	Blood	S.S.T.	16	Please add details of test required to clinical details.
STAT3 MUTATION (B)	ST3B	Blood	E.D.T.A		
STAT3 MUTATION (BM)	ST3M	Bone Marrow	E.D.T.A		
STEM CELL 2J	2J				
STEM CELL COUNT - PBSC	PBSC	Blood	E.D.T.A		
STEM CELL FORM 2B	2B			1	
STEM CELL FORM 2E	2E				
STEM-CELL COUNT	FSC	Blood	E.D.T.A		Test comprises %CD34 and absolute CD34.
STEROID PROFILE	USP	Urine	24hr Urine Container - No Preservative	1	
STONE ANALYSIS	CLUT	Stone	Plain 25ml Universal		Source/Type of stone is REQUIRED for all submissions. Stones originating from sources not related to the kidney should be air-dried, then placed in a plastic tube or a urine collection cup. Do not use tape. Minute specimens may be placed in a gelatin capsule. Place stone in a sterile container.
STONE SCREEN - URINE 24HR	REN1, R	Urine	24hr Urine Container - Thymol		REN1 consists of 24hr Urine Creatinine, Uric Acid & Sodium.  REN2 consists of 24hr Urine Creatinine, Calcium, Phosphate, Magnesium, Oxalate & Citrate.
SUGAR CHROMATOGRAPHY (FAECES)	FTLC	Faeces	Faecal Specimen Container		
SUGAR CHROMATOGRAPHY (URINE)	TLC	Urine			
SULPHITE - RANDOM URINE	SO3	Urine			
SULPHONYLUREAS	SUR	Urine	Plain 25ml Universal	30	
SWEAT TEST	SW	See Info		1	All requests for Sweat Tests should be booked through to the Point of Care team in Pathology Reception at Hub on 01823 34 6747.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
SYNACTHEN STIMULATION TEST	SST	Blood	S.S.T.	1	
t(11;14) Screen (BLOOD)	MCSB	Blood	E.D.T.A		NO LONGER AVAILABLE
t(11;14) Screen (BONE MARROW)	MCSM	Bone Marrow	E.D.T.A		NO LONGER AVAILABLE
t(14;18) Screen (BLOOD)	T14B	Blood	E.D.T.A		NO LONGER AVAILABLE
t(14;18) Screen (BONE MARROW)	T14M	Bone Marrow	E.D.T.A		NO LONGER AVAILABLE
t(15;17) Monitoring (BLOOD)	15MB	Blood	E.D.T.A	1	
t(15;17) Monitoring (BONE MARROW)	15MM	Bone Marrow	E.D.T.A	1	
t(15;17) Screen (BLOOD)	15SB	Blood	E.D.T.A	3	
t(15;17) Screen (BONE MARROW)	15SM	Bone Marrow	E.D.T.A	1	
t(9;22) Monitoring (BLOOD)	T9MB	Blood	E.D.T.A	58	
t(9;22) Monitoring (BONE MARROW)	T9MM	Bone Marrow	E.D.T.A	61	
t(9;22) Screen (BLOOD)	T9SB	Blood	E.D.T.A	23	
t(9;22) Screen (BONE MARROW)	T9SM	Bone Marrow	E.D.T.A	69	
TACROLIMUS - BRISTOL	TACR	Blood	E.D.T.A	2	This test is sent via NPEX. Trough sample required. Note time since last dose on form
TACROLIMUS - OTHER	TAC	Blood	E.D.T.A	17	Assay requires 5ml of EDTA blood. Note time since last dose on form. Some requests may indicate an alternative destination in which case send away to the appropriate laboratory. Birmingham do them Mon-Fri at 11:00 Southmead do them Mon @2pm, Wed@11m, Fri@2pm Mycophenolate take 2 extra EDTA
TAU PROTEIN	TAU				
T-Cell Clonality		Blood			
T-CELL FUNCTION TESTS	LPRO	Blood	Lithium Heparin	9	Need to arrange with Immunology. Test needs to be taken first thing am and is unavailable on Fridays.
