

Blood Sciences Test Repertoire

Tests performed In-House

Critical tests highlighted in **yellow** *can be ordered as urgent* – with turnaround times of <1 hour for Haematology / Coagulation and <2 hours for Chemistry.

Any test **not highlighted** that is required in urgently- contact the laboratory on 01305 254331.

Sample volumes:

A minimum 0.5ml sample is required for most investigations- please refer to specific tests to check individual requirements.

Paediatric Ranges:

Please contact the laboratory for specific paediatric ranges.

Test Name	Sample Type / Tube Type	Alternative Name	Lab Code	Sample Information/special precautions	Normal Ranges (Adults)	Turnaround Times
AFP	Blood / SST		AFP		<8 kU/L	72 hours
Albumin	Blood / SST		ALB	In LFT battery	35-52 g/l	24 hours
Alkaline Phosphatase	Blood / SST	Alk. Phos ALP	ALK	In LFT battery	Male 30-150 Female 40-150	24 hours
Alcohol (Plasma)	Blood / Fluoride Oxalate or Fluoride EDTA		ALC		<100 mg/L negative	24 hours
Alanine Aminotransferase	Blood / SST	ALT	ALT	In LFT battery	<42 iu/l	24 hours
Ammonia	Blood / EDTA / Lithium Heparin		AMMON	Contact lab in advance Sample MUST be sent down to lab on ice and received in lab within 15 minutes of venipuncture. Haemolysed samples are not acceptable.	<40 µmol/l	24 hours

Amylase	Blood / SST		AMY	Haemolysis interferes with this assay.	10-90 u/l	24 hours
Urinary Amylase	Plain Universal		AMYU		-	72 hours
Anti-10a	Blood (plasma) / Sodium Citrate	Anti-Xa level	A10A	Contact laboratory special request. Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/- 10% of the fill line.	Contact laboratory	7 days routinely or Same day if urgent.
BHCG	Blood / SST	Beta-Human Chorionic Gonadotropin	BHCG		<2 iu/l	24 hours
Bile Acids (serum)	Blood / SST		TBAL	Fasting sample required	1.0-6.0 µmol/l – Refer to Maternity guidelines for further details of action / treatment levels.	24 hours
Bilirubin – Direct	Blood / SST	Conjugated Bilirubin	DBIL	Haemolysis interferes with this assay and may reduce values by up to 10%	<10% of Total Bilirubin	24 hours
Bilirubin - Total	Blood / SST		TBIL	In LFT battery	3-19 µmol/l	24 hours
--Blood Film reporting--	Blood/ EDTA		No test code	Film reports are requested by the laboratory, or Haematology Consultants/Medical staff in response to abnormal FBC parameters, either to confirm automatically generated numerical blood parameters, or to look for clinically significant changes in blood cell morphology. Film reports can be requested in advance by stating on the request form that a film report is required. Film reports do not constitute part of a		24 hours - urgent films 5 Working days- non urgent , and films requiring extended reporting

				<p>normal FBC request. Automated white cell differential (including neutrophils) may be delayed pending confirmation by microscopy (Blood film reporting)</p> <p>Automated white cell differential (including neutrophils) may be delayed pending confirmation by microscopy (Blood film reporting) If concerned –results may be given by phone on the understanding that they are subject to review / confirmation by film. Please contact lab (4331)</p>		
C3	Blood / SST	Complement C3	C3		0.75-1.65 g/l	72 hours
C4	Blood / SST	Complement C4	C4		0.14-0.54g/l	72 hours
CA 125	Blood / SST		C125		<35 kU/L	72 hours
CA 153	Blood / SST	CA15-3	C153	Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration.	<25 kU/L	7 days
CA 199	Blood / SST	CA19-9	C199		<27 kU/L	7 days
Calcium	Blood / SST		CAL	Always request albumin. Corrected calcium is calculated.	2.15-2.60 mmol/l	24 hours
Urinary Calcium	24 hour urine collection		CAEU		-	72 hours
Carbamazepine	Blood / SST	Tegretol	CBZ	3 hours post dose	Single drug regime 8-12mg/l Multiple drug regime 4-8mg/l	24 hours

