

# LABORATORY SERVICE GUIDE

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## **CHAPTER 1**

INTRODUCTION

#### **INTRODUCTION**

#### 1. CORPORATE PROFILE



Sunway Medical Centre Velocity's Laboratory Department has been an integral component of the hospital's diagnostic and clinical services since its establishment in September 2019. Offering a comprehensive range of routine and specialised laboratory tests, the laboratory plays a crucial role in supporting our medical practitioners with accurate diagnostic information, enabling timely and effective patient care. All laboratory testing is conducted using advanced instrumentation and technology, operated by competent and qualified laboratory personnel.

Located on Level 1, Tower B, the laboratory supports a broad spectrum of services including inpatient and outpatient diagnostics, health screenings, phlebotomy services and specialist consultations. Through the adoption of modern automation systems and active participation in quality assurance programs, the laboratory upholds a commitment to high standards of diagnostic excellence.

#### 2. VISION, MISSION AND CORPORATE VALUES

VISION

To be the top multi-disciplinary hospital, major "spoke" for SMC and established as a regional-hub within KL region

MISSION

Service with a **SMILE** 

Satisfactory return to stakeholders

Modern, comprehensive & safe facility and environment

Inspired, engaged and driven team

Leading-edge clinical practices and technologies

**Exceed customer' expectation** 

# CORPORATE VALUES

#### **COMPASSION**

We are always sensitive to our patients' needs

#### **HUMILITY**

We believe in being humble, polite and respectful

#### **EXCELLENCE**

We strive for excellence and take pride in all that we do

#### **RESPECT**

We respect every individual and are always professional in our conduct and behaviour

#### **INTEGRITY**

We believe in doing the right thing at all times

#### 3. LOCATION, CONTACT NUMBERS AND OPERATION HOURS

#### **LOCATION**

Level 1, Tower B
Sunway Medical Centre Velocity
Pusat Perubatan Sunway Velocity
Lingkaran SV, Sunway Velocity
55100 Kuala Lumpur

CONTACT NUMBERS		
General Inquiries	Ext. 9291	
Core Laboratory Services	Ext. 8754, 8755	
Cytopathology Services	Ext. 8753	
Microbiology Services	Ext. 8750	
Laboratory Manager	Ext. 9290	

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smcv\_lab@sunway.com.my

OPERATION HOURS			
Core Laboratory Services	Everyday	24 hours	
Satellite Laboratory	Weekday	8.30 am - 5.00 pm	
Services	Saturday	8.30 am - 1.00 pm	
Microbiology Services	Weekday	7.30 am - 8.30 pm	
microsiology controcc	Weekend & Public Holiday	8.30 am - 1.00 pm	
Cytopathology Services	Weekday	8.00 am - 6.00 pm	
Cytopathology Services	Weekend & Public Holiday	8.30am - 1.00pm	

#### 4. LABORATORY SERVICES

The laboratory department provides the following services:

SERVICE	SCOPE OF SERVICE
Chemical Pathology	Provide both routine and specialized chemistry testing such as lipid, liver, renal function, tumour and cardiac markers, metabolic and hormones evaluations. We also provide testing for urine and other bodily fluids.
Haematology and Transfusion Services	Tests encompass full blood count, blood film, bone marrow & trephine biopsy, coagulation, blood grouping, antibody screening and transfusion of a wide range of blood and blood products.
Medical Microbiology and Serology	Provide testing services including culture and sensitivity on clinical specimens, as well as rapid tests for dengue serology, Influenza A&B, and Rotavirus. Additionally, we conduct serological and virology testing for infectious diseases.
Molecular Diagnostics	Provide rapid molecular Polymerase Chain Reaction (PCR) testing such as COVID-19, meningitis panel, respiratory panel, etc., which allows accurate results within a quick turn-around time.
Cytopathology	Provide comprehensive cytopathology services, which include gynaecology, non-gynaecology and fine needle aspirate cytology.

#### 5. ADVISORY SERVICES

The ordering medical practitioner may request clinical advice and interpretation of results from the pathologist in the relevant field, particularly in relation to the findings of laboratory tests. The advisory services ensure a comprehensive understanding of the test results and facilitate informed decision-making regarding patient care.