T-Cell Receptor Studies (BLOOD)	TCCB	Blood	E.D.T.A		
T-Cell Receptor Studies (BONE MARROW)	TCCM	Bone Marrow	E.D.T.A	2	
T-CELL SUBSETS	TCS	Blood	E.D.T.A		
TEGRETOL	CABZ			1	See Carbamazepine This test is now performed only at MPH
TERASOZIN/TERSOZIN			S.S.T.		Pre-dose samples required, check with Duty Biochemist before requesting.
TESTICULAR ABS	TTAB	Blood	S.S.T.		
TESTOSTERONE	TE	Blood	S.S.T.	1	Female: 0.35 - 2.6 nmol/L Male: 6.07 - 27.1 nmol/L
TETRADECENYL CARNITINE	CAPR	Blood Spot		19	See carnitine profile
TGN (6TGN) and MMPN (6MMPN)		Blood			

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
THALLIUM	TH	Blood	S.S.T.	26	Assay requires 1ml of sample. Results of greater than 50 are considered hazardous.
THEOPHYLLINE	THE	Blood	S.S.T.	1	This test is now performed only at MPH Sample is normally taken 4-6hrs post dose. If querying adequate dose then take a pre dose sample.
THINOPENTONE		Blood	Plain Clotted		
THIOGUANINE NUCLEOTIDES-6	TPGN	Blood	E.D.T.A		
THIOPURINE METHYL TRANSFERASE	TPMT	Blood	E.D.T.A	5	TMPT activity is stable at room temperature for 2 days and at 4 centigrade for at least 9 days. Lithium heparin samples as unsuitable.  NOTE: Samples from patients who have received a recent Blood Transfusion can give misleading results. Please provide details of recent transfusions (within 90 days) on the request form and they will perform genotyping to confirm the patient's TMPT status.
THIOPURINE TGN METABOLITES	TPGN	Blood	E.D.T.A		
THROMBASTHENIAS	3D	Blood		1	Contact Cambridge Laboratory before referring. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
THROMBIN TIME	TT	Blood	Sodium Citrate	11	Only available at Hub laboratory. Routine test (not acute). Double spin, aliquot and freeze. Send by routine transport to Hub  New Reference Range 29/08/18 (10.3 - 16.6)
THROMBOCYTOPENIA (AUTOIMMUNE)	3D	Blood	E.D.T.A	1	Requires completion of NBS 3D form, which can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a> . Sample volumes required are on page 2 of the form.
THROMBOCYTOPENIA (FETAL/NEONAT	3D	Blood	E.D.T.A	1	Platelet immunology investigations require completion of a 3D request form, which can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a> . Samples must be labelled as per Transfusion labelling policy
THROMBOCYTOPENIA (HEPARIN INDU	HIT	Blood	S.S.T.	1	Complete a NBS 3D platelet referral form, which can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a> . This and samples must be handwritten as per transfusion requirements. Samples are sent to Filton.
THROMBOPHILIA SCREEN	THRM	Blood	Sodium Citrate	9	Requires 5 x Sodium Citrate, 1 x EDTA & 1x SST Samples Includes Protein C, Protein S, Antithrombin, Activated Protein C Resistance, Antiphospholipid antibodies and FII mutation and FV Leiden if any of the above are abnormal. These tests are expensive and are vetted by the Consultant Haematologist. Clinical details are essential for processing.
THYROGLOB. MEASUREMENT	THME	Blood	S.S.T.	2	
THYROGLOB. PROFILE - CARDIFF	THGC	Blood	S.S.T.	16	
THYROGLOB. PROFILE - EXETER	THGE	Blood	S.S.T.	6	
THYROGLOB. PROFILE - NEWCASTLE	THGN	Blood	S.S.T.	15	Assay requires 1ml of sample.
