Corrected Creatinine Clearance

### URINE, BODY FLUIDS & CSF TEST REQUEST FORM (2021) Address for Non-PEI Residents Required **Provincial Clinical Laboratory Specimen Collected Payment Responsibility** Place Label Here Street: $\square$ WCB $\square$ DVA $\square$ DND $\square$ RCMP Date: YYYY/MMM/DD Self Pay Non- Canadian Prov./State: Time: HH:MM Self Pav Non-Canadian Postal Code/Zip: Patient Phone # Provincial Medicare # exp. date: Medical Record Number (MRN) DOB: YYYY-MMM-DD Sex Relevant Diagnosis and Therapy Ordering Physician/NP Location Copies (Full name required. Fax # required for Out of Province Providers) FIRST & LAST NAME Semen Analysis **Routine Urinalysis** Submit Within 2 Hrs of collection in sterile container, Mon-Fri 0800-1400 ☐ Routine Urinalysis □ Pregnancy Test Urine Post Vasectomy Complete Examination ☐ Microscopic - Must be received within 4 hrs Joint/Synovial Fluid **Toxicology - Urine Drug Screen** □ Crystals Cannabinoids Benzodiazepines Oxycodone **Pleural Fluid** Cocaine Ethanol Methadone (EDDP) □ Cell Count and Differential Lavender tube: **Amphetamines** Opiates (opiate screen does not routinely detect Fentanyl) Red tube: ☐ Glucose □ Albumin □ Protein **Urine Analysis - Quantitative or Qualitative** Red tube (fluid) & Red tube (blood): ☐ Pleural Fluid LDH/Serum LDH Collect first morning urine in a sterile container & deliver promptly to lab. ☐ Pleural Fluid Protein/Serum Protein Some tests require special handling (1). Please see over for details. Pericardial Fluid Protein Sodium Osmolality Lavender tube: ☐ Cell Count and Differential Albumin (ACR) 5HIAA - Screen Potassium Red tube: ☐ Glucose □Albumin ☐ Protein Creatinine Chloride Urea Red tube (fluid) & Red tube (blood): Pericardial Fluid LDH/Serum LDH Calcium Porphyrin Screen (1) ☐ Pericardial Fluid Protein/Serum Protein 24 Hr Urine Analysis - Quantitative **Peritoneal Fluid** Some tests require special preservatives (2) and dietary considerations (3) Lavender tube: Cell Count and Differential Please see over for details and how to obtain containers. Red tube: □ Glucose ☐ Albumin □ Protein □ LDH Total Volume: mL Red tube (fluid) & Red tube (blood): Protein Sodium Phosphate (2) ☐ Serum Ascites Albumin Gradient (SAAG) Creatinine Potassium Urea Peritoneal Dialysate Fluid (PDF) Magnesium (2) Calcium (2) Chloride Lavender tube: PDF Cell Count and Differential Citrate (2) Cortisol Albumin (ACR) CSF - QEH: 0730-1600hrs, call Hematology Lab (2332) with request. Oxalate (2&3) Urate Metanephrine (2&3) Afterhours/holidays, call switchboard to page each lab, stating "Code CSF". PCH: All hours, call PCH Lab (4285) with request. 5HIAA Quantitative (2&3) For malignant cell examination please use Cytology Request Form. Porphyrin Quantitative (2) Porphobilinogen Quantitative (2)

## Microbiology Creatinine Clearance Serum Creatinine (Yellow SST tube) must be Antibiotics given: submitted within 24hrs of urine collection Culture and Gram Stain

Height and weight are required

Meningitis/Encephalitis Panel Height: Weight: **Stool** Other: Fecal Fat Requires special handling, please see over for details (4) Hematology Stainable Fat Fecal Occult Blood (FIT) Calprotectin **CSF Cell Count Panel** Miscellaneous Chemistry Stone analysis - Calculi Glucose Protein Specify Source: **Sweat Chloride** Other: Appointment required, call QEH Lab 894-2300 **Immunology Metabolic Investigations** Please use IWK Request for Metabolic Investigation requisition

2 ml (CSF) & Red tube (blood):

Additional Requests (Please Contact Lab for Special Instructions and Availability)