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Laboratory Director cum Consultant
Haematologist
MD(UKM), DrPath(UKM), AM(Mal)



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Consultant Medical Microbiologist

MBBS(IMU), DrPath(UKM), FAMM(Mal)



Associate Professor Dr. Subashini A/P
Chellappah Thambiah

Consultant Chemical Pathologist

MBBS(UWA), MPath(UKM), Fellowship in

Metabolic Medicine (London, UK),

FAMM(Mal)

#### 6. REFERRAL LABORATORY SERVICES

For laboratory tests which are unavailable in-house with reasons of great complexity or esoteric in nature, the laboratory will outsource them to selected referral government or private laboratories with consideration of quality, efficiency of service as well as cost-effectiveness.

#### 7. DECENTRALISED PHLEBOTOMY

SMCV laboratory provides phlebotomy services for both inpatients and outpatients, with the operational hours outlined below. For STAT/ time-sensitive test orders outside operation hours, the specimen shall be collected and dispatched to the laboratory by the ward nurses.

#### Inpatient

Phlebotomy sites	Operation Hours	
5A		
8A	Monday to Friday	6.30am - 8.00am
8B		2.00pm - 3.00pm
9A	Saturday	6.30am - 8.00am
9B		

#### **Outpatient Clinic**

Phlebotomy sites	Operation Hours	
Level 2, Health Screening Centre, Tower A	Monday to Saturday	8.00am - 1.00pm
Level 3, Outpatient Department, Tower A	Monday to Saturday	8.00am - 1.00pm
Level 2, Outpatient Department, Tower B	Monday to Saturday	8.00am - 1.00pm
Level 3, Outpatient Department, Tower B	Monday to Friday Saturday	8.30am - 5.00pm 8.30am - 1.00pm
Level 7, Outpatient Department, Tower B	Monday to Saturday	8.00am - 1.00pm

#### 8. LABORATORY CONSUMABLE SUPPLIES

SMCV laboratory is responsible for supplying all consumables required for specimen collection. All consumables must be requested and collected according to the schedule outlined below. Any delays in the collection of laboratory items will not be accommodated, and items prepared for collection will be returned to the lab store on the next working day.

Urgent requests for laboratory consumables will only be accepted for rare items, such as MRSA PCR swabs and Monkeypox PCR swabs. For urgent requests, please contact the laboratory for preparation. All consumables should be utilized before their expiry date, and any expired consumables must be informed and returned to the laboratory for exchange with non-expired consumables. For the routine laboratory items requisition and collection schedule, please refer to the table below:

#### **Laboratory Consumable Requisition and Collection Schedule**

Requisition Form Submission Day	Laboratory Consumables  Collection Day  (2.00pm – 5.00pm)	<b>Location</b> Ward 8A & 8B
Monday	Tuesday	Ward 9A & 9B
Worlday	Tuesday	Ward 10A & 10B
		Radiology
		Operating Theatre (OT)
	Wednesday	Intensive Care Unit (ICU) /
Tuesday		High Dependency Unit (HDU)
lucoddy		Nursery/
		Neonatal Intensive Care Unit (NICU)
		Endoscopy / Day Ward
	Thursday	Fertility Centre
Wednesday		Delivery Suite
		Ward 5A
		Ward 4A
	Friday	Outpatient Department (OPD)
Thursday		Health Screening Centre
inuisuay		Dialysis
		Accident and Emergency (A&E)

#### 9. SUGESSTION AND FEEDBACK

In order to effectively meet the needs of our users, we invite inquiries, comments, and feedback regarding our services. We welcome any suggestions for improvement. Please use the Quick Response (QR) code below to share your feedback on our laboratory services. Your input is highly valued and plays a crucial role in enhancing the quality of our services.