THYROGLOB. PROFILE - SOUTHAMPTO	THGS	Blood	S.S.T.	11	
THYROGLOBULIN PROFILE		Blood	S.S.T.		Assay requires 1ml of sample.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
THYROID BINDING GLOBULIN	TBG	Blood	S.S.T.		
THYROID FUNCTION TEST	TSH	Blood	S.S.T.	1	
THYROID RECEPTOR ANTIBODIES	TSHR	Blood	S.S.T.	13	
THYROID STIMULATING IMMUNOGLOB		Blood	S.S.T.		
THYROTROPHIN RECEPTOR ABS		Blood	S.S.T.		
TOBRAMYCIN LEVEL	TOB	Blood	S.S.T.	1	URGENT REQUEST,results must be available within 24 hours
TOTAL PORPHYRIN (SEND)	TUP	Blood			
TOTAL PROTEIN	TP	Blood	S.S.T.	1	
TP53 MUTATION SCREEN (B)	T53B	Blood	E.D.T.A	56	
TP53 MUTATION SCREEN (BM)	T53M	Bone Marrow	E.D.T.A	1	
TPMT Activity		Blood			
TPMT GENOTYPE	TPMG	Blood	E.D.T.A	31	
TPO ANTIBODIES	ATA	Blood	S.S.T.		<8 iU/mL
TPP EFFECT	TK	Blood			
TRANSFERRIN	TRF	Blood	S.S.T.	1	
TRANSFERRIN GLYCOFORMS					
TRANSFERRIN GLYCOFORMS - BLOOD	TRGS	Blood	S.S.T.	9	
TRANSFERRIN RECEPTOR	STFR	Blood	S.S.T.	10	
TRANSFERRIN SATURATION	TRF	Blood		1	
TRANSFUSION ASSOCIATED GRAFT VS 3A				1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
TRANSFUSION REACTION (SEVERE FE 3A				1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>
TRANSFUSION RELATED ACUTE LUNG 3A		Blood		1	Histocompatibility and Immunogenetics investigations require completion of an NBS referral form and are sent to NBS, Filton These tests may require the approval of a Consultant Haematologist Form and sample labelling requirements as per Transfusion sample labelling policy. Request form can be obtained from: <a href="http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/">http://hospital.blood.co.uk/diagnostic-services/hi/hi-test-request-forms/</a>

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
TREPINE - BRISTOL	BMTB			1	
TRICHINELLA SEROLOGY	TRI	Blood	S.S.T.		
TRICYCLICS	TRIC	Urine	Plain 25ml Universal	31	
TRIGLYCERIDES	TG	Blood	S.S.T.	1	Usually this investigation requires a fasting sample.
TRIMETHYLAMINE (TMAU)		Urine	Plain 25ml Universal		
TROPHYRYMA WHIPPLEI(Tissue)	WHIT	See Info	Sterile Container (appropriate size)		Test needs to be discussed and agreed with consultant microbiologist
TROPONIN I	TN	Blood	S.S.T.	1	A separate sample is required for Troponin request. If TNT not raised, a repeat sample should be taken after 12 hours if MI is suspected. Request TNT1 if only 1x SST is received and there are other tests required.
TRYPSIN - FAECAL	FTRY	Faeces	Faecal Specimen Container		This test is no longer available. Refer any enquiries to Duty Biochemist.