CEA	Blood / SST	Carcinogenic Embryonic Antigen	CEA		<5 µg/l	72 hours
Cholesterol	Blood / SST		CHOL		3.1-6.5 mmol/l	24 hours
Clotting Screen	Blood / Sodium Citrate	PT / APTT	CLOT	Must be filled to within +/- 10% of the fill line, and be less than 12 hours old.	APTT – 25-37 secs PT – 9-13 secs	12 hours
CPK	Blood / SST	CK, Creatinine Phosphokinase	CPK		15-200 IU/L	24 hours
COC2	Blood / SST	Bicarbonate	TCO2	In RFT battery	23-35mmol/l	24 hours
Cortisol	Blood / SST		COR	Rest before sample collection. Pts. receiving fludrocortisone / prednisolone may increase cortisol level due to cross-reactivity.	Contact laboratory	72 hours
Creatinine	Blood / SST		CR	In UE battery	50-120µmol/l	24 hours
Urinary Creatinine	Plain Universal or 24 hour urine collection		CRU or CREU (24 hrs.)	If being tested as part of a creatinine clearance test a blood sample must also be collected during the period of collection.	-	72 hours
CRP	Blood / SST	C-Reactive Protein	CRP		<6 mg/l	24 hours
CSF Screen	CSF in Plain Universal and Fluoride Oxalate		CSFS	Includes CSF protein and CSF glucose (if fluoride oxalate received)	Contact laboratory	24 hours

CSF Xanthochromia Screen	CSF in Plain Universal		XANT	Do not transport via pod system Protect from light. Serum sample for Total Protein and bilirubin also required Please provide Time of onset at request. This test is not within our scope for ISO15189 accreditation.	Contact laboratory	24 hours
DDIMER	Blood / Sodium Citrate		DDIM	Must be filled to within +/- 10% of the fill line, and be less than 12 hours old.	0-240 ng/ml	12 hours
Digoxin	Blood / SST	Lanoxin	DIG	6 hours post dose Not suitable for patients on DIGIBAND	0.8-2.0 µl	24 hours
EPP – Serum electrophoresis	Blood / SST	Myeloma screen Paraprotein Quantification	EPP		Contact laboratory	10 days
Erythrocyte Sedimentation Rate	Blood / EDTA	ESR	ESRA	Sample must be less than 24 hours old.	<10mm	24 hours
Factor 8	Blood / Sodium Citrate		F8	Must be filled to within +/- 10% of the fill line Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH.	50-150%	14 days <3 hrs. haemophillia emergencies.
Factor 9	Blood / Sodium Citrate		F9	Must be filled to within +/- 10% of the fill line Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH.	65-150%	14 days <3 hrs. haemophillia emergencies.
Factor 8 Inhibitor	Blood / Sodium Citrate		F8IN	Must be filled to within +/- 10% of the fill line Bethesda Assay Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH.	0 Bethesda units	21 days < 5 hours for haemophilia emergencies
-FBC--	Blood / EDTA	Full Blood Count	FBC	Automated white cell differential (including neutrophils) may be delayed pending	Hb Male 135-175 g/l	24 hours (excluding film