#### Online customer feedback link:

https://forms.office.com/Pages/ResponsePage.aspx?id=lmAleHHUoUqrVhaFWj0zRFbutaAlhitKikYwJVKrd\_RUM1VDWjJNSzNGR0xGNURORzQxOVIFTkpZUy4u

## **CHAPTER 2**

LABORATORY TEST
REQUISITIONS

#### LABORATORY TEST REQUISITIONS

#### 1. TEST REQUISITION

All laboratory tests must be requested through the Hospital Information System (HIS) or via written requests using physical laboratory test request forms if necessary, completed by authorised medical practitioners. Nurses are allowed to order the laboratory tests on behalf of the ordering medical practitioner (except for blood transfusion tests) after receiving the medical practitioner's instruction. Later, the medical practitioner is required to authorise the test order in the HIS. Verbal laboratory requests will not be entertained.

Each examination request accepted by the laboratory constitutes an agreement. This agreement encompasses the provision of medical laboratory services, including processing the request, issuing laboratory reports, and offering clinical or technical advice when necessary.

Patient information that is captured upon HIS requisition or test authorisation includes:

- a) Patient's full name
- b) Medical registration number (MRN)
- c) Location
- d) Room number
- e) Name of authorised requesting medical practitioner
- f) The test(s) to be performed
- g) The date and time of the test(s) requisition

#### 2. REQUEST FORM

Test requests must be submitted through the HIS and accompanied by a written laboratory request form for the following tests:

- a) Cytopathology tests
- b) Histopathology tests
- c) Urea Breath Test
- d) Tests outsourced to referral laboratories

Written laboratory request forms are only accepted without HIS entry during code white situations.

#### 2.1 Cytopathology and Histopathology Tests

All cytopathology and histopathology test request forms shall be filled up by the ordering medical practitioner. The request form must be packed in the outer pocket of a biohazard bag with the specimen packed in the inner pocket of the biohazard bag. The information stated below must be provided in the test request form by the ordering medical practitioner:

- a) Patient identification (Name, Identity Card number (IC No.), MRN, Date of Birth (DOB), Gender)
- b) Clinical history/ diagnosis related to specimen
- c) Name and signature of ordering medical practitioner
- d) Stamp of ordering medical practitioner/ clinic/ department in-charge
- e) Type and/or site of specimen
- f) Date and time of specimen collection
- g) Laboratory test(s) to be performed

#### 2.2 Written Request Forms During Code White

If the HIS is offline (Code White), test requests shall be made manually. A written test request form is required during Code White. In the usage of request forms during the activation of Code White, each request form should come in a set of three copies.

- a) The white copy is for the laboratory
- b) The pink copy is for manual billing/ records
- c) The blue copy is for the clinical site/in-patient folder (e.g. ward, clinic, day-care, OT, etc.)

All laboratory test requests must be made using the appropriate physical laboratory test request forms, with the medical practitioner's signature, name and stamp on the forms. The list of laboratory request forms is as follows:

- a) SMCV-AH-LAB-FORM001 Consent for blood products administration
- b) SMCV-AH-LAB-FORM002 HIV Consent Form
- c) SMCV-AH-LAB-FORM003 General Request Form
- d) SMCV-AH-LAB-FORM004 Microbiology Request Form
- e) SMCV-AH-LAB-FORM005 Profile Request Form
- f) SMCV-AH-LAB-FORM006 STAT Request Form
- g) SMCV-AH-LAB-FORM007 Transfusion Medicine Request Form
- h) SMCV-AH-LAB-FORM010 COVID-19 Test Results Release Authorisation
- i) SMCV-AH-LAB-FORM013 Transfusion Reaction Investigation Request Form
- j) SMCV-AH-LAB-FORM014 13C Urea Breath Test Request Form

#### 2.3 Test Outsourced to Referral Laboratories

If the test is performed at a referral laboratory, test requests must be made using individual referral laboratory request forms. The test requested should be clearly and correctly ticked in the appropriate boxes on the appropriate form. For tests that are not listed on the forms, the full name of the test needs to be handwritten on the "other" column of the appropriate form.

#### 3. URGENT TEST

All urgent test requests shall be ordered by ticking the 'STAT' checkbox in the HIS when performing test ordering, which makes the STAT order appear in red in both the HIS and Laboratory Information System (LIS). These specimens are to be accorded the highest priority for receiving, processing, analysis and verification by laboratory personnel. Clinical staff stationed at the clinical site will need to contact the laboratory's extension numbers 9291/8754/8755 to notify the laboratory personnel of the urgency of the specimen.

If the STAT specimen is transported by hand (usually for precious and irretrievable specimens), the transporter must notify the laboratory about the urgency of testing for the specimen being delivered.

#### 4. ADD-ON TEST

The addition of a test to an existing specimen depends on its availability, adequacy, stability, and nature. Specimen stability is a key factor in determining the acceptability of add-on test requests, as outlined in Appendix 1 – In-house Test Stability.

The process of incorporating an additional test for an existing specimen starts with:

- a) The requesting medical practitioner submitting a formal request through the HIS. Timely communication of all add-on test requests to the laboratory department via a phone call is imperative.
- b) Upon receipt of the request, the Medical Laboratory Scientist (MLS) verifies the availability and suitability of the specimen for the add-on test. In instances where clarification is warranted, the MLS engages in consultation with the requesting medical practitioner to validate the necessity and suitability of the additional test.
- Upon confirmation, the MLS proceeds with the specimen collection, dispatch, and receipt in HIS.
- d) The specimen is then labelled using the patient's new add-on test barcode sticker and acknowledged in LIS prior to the analysis. The updated information is tracked in the LIS and middleware.

- e) The specimen undergoes processing for the additional test according to standard procedures.
- f) The results of the add-on test are analysed and reported accordingly.

#### 5. ESOTERIC/ SPECIAL/ RARE TESTS

Esoteric, special or rare tests are sent to the referral laboratories of the clinical laboratory's choice unless it has been specified by the medical practitioner and is not available at our dedicated referral laboratories. If esoteric/ special/ rare tests are requested by the medical practitioner:

- a) The MLS should advise the requesting medical practitioners on:
  - i. the price of the test
  - ii. the result's turnaround time
  - iii. specimen types
  - iv. specimen collection requirements
  - v. referral laboratory that performed the test
- b) Specimens are only sent out to referral laboratories upon agreement by the requesting medical practitioner and the patient's consent.
- c) The requesting medical practitioner should order the test as a Miscellaneous test according to the nature of the test in HIS:
  - i. Misc Chemistry
  - ii. Misc Fluid & Excretion
  - iii. Misc Haematology
  - iv. Misc Cytopathology
  - v. Misc Immunology & Serology
  - vi. Misc Histopathology
  - vii. Misc Microbiology
  - viii. Misc Molecular & Genetics
- d) Charges for the test will be raised by laboratory personnel and specimens will be collected accordingly.

#### 6. CONSENT FORM

The requirements for the consent form are:

a) For routine laboratory procedures, such as blood and urine collection, consent is considered implied if the patient voluntarily agrees to submit to the specimen collection procedure.

- b) Informed written consent is obtained for specific tests such as molecular genetic tests involving human Deoxyribonucleic Acid (DNA), HIV tests and blood transfusions.
- c) The ordering medical practitioner is responsible for ensuring that complete written consent is obtained from the patient.
- d) Special procedures, particularly those deemed more invasive or associated with an elevated risk of complications, necessitate a more comprehensive explanation and written consent by the ordering medical practitioner and patient.
- e) All consent forms are uploaded into HIS, for record purposes. All completed inhouse consents (e.g., HIV and blood component transfusion tests) obtained by the ordering medical practitioner will be accessible in the HIS.
- f) For molecular genetic tests involving human DNA, the patient's consent will be included in the test request form, with a digital copy of the consent saved in the laboratory's shared folder.
- g) The hospital has a Patient Chart Review Committee, which reviews patients' electronic folders to ensure all relevant documents, investigations and consent are captured in HIS.
- h) HIV test results will only be verified in the LIS after the MLS has received the completed consent form.
- i) In emergency situations where obtaining consent is impractical, the healthcare worker may proceed with the specimen collection procedures after obtaining approval from the ordering medical practitioner.

### **CHAPTER 3**

## SPECIMEN COLLECTION AND HANDLING

#### **SPECIMENS COLLECTION AND HANDLING**

#### 1. TYPES OF CONTAINERS AND ANTICOAGULANT

The accurate and timely acquisition of valid laboratory test results depends on the proper collection and handling of specimens. Specimens must be obtained using appropriate phlebotomy techniques and placed in the appropriate containers to ensure the integrity of the specimen and the accuracy of test results.

All specimens should be handled in accordance with universal precautions, and treated as potentially hazardous and infectious, to ensure the safety of personnel.

Certain tests require special specimen containers provided by the referral laboratory. Please contact the laboratory to confirm the availability of these containers after the doctor has confirmed to proceed the test, preferably at least three days before the collection procedure.

#### a) Blood collection tubes

Type of Tube	Tube Description	Test (Examples)
The second secon	Blood Culture Bottles  Yellow Cap - Paediatric Green Cap - Aerobic Orange Cap - Anaerobic	Blood Culture
ori & Circle		Chemical Pathology  Endocrinology  General Chemistry  Specific Protein  Tumour markers
Ellent success 0.0	Serum Separator Tube (SST) (Yellow Cap)	<u>Immunology</u> Autoimmune Disease
		Infectious Diseases
		Hepatitis
		HIV
		Syphilis
		Viral Markers

Type of Tube	Tube Description	Test (Examples)
EDTAR  ED	K2 EDTA Tube (Purple Cap)  Left: 2 mL EDTA Tube Right: EDTA Tube for Paediatric  K2 EDTA Tube (6 mL) (Purple Cap) from the mother + K2 EDTA Tube (0.5 mL) (Purple Cap) from the baby  *4-month-old and below only	Chemical Pathology HbA1C  Haematology Full Blood Count ESR  Molecular Testing BCR-ABL HBV DNA HCV DNA HIV Viral Load  Blood Transfusion GXM
EDITAL III	K2 EDTA Tube (6 mL) (Purple Cap)  *13-year-old and above	Blood Transfusion Antibody Screening Antibody Identification GSH GXM

Type of Tube	Tube Description	Test (Examples)
SUBSTREE RELEGGED AND SUBSTREE	Lithium Heparin Tube (Green Cap)	Chemical Pathology  Troponin T  Coagulation  D-Dimer
	PST Tube with Gel (Green Cap) For Paediatric Use Only	Chemical Pathology  Endocrinology  General Chemistry  Specific Protein  Tumour markers  Immunology  Autoimmune Disease  Infectious Diseases  Hepatitis  HIV  Syphilis  Viral Markers
PREMIUM PREMIUM  PREMIUM  PREMIUM  PREMIUM  PREMIUM  PREMIUM  PREMIUM  PREMIUM	3.2% Sodium Citrate Tube  (Blue Cap)  Left: Adult Tube Right: Paediatric Tube  Remarks:  • Must be filled to the clear fill line marked on the tube  • Send to the laboratory immediately after collection	Coagulation  APTT Coagulation Factors Fibrinogen PT & INR

Type of Tube	Tube Description	Test (Examples)
Section 1 section 2.0 ml	Sodium Fluoride Tube (Grey Cap)	<u>Chemical Pathology</u> Glucose (Glucose Tolerance Test)
BO VICE OF THE PARTY OF THE PAR	Clot Activator Tube (Red Cap)	Drug Monitoring Test Posaconazole Voriconazole
AFRECK®  AFREDMAN  NO.001  VENERAL MANAGEMENT  MANAGEM	STRECK Cell Free DNA Tube (Mottled Cap)	Genetic  NIPT (Specific)  Liquid Tumour  (Please call laboratory for request)
The control of the co	Trace Elements Tube (Royal Blue Cap)	Metal Tests (Please call laboratory for request)

Type of Tube	Tube Description	Test (Examples)
UNCUTAINCE ACC ACC ACC ACC ACC ACC ACC ACC ACC A	ACD Tube (Pale Yellow Cap)	Haematology For Pseudo-thrombocytopenia Investigation  (Please call laboratory for request)
AX A granus and a state of the	PAXgene Blood ccfDNA Tube	Genetic  NIPT (Specific)  (Please call laboratory for request)
HXXgene = stood out a tube All to get the stood out the st	PAXgene Blood DNA Tube	Genetic  NIPT (Specific)  (Please call laboratory for request)
To place the state of the state	TEMPUS Blood RNA	Genetic  Liquid Tumour  (Please call laboratory for request)

#### b) Specimen Container

Type of Container	Specimen	Test (Examples)	
Urine Container	Body Fluid Sputum Urine	Urine FEME Culture and Sensitivity for Urine Culture and Sensitivity for Wound/ Pus/ Tissue/ Fluid	
Stool Container	Stool	All tests associated with stool specimen	
Bijou Bottle	Cerebrospinal fluid (CSF)	All tests associated with CSF specimen	
24 Hours Urine Collection Bottle	24 Hours Urine	All 24 Hours Urine Tests (With Specific Preservative)  (Please call laboratory for request)	
Viral Transport Medium	Swab specimen for PCR test	All PCR Tests	

Type of Container	Specimen	Test (Examples)	
Histopot  Available size: 60 mL, 250 mL, 500 mL, 1.0 L, 2.5 L, 5.0 L  > 5.0 L: placed in sharp bin	Histopathology Specimen  All Histopathological Tests		
MFMEDL/ Exp Date Nov 2021 MR CENTER  Michel's Transport Medium	Renal Biopsy	Immunofluorescence Test	
Liquid Base Cytology Vial	Gynaecology Specimen	Liquid Base Cytology	
Glass Slide	Bone Marrow Aspirate Gynaecology Specimen	Bone Marrow Slide Conversional PAP Smear	

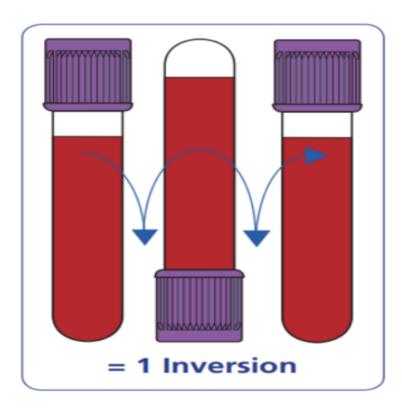
#### c) Microbiology Swab

Amies Char Swab	Fecal Swab & Cary- oal Blair Transport Medium	Panel STI/ Herpes Simplex Virus Swab	E-Swab	Dacron Swab	Nasopharyngeal Swab	Oropharyngeal Swab	Nasopharyngeal Swab + Oropharyngeal Swab
STERRILE WITH STATE OF THE STAT	FecalSwab wa	Thick dry swab coated with Nylon fibres	White: Nasal Swab Pink: Groin/Axilla Swab		Thin dry swab	Transportation inside VTM	Transportation inside VTM
General C8     MRSA Scre     Test		Panel STI Test     Herpes Simplex Virus	GeneXpert     MRSA PCR Test	Monkeypox PCR test (Lesion/ vesicular fluid specimen collection)	Covid-19 Antigen Test Respiratory Virus Antigen Screen (RVAS) FLU/ RSV PCR	Measles PCR	Covid-19 Rapid PCR Test     Full Respiratory Panel Test

#### 2. ORDER OF DRAW FOR BLOOD SPECIMENS

Blood collection tubes must be drawn in a specific order to avoid cross-contamination of additives between tubes. The recommended order of draw for blood collection tubes refer to the order of blood tube collection.

Tubes with additives must be thoroughly mixed. Erroneous test results may be obtained when the blood is not thoroughly mixed with the additive. Mix Tubes by inverting the recommended number of times.



#### **Order of Blood Tube Collection**

Blood Collection Tube		Mix by Inverting
A CONTRACTOR OF THE PROPERTY O	Method of collection  Syringe: Anaerobic > Aerobic  Butterfly: Aerobic > Anaerobic	N/A
	Sodium Citrate (Must Prime with Sodium Citrate tube ONLY)	3 - 4
	Clot Activator	5 - 6
	SST with gel	5 - 8
	Lithium or Sodium Heparin	8 - 10
	PST Tube with gel	8 - 10
	EDTA	5 - 8
= 1	PAXgene Blood DNA	8 - 10
	STRECK Cell Free DNA BCT	8 - 10
	TEMPUS Blood RNA	10 - 15 secs (Shake vigorously)
	Sodium Fluoride	5 - 8
-	ACD	8 - 10
	Trace Element with Clot Activator	8 - 10
	PAXgene Blood ccfDNA	8

#### 3. COLLECTION OF LABORATORY SPECIMENS

Prior to specimen collection, the clinical personnel (doctor, nurse or phlebotomist) shall verify the identity of the patient by asking the patient to state at least three (3) unique identifiers: patient's full name (compulsory), MRN, IC No., passport number or DOB.

The clinical personnel should ensure that the patient fulfils all relevant pre-examination requirements, including but not limited to:

- i. Fasting Status: confirm whether the patient has adhered to the prescribed fasting requirements or guidelines.
- ii. Medication Status: verify the time of the patient's last dose and determine if cessation or adjustments to medication are necessary prior to the examination.

All specimens shall be collected at the appropriate time or according to specified time intervals, for example, glucose tolerance test, 24 hours urine collection and etc.

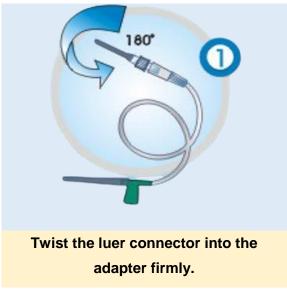
The personnel who collected the blood and/or other specimens is responsible to perform specimen collection in the HIS by clicking on the "collected" checkbox provided. Information such as when was the specimen collected, by whom, type of specimen and number of specimen container collected will be automatically captured in the HIS.

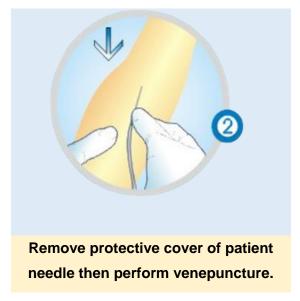
#### a) Location of Specimen Collection

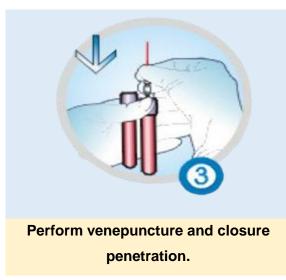
Location	Description
Outpatient clinics	<ul> <li>Outpatients are required to register at the Business Office (BOFF) registration counters at the respective Outpatient Departments.</li> <li>Once the tests are ordered by the specialist consultants or nurses, the test requisitions are captured in HIS.</li> <li>Clinic assistants or nurses will then guide the patients to the decentralised venesection rooms to deliver their patient journey slips for blood collection.</li> <li>Blood collection is carried out by a phlebotomist or a trained nurse in these venesection rooms, which are readily equipped with all necessary supplies.</li> </ul>
Ward	<ul> <li>For inpatients, blood specimen can be collected by phlebotomists, medical officers, specialist consultants or trained nurses at the patient's bedside in the ward.</li> <li>During inpatient ward rounds, the phlebotomist is responsible for preparing and transporting all the equipment and supplies necessary for blood specimen collection in the ward.</li> <li>The ward nurse must provide the phlebotomist with an adequate number of patient's stickers for the laboratory tests ordered for the patients in their respective wards.</li> <li>All clinical personnel shall follow the standard infection control and safety protocols during blood collection in the ward, in compliance with any infectious disease notices posted outside the patient's room.</li> </ul>
A&E, ICU, HDU, Nursery, NICU, Endoscopy, Day Care, OT and Haemodialysis Departments	Blood specimens shall be collected by a nurses or medical doctor.
Other specimens	Other specimens such as urine, stool, swabs, etc., are collected by nurses or doctors in appropriate containers provided by the laboratory.