TSH	TSH	Blood	S.S.T.	1	TSH is the Thyroid first line screening test. If the Clinical details include one or more of the following a FT3 & FT4 will be automatically be performed: Hyperthyroidism, treatment with amiodarone & Hypopituitarism. Duplicate assay not performed if previous TSH was <25 days ago unless agreed with Duty Biochemist.  0.38 - 5.33 mU/L
TSH (SEND AWAY)	ETSH	Blood	S.S.T.	3	
TSH ALPHA SUBUNIT	ASU	Blood	S.S.T.	72	
TSH RECEPTOR ANTIBODIES	TSHR	Blood	S.S.T.	13	
UDP-GALACTOSE	UDPG	Blood	Lithium Heparin		
UREA	UR	Blood	S.S.T.	1	
UREA - ASCITIC FLUID	ASUR	Ascitic Fluid	Plain 25ml Universal	1	
UREA - FLUID	FLUR	Misc Fluid	Plain Clotted	1	
UREA - RANDOM URINE	UUR	Urine	Plain 25ml Universal	4	Boric acid samples are unsuitable for analysis
UREA - URINE 24HR	24UR	Urine	24hr Urine Container - No Preservative	1	Collect as a random urine sample in a sterile container or as a 24hr collection. No preservative is required. Boric acid containers are unsuitable for analysis.
URIC ACID	UA	Blood	S.S.T.	1	
URIC ACID - FLUID	FURI	Misc Fluid	Plain Clotted	1	
URIC ACID - RANDOM URINE	UUA	Urine	Plain 25ml Universal	4	Boric acid samples are unsuitable for analysis
URIC ACID - URINE 24HR	24UA	Urine	24hr Urine Container - Thymol	1	To be collected in a 24hr Urine bottle which contains Thymol.
URINE ANTIHYPERTENSIVE SCREEN	DBU	Urine	Plain 25ml Universal	7	
URINE BILE ACIDS	DBU	Urine	Plain 25ml Universal	7	For investigation of inborn errors of bile acid synthesis and 2ml random urine is required.
URINE ORGANIC ACIDS	UOA	Urine	Plain 25ml Universal	11	Boric acid containers are unsuitable for this analysis.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
URINE REDUCING SUBSTANCES	URED	Urine	Plain 25ml Universal	1	Sample needs to be received by laboratory within 12 hours of collection. Boric acid container is unsuitable for analysis. Positive samples will be stored for 4 weeks as they may require further investigations, in which case results should be available within 1 month from them being added.
UROBILIOGEN - RANDOM URINE		Urine	Plain 25ml Universal		
USTEKINUMAB DRUG LEVELS	USTK	Blood	S.S.T.	21	
VALPROATE	VAL	Blood	S.S.T.	3	Assay normally available only for Bipolar, Mania or Partnership patients, or where compliance is queried.
VANCOMYCIN	VANC	Blood	Plain Clotted	1	Time of collection is critical, collection should be within 1 hour pre-dose and the time of the last dose should be stated on the request. Dosing regimen should also be indicated. Incorrect timing can result in meaningless or difficult to interpret results. For this reason, antibiotic assays should not be placed on the phlebotomy list. Post-dose levels are no longer tested and should not be sent without prior discussion with Consultant Microbiologist. This should be noted on the request.
VASCULAR ENDOTHELIAL GROWTH FA	VEGF	Blood	S.S.T.	16	Yellow Top SST
VASOPRESSIN	ADH	Blood			
VEDOLIZUMAB DRUG + ABS	VEDO	Blood	S.S.T.		Only Vedolizumab drug level will be requested as first line test and antibody levels will be added automatically when the drug level is undetectable
VERY LONG CHAIN FATTY ACIDS	VLCF	Blood	Lithium Heparin		
VIGABATRIN	VIGA	Blood	Plain Clotted		Inform Duty Biochemist of all requests. An Order No is required. Use our form.
VIP	GAST	Blood	E.D.T.A	24	Assay is performed on requests for Gastrin if there is sufficient sample. See Gastrin for protocol. Note: VIP is only performed if specifically requested or if the request is for Full Gut Hormone Profile.  Please ensure that this is just a VIP request, and not the full Gut Hormone, if in doubt enclosed a copy of the original form when sending away.
VISCOSITY - PLASMA	V	Blood	E.D.T.A	1	A separate sample is required. Consider CRP as an alternative.