101038.0009

□ Oligoclonal Banding

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RINE/BF

URINE/BF REQ

URINE/BF REQ

URINE/BF REQ

### **Queen Elizabeth Hospital**

Specimen Collection: 902-894-2138 Main lab: 902-894-2300

## Fax: 902-894-2183 **Souris Hospital**

Specimen Collection: 902-687-7150 Main lab: 902-687-7150

Fax: 902-687-7174

### **Prince County Hospital**

Specimen Collection: 902-438-4280 Main lab: 902-438-4280

Fax: 902-438-4281

### Kings County Memorial Hospital Western Hospital

Specimen Collection: 902-838-0757 Main lab: 902-838-0757 Fax: 902-838-0746

### Community Hospital

Specimen Collection: Toll free 1-833-565-1380 or 902-853-3163

Main lab: 902-853-8867 Fax: 902-859-3913

Specimen Collection: Toll free 1-833-565-1380 or 902-853-3163

Main lab: 902-853-3136 Fax: 902-853-0245

### PATIENT INSTRUCTIONS for 24 HOUR URINE COLLECTION

CAUTION: The collection jug may contain a preservative in the form of a liquid that may burn your skin. Do not remove the preservative from the bottle.

KEEP OUT OF THE REACH OF CHILDREN. If liquid is splashed or spilled, wash spill immediately with water.

- a. At the hour you choose to start the collection period, urinate into the toilet and flush as usual. Write this time and date on the collection jug label - this is the START TIME.
- b. The next time you need to urinate, pee into a clean, dry plastic container. Pour this urine into the collection jug, being careful not to spill or splash the sample.
- c. Continue collecting every urination into this collection jug for a 24 hour period. Store the collection jug in the fridge during this time.
- d. Collect the last urine sample exactly 24 hours after your start time. Try to collect a urine sample at this time even if you do not feel the urge to urinate. Write this time and date on the collection jug label - this is the END TIME.
- e. On the collection jug label AND requisition, clearly write your FULL NAME (as it appears on your health card) and Provincial Health Number.
- f. Promptly bring the collection jug AND requisition to the laboratory.

## (1) PORPHYRIN SCREEN COLLECTION & HANDLING INSTRUCTIONS

- Patient must collect sample at laboratory.
- Container must be wrapped in foil to protect from light.
- 0.5g of sodium carbonate is to be added within 30 minutes of collection.

# (2) 24 HOUR URINE COLLECTION & HANDLING INSTRUCTIONS

- Calcium, Citrate, Oxalate, Phosphate, Magnesium, 5H1AA Quantitative, and Metanephrine: Require a preservative (25 ml of 6N HCI)
- Porphyrin Quantitative: Requires 5g of sodium carbonate and must be protected from light.
- Porphobilinogen Quantitative: Does not require a preservative but must be protected from light.
- For tests not listed, please call the lab for availability and any special instructions.

All 24 hour urine containers are obtained from the QEH Lab (902-894-2300) and PCH Lab (902-438-4280)

# (3) SPECIAL DIETARY CONSIDERATIONS

- 5H1AA Quantitative: Avoid avocados, bananas, tomatoes, plums, eggplant, hickory nuts, pineapple and mollusks for 2 days prior to and during collection. Patient should be off all drugs 3 days prior to collection, if possible - please consult your physician.
- Metanephrine: Restrict caffeine, nicotine, and alcohol 24 hours prior to collection. Discontinue Methyldopa (Aldomet) at least 5 days prior to collection.
- Oxalate: Abstain from taking ascorbic acid (vitamin C) at least 24 hours prior to and during collection.

# (4) FECAL FAT COLLECTION AND HANDLING INSTRUCTIONS

- Requests for fecal fast testing will typically only be honored when ordered by surgeons, GI specialists or equivalent.
- A dietician consult prior to starting the process is required. They will advise on proper diet, how to keep a dietary log, how to collect the sample and supply the appropriate container. Extra containers can be obtained from the lab at the QEH (902-894-2300) or PCH (902-438-4280)
- Only 72 hour samples will be accepted.
- Record the start and stop date & time on the container and collect 72 hours worth of stool.
- Recommended diet: 50-100 grams of fat per day for 4 days prior to and during the collection.
- Do not take castor oil, mineral oil, or other oily laxatives prior to specimen collection.
- Do not use rectal suppositories containing oil or lipid for 2 days prior to and during the collection.