				confirmation by microscopy (Blood film reporting) If concerned –results may be given by phone on the understanding that they are subject to review / confirmation by film. Please contact lab (4331) Note: Blood Film reports do not form part of the FBC request.	Hb Female 120-160 g/l WBC 4.5-11 10 ⁹ /L Platelets 150- 450 10 ⁹ /L	report) See Blood film reporting.
Fe (Iron)	Blood / SST		FE	Includes UIBC to calculate iron saturation	10-28 µmmol/l	72 hours
Ferritin	Blood / SST		FER	Haemolysis interferes with this assay	Female 15-200 µg/l Male 15-300 µg/l	72 hours
Fibrinogen	Blood / Sodium Citrate		FIBA	Must be filled to within +/- 10% of the fill line	1.5-4 g/l	12 hours
Folate	Blood / SST	Folic Acid	SFOL	In B12F battery. Protect from light. Fasting sample as recent food intake can increase folate. Haemolysed samples are unsuitable for analysis.	Contact laboratory	72 hours
Free Light Chains	Blood / SST	Kappa/Lambda ratio	FLCD	Free Kappa and Free Lambda measured, ratio calculated Kappa/Lambda ratio for patients with renal impairment is 0.37-3.10 This test is not within our scope for ISO15189 accreditation	Kappa 3.3-19.4 mg/L Lambda 5.7-26.3 mg/L Ratio 0.26 – 1.65	7 days
Free T4	Blood / SST	Free Thyroxine	FT4		9-19 pmol/l	72 hours

FSH	Blood / SST	Follicle Stimulating Hormone	FSH	In MENO battery	Follicular 3-12 iu/l Mid Cycle 8-20 iu/l Luteal 1-6.5 iu/l Post meno 35-150 iu/l	72 hours
G6PD	EDTA	Glucose-6-Phosphate Dehydrogenase Deficiency (G-6-PDH)	G6PDS	Includes screening test and quantitative test. 2x EDTA samples required.	Deficient or Normal	Urgent screen same day Qualitative Send away 21 days
Gentamicin	Blood / SST		GENL	Blood taken from lines used to administer antibiotics may give erroneous results Please give dose regimen and time of last dose Refer to BNF or trust policies for interpretation	Contact laboratory	24 hours
Gamma GT	Blood / SST	GGT	GGT		Female <52IU/L Male <60IU/L	24 hours
Glucose – Random	Blood / Fluoride Oxalate or Fluoride EDTA		GL		3.0-7.8 mmol/l	24 hours
Glucose - Fasting	Blood / Fluoride Oxalate or Fluoride EDTA		GLF	Fasting for 12 hours prior test.	3.0-6.0 mmol/l	24 hours

Haemoglobinopathy Antenatal Screen	2 X Blood / EDTA	FOQ Screen, FBH	FBH	Must have FOQ form with sample. Must also request FBC. Samples must be received the same day	Contact laboratory	72 hours
HbA1c	Blood / EDTA	A1c	T1C	Patients with a Hb variant will require their results to be interpreted with caution. This test is not suitable for patients with an altered red cell turnover. Please contact the laboratory for further advice.	18-46 mmol/mol IFCC	72 hours
HDL	Blood / SST	High Density Lipoprotein	HDL	In LRP battery	1.10-1.60 mmol/l Male 1.10-1.80 mmol/l Female	72 hours
Heparin Monitoring	Blood / Sodium Citrate	HT / APTT	HT	Must be filled to within +/- 10% of the fill line, and less than 12 hours old.	Contact laboratory dose dependent	12 hours
HS-TROP I	Blood / SST	High Sensitive Troponin I	HSTROP	Haemolysis interferes with this assay	<16ng/l Female <34ng/l Male	24 hours
ICT Chloride	Blood / SST	CL	CL	In RFT battery	95-105mmol/l	24 hours
ICT Urinary Chloride	Plain Universal	Urinary CL	CLU		-	72 hours
ICT Potassium	Blood / SST	K	K	In UE battery. Haemolysed samples not suitable for analysis. Do not store uncentrifuged sample in the fridge. Serum needs to be separated from the cells within 6 hours of venepuncture. Samples not centrifuged within 8 hours will be rejected for analysis.	3.5-5.0 mmol/l	24 hours
ICT Urinary Potassium	Plain Universal	Urinary K	KU		-	72 hours

ICT Sodium	Blood / SST	Na	NA	In UE battery Gross haemolysis will falsely lower the results.	132-145 mmol/l	24 hours
ICT Urinary Sodium	Plain Universal	Urinary Na	NAU		-	72 hours
IGA	Blood / SST	Immunoglobulin A	IGA	In battery IGS	0.8-4.0 g/l	72 hours
IGG	Blood / SST	Immunoglobulin G	IGS	In battery IGS	6.0-16.0 g/l	72 hours
IGM	Blood / SST	Immunoglobulin M	IGS	In Battery IGS	0.5-2.0 g/l	72 hours
Lactate	Blood / Fluoride Oxalate or Fluoride EDTA	Lactic Acid	LACT	Contact lab in advance. Haemolysis interferes with this analysis.	0.6-2.5 mmol/l	24 hours
LDH	Blood / SST	Lactate Dehydrogenase	LDH	Haemolysed samples are unsuitable for analysis.	<225 IU/L	24 hours
LH	Blood / SST	Luteinising Hormone	LH	State day in cycle. In battery MENO	Follicular 1-16 iu/l Mid Cycle 20-100 iu/l Luteal 1-3 iu/l Post meno 14-77 iu/l	72 hours
Lithium	Blood / SST	LI	LITM	Take sample 12 hours post dose.	0.4 – 1.0 12hours post dose	24 hours
LUPUS	Blood / Sodium Citrate x3	Lupus anticoagulation screen	LUPS	Must be filled to within +/- 10% of the fill line Includes send away Anti- cardiolipins (ACLA).	Not detected	14 days (ACLA 5 weeks).

				Lupus test must be frozen within 4 hours of sampling. Patient may need to be bled at DCH.		
Magnesium	Blood / SST	MG	MAG	Haemolysis interferes with this assay	0.7-1.0 mmol/l	24 hours
Malaria Screen	Blood / EDTA		MAL	Test consists of a rapid screening test, plus microscopic examination of blood slides by 2 suitably trained BMS.	Negative	12 hours for rapid screen. 24 -48 hours for full microscopy report dependent on staff availability. If concerned please contact laboratory 4331
Urinary Micro-albumin	Plain Universal	MALB	MALB		-	72 hours
NT-Pro BNP	Blood / EDTA	Pro BNP	PBNP	Interference from high biotin dose therapy wait >8 hours post dose.	<400 pg/ml	7 days
Oestradiol	Blood / SST	Estradiol, E2	OEST		Contact Laboratory	72 hours
Osmolality - Serum	Blood / SST		OSS	Haemolysed samples are unsuitable for analysis	275-295 mosmol/kg	24 hours
Osmolality - Urine	Plain Universal		OSU		-	24 hours
PABU – Paul Bunnell	Blood / SST	IM Screen, Monospot GF,	PABU	Can receive false positives if recent CMV / Hep A / Parrovirus infection.	Negative	72 hours

Paracetamol	Blood / SST		PMOL	In TOX battery. Haemolysed samples are unsuitable for analysis	Not Detected	24 hours
Phenytoin	Blood / SST	Epanutin	PHY		10-20 mg/l	24 hours
Phosphate	Blood / SST	PO4	PO4	In RFT battery Haemolysis interferes with this assay.	0.8-1.60 mmol/l	24 hours
Urinary Phosphate	24 hour urine collection		PEU		-	72 hours
Progesterone	Blood / SST	Day 21 Progesterone	PRGS		Contact Laboratory	72 hours
Prolactin	Blood / SST		PROL		<300 miu/L Male <500 miu/L Female	72 hours
PTH	Blood / EDTA	Parathormone	PTH	Interference from high biotin dose therapy wait >8 hours post dose. Must reach the laboratory within 7 hours	1.6-6.9 pmol/l	7 days
PSA	Blood / SST	Prostate Specific Antigen	PSA		<3 µg/l - 50 yrs. <4 µ/l – 60 yrs. <5 µg/l – 70 yrs.	72 hours
Retics	Blood / EDTA	Reticulocyte Count	RETIC	Requires FBC,	50-125 X10 ⁹ /L	24 hours
Rheumatoid Factor	Blood / SST	RF	RF		<30 iu/ml	72 hours
Salicylate	Blood / SST	Aspirin	SAL	In TOX battery	Not detected	24 hours
SHBG	Blood / SST	Sex Hormone Binding Globulin	SHBG		38-150 nmol/l Female 13-88 nmol/l Male	72 hours

Sickle Screen	Blood / EDTA		SCKL		Negative	24 hours
Tacrolimus	Blood / EDTA		TACL	Trough = 12 hours post dose and /or prior to dose.	Contact laboratory	96 hours
Testosterone	Blood / SST	Androgens	TEST	Haemolysis interferes with this analysis.	0.5-2.8 nmol/l Female 8-35 nmol/l Male	72 hours
Thrombin Time	Blood / Sodium Citrate		TT	Must be filled to within +/- 10% of the fill line, and be less than 12 hours old.	10-17 secs	7 days
Thrombophilia Full Profile	Blood / Sodium Citrate x4		THRS	Inc.: AT3, PRC, PRSF, APCR, LUPUS Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Requires 4 full tubes. Requires Haem consultant authorization for testing Some of this battery is sent away	Contact laboratory	21 days for 'in house' tests, 6 weeks for send aways.
Theophylline	Blood / SST	Aminophylline, Phyllocontin	THEOP	Peak 4-6hrs for slow release oral preparation. Peak 1 hrs. post IV infusion.	10-20mg/l	24 hours
Total Protein	Blood / SST		TP	In LFT battery. Haemolysis interferes with this assay	63-80 g/l	24 hours
Triglycerides	Blood / SST		TRIG	In LRP battery	0.2-2 mmol/l	24 hours
TSH	Blood / SST	Thyroid Stimulating Hormone, Thyrotropin	TSH		0.35-4.94uIU/ml	72 hours
Urate	Blood / SST	Uric Acid	UA		0.12-0.40 mmol/l	24 hours

Urinary Urate	24 hour urine collection		UAEU		-	72 hours
UIBC	Blood / SST	Unsaturated Iron Binding Capacity	UIBC	In FE test code	12.4 - 43 Male 12.5 - 55.5 Female	72 hours
Urinary Protein	Plain universal		PRU		<0.1 g/l	72 hours
Urea	Blood / SST		U	In UE battery	3.0-6.5 mmol/l	24 hours
Urinary Urea	Plain universal		UU		-	72 hours
Valproate	Blood / SST	Epilim	VALP		50-100mg/l	24 hours
Vancomycin	Blood / SST		VANL	Blood taken from lines used to administer antibiotics may give erroneous results Please give dose regimen and time of last dose Refer to BNF or trust policies for interpretation	Contact laboratory	24 hours
Warfarin Monitoring	Blood / Sodium Citrate	WT / INR	WT	Must be filled to within +/- 10% of the fill line, and less than 12 hours old.	Contact laboratory, dose dependent	12 hours
Vitamin B12	Blood / SST		B12	In B12F battery. Haemolysed samples are unsuitable for analysis.	180-910ng/l	72 hours
Vitamin D	Blood / SST	25 Hydroxy Vitamin D	TVITD		Contact laboratory	72 hours

Please note: Where 24 hours is stated, this is the maximum for outpatient work. Inpatient work will be turned around the same day where possible.

Sendaway Tests

For any test not listed below, please contact the Laboratory for further information- not all available sendaway tests are listed below

Test Name	Sample type / Tube type	Alternative Name	Lab Code	Test Information	Turnaround Times
ACE	Blood / SST	Angiotensin Converting Enzyme	ACE		14 working days
A.C.R.A	Blood / Plain (no gel)	Acetyl Choline Receptor Antibodies	ACRA		14 working days
A1AT	Blood / Plain (no gel)	Alpha 1 Antitrypsin	A1AT		14 working days
ANA	Blood / SST	Connective tissue anti-nuclear ANA screen	ANA		21 working days
Activated Protein C Resistance	Blood / Sodium Citrate		APCR	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line.	6 weeks
AST	Blood / SST		AST		14 working days
Anti-Thrombin 3	Blood / Sodium Citrate		AT3	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks Can be done urgently by special arrangement
Caeruloplasmin	Blood / Plain (no gel)		CAER		14 working days
C1 Inhibitor	Blood / Plain (no gel)	C1 Esterase	C1IN		14 working days

Copper	Blood / Plain (no gel)	Serum copper	CU		14 working days
Cyclosporin	Blood / EDTA		CYCR		7 working days
ENA	Blood / Plain (no gel)				14 working days
Factor 2	Blood / Sodium Citrate		F2	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks
Factor 7	Blood / Sodium Citrate		F7	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks
Factor 10	Blood / Sodium Citrate		F10	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks
Factor 11	Blood / Sodium Citrate		F11	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks
Factor 12	Blood / Sodium Citrate		F12	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks

Factor 5 Leiden	Blood / Sodium Citrate		F5L	Discuss with Haematology Consultant before taking.	3 weeks
Faecal Calprotectin	Faeces		FCAL		14 days
Free T3	Blood / SST	Free Tri-Iodothyromine	FT3		3 weeks
Growth Hormone	Blood / Plain (no gel)		GHB		14 working days
Immunoglobulin E / RAST	Blood / Plain (no gel)	IGE	IGE / RAST	State suspected allergens	14 days
IGF-1	Blood / Plain (no gel)		IGF1		14 days
Lead	Blood / EDTA		PB		14 working days
Phenobarbitone	Blood / Plain (no gel)		PHB	Peak not critical, trough pre dose.	7 working days
Platelet Aggregation Test	Blood / Sodium Citrate		PAGG	Special Request Only. Contact laboratory. Patient will need to attend RBH.	24 hours
Platelet Function Test	Blood / Sodium Citrate	PFA 100	PFA100	Special request only, contact laboratory	24 hours
Protein C level	Blood / Sodium Citrate			Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Must be filled to within +/-10% of the fill line	6 weeks
Prothrombin Gene Mutation	Blood / Sodium Citrate		PT202	Discuss with haematology consultant before taking.	3 weeks
Protein S (free) level	Blood / Sodium Citrate		PRSF	Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH.	6 weeks

				Must be filled to within +/-10% of the fill line	
Liver Autoimmune Profile	Blood / Plain (no gel)	Autoimmune Profile	AIP		14 working days
Thrombophilia Profile	Blood / Sodium Citrate x4		THR V	Inc.: AT3, PRC, PRSF, APCR Must be frozen within 4 hours of sampling. Patient may need to be bled at DCH. Requires 4 full tubes. Requires Haem consultant authorization for testing	6 weeks
TTAB	Blood / SST	Anti-tissue transglutaminase	TTAB		21 working days
Von Willibrand Disease Screen	Blood / Sodium Citrate x3		VWDS	Includes: RICO, VWFA & F8. Needs to be frozen within 4 hours of sampling. Patient may need to be bled at DCH.	5 weeks

For tests not included in this list please contact the department on 01305 254331

General Information for Users

Location of the Laboratory

The Pathology Department is located on the 3rd floor North Wing at Dorset County Hospital site.

Types of clinical services offered

All above investigations and services are either offered in-house at the Dorset County Hospital site or are sent out to referral laboratories.

For any investigations which are not listed above or to access further information on sendaway tests, please contact the laboratory on **01305 254331**

Opening hours of the laboratory

Pathology Specimen Reception is open 09:00 - 21:00 7 days a week

Blood Sciences (Biochemistry, Haematology and Hospital Transfusion)

The Blood Sciences Laboratory is staffed 24hr each day; however for significant periods (22:00 – 08:30 Mon - Fri and 17:30 – 09:00 Sat + Sun + BH) there is minimal staffing within the department. During these periods **only emergency/urgent work is processed** across Chemistry, Haematology and Blood Transfusion- Please be aware that **non-urgent tests will not be analysed during these periods.**

Note: Blood Transfusion handles routine requests Monday - Friday 09:00 - 17:00; **Outside these hours only emergency requests are processed.**

Consent

Consent for the requested examinations, including any appropriate follow up tests, is regarded as having been granted by the patient by permitting the samples to be taken. Implicit in this is the consent to disclose relevant clinical information and family history to other healthcare professionals when testing is performed by a referral laboratory.

Personal Information Protection

It is part of all DCHFT employment contracts that individuals will comply with the NHS Confidentiality: Code of Practice. The laboratory will appropriately protect patient information at all times.

Sample transportation – outside of DCHFT

For samples being transported from locations outside of the DCHFT site (e.g. GPs, community hospitals) the following will apply as per PAN PATH-CONT DOC 0055

PACKAGING INSTRUCTION PI650 (applies to UN3373)

1. The packaging shall be of good quality, strong enough to withstand the shocks and loadings normally encountered during carriage, including trans-shipment between vehicles. Packagings shall be constructed and closed to prevent any loss of contents that might be caused under normal conditions of carriage by vibration or by changes in temperature, humidity or pressure.
2. The packaging shall consist of three components:
 - (a) a primary receptacle; e.g. specimen pot or tube
 - (b) a secondary packaging; e.g. specimen bag, and
 - (c) an outer packaging e.g. transit box
3. Primary receptacles shall be packed in secondary packagings in such a way that, under normal conditions of transport, they cannot break, be punctured or leak their contents into the secondary packaging. Secondary packagings shall be secured in outer packagings with suitable cushioning material. Any leakage of the contents shall not compromise the integrity of the cushioning material or of the outer packaging.
4. For transport, the UN 3373 mark shall be displayed on the external surface of the outer packaging and shall be clearly visible and legible. The letters and numbers shall be at least 6 mm high.

Samples which are unable to be transported to the department on the same day as collection may not be suitable for analysis on receipt. Analytes that have specific requirements are highlighted in the sample information. Please phone the lab for guidance 01305 254331.

Sample Transportation – within DCHFT

Generally samples are sent to the department via the pneumatic tube system (POD) for urgent samples, or via the phlebotomist ward rounds.

All Pathology specimens must be transported in the plastic specimen transport bags provided together with the relevant request form.

The POD system **MUST not be used** for the transport of:

- ◆ CSF samples
- ◆ Serum samples for cryoglobulins
- ◆ 24 hour urine samples
- ◆ Blood units or blood products for transfusion

Comments and Complaints

If there are any issues which require addressing please contact the department and ask to speak to the Head of Department or one of their deputies (01305 254331). Any complaints will be registered via our Non Conformance procedure. Consultants may be contacted via e-mail and the numbers listed in the user guide.

Clinical decision values & Clinical advice

Clinical decisions are taken on results outside normal values and further information if required can be obtained by contacting the laboratory on **01305 254331**

Instructions for completion of the request form

User guide is available for “Ordercoms” (ICE) requesting on DCH website. Manual requesting forms should have all of the information filled where a space is provided for the information. **Note:** A minimum three points of identification on requests is usually required, **including a unique identifier (hospital or NHS number)**, these details must match the details on the accompanying specimens.

Instructions for preparation of the patient

Information on specific tests where patient needs to be prepared before specimen is taken can be obtained by contacting the laboratory on **01305 254331**

Instructions for patient collected samples

Patient collected specimens can be dropped off at Pathology reception which is located on the 3rd floor North Wing at Dorset County Hospital site.

Laboratory acceptance/rejection criteria

Specimens where above criteria are not met will result in the associated specimens being rejected.