VITAMIN A	VITS	Blood	Lithium Heparin	30	
VITAMIN B1		Blood	E.D.T.A		Do not expose to Light (keep in the Dark).  Sample requirements are available at: <a href="http://www.clinbiochem.info/vitamins.html">http://www.clinbiochem.info/vitamins.html</a>
VITAMIN B3		Faeces	E.D.T.A		Do not expose to Light (keep in the Dark). This test is not available.
VITAMIN B6		Blood	E.D.T.A		Do not expose to Light (keep in the Dark).  Sample requirements are available at: <a href="http://www.clinbiochem.info/vitamins.html">http://www.clinbiochem.info/vitamins.html</a>
VITAMIN D TOTAL (D3)	VITD	Blood	S.S.T.	1	Requires 0.5ml of serum.  Serum is stable for 8 hours at 18-25 Centigrade or 4 days at 2-8 Centigrade. Duplicate assay not performed if previous VITD was <336 days ago unless agreed with Duty Biochemist.

<i>Test Request</i>	<i>Ordercomm Code</i>	<i>Sample Type</i>	<i>Container</i>	<i>Expected Turnaround Time (Days)</i>	<i>Sample Information</i>
VITAMIN E	VITS	Blood	Lithium Heparin	30	
VITAMIN K		Blood	S.S.T.		
VMA (24hr URINE)	CATS	Urine	24hr Urine Container - No Preservative	3	
VMA (RANDOM URINE)	RVMA	Urine	Plain 25ml Universal	21	Assay requires a minimum of 1ml Urine
VOLTAGE GATED Ca CHANNEL ABS	VCAB	Blood	S.S.T.	20	
VOLTAGE GATED K+ Abs	VKAB	Blood	S.S.T.		
VON WILLEBRANDS ACTIVITY	VWF	Blood	Sodium Citrate	6	(Samples Required - 3 x Sodium Citrate)
VON WILLEBRANDS ANTIGEN	RAG	Blood	Sodium Citrate	6	(Samples Required - 3 x Sodium Citrate)
VON WILLEBRANDS DISEASE SCREEN	VWD	Blood	Sodium Citrate		For the investigation of von Willebrands disease. (Samples Required - 3 x Sodium Citrate)
VWF Multimers	MULT	Blood	Sodium Citrate		
WARFARIN (PLASMA)	WARF	Blood	Sodium Citrate	36	
WASP - SPECIFIC IGE	WASP	Blood	S.S.T.		
WHITE CELL ENZYMES	WCE	Blood	E.D.T.A	38	A list of diseases tested for may be found in Appendix C. Sample must reach external Lab within 24hrs of being taken
XANTHOCHROMIA - CSF	CXAN	CSF	Plain 25ml Universal	1	These samples must be received in the Laboratory within 30min of collection. The laboratory must be informed when the sample is to be sent.  Also an SST sample must be taken for Protein and Bilirubin analysis. Failure to take an SST may result in no comment on the results.  If Microbiology require any samples, send them samples 1 and 3 (do not open, pipette or separate them as contamination will occur).
ZAP-70 (BLOOD)	ZAP	Blood	E.D.T.A		Please Contact Haematology Lab
ZAP-70 (BONE MARROW)	ZAPB	Bone Marrow	E.D.T.A		Please Contact Haematology Lab
ZINC - BLOOD	ZN	Blood	Trace Metal Serum Tube	2	Samples in plain clotted and heparin paediatric tubes are also suitable for analysis.  Haemolysed samples are unsuitable for investigation.
ZINC - TISSUE		Tissue	Plain 25ml Universal		Requires 10mg fresh tissue (DO NOT USE FORMALIN).  For paediatric requests, smaller sample volumes than those quoted for each assay may be acceptable.
ZINC PROTOPORPHYRIN	LEAD	Blood	E.D.T.A	15	This test is normally done as part of the Lead investigation. If results >20 then there is definite overexposure to Lead.
ZINC TRANSPORTER ZNT8		Blood	S.S.T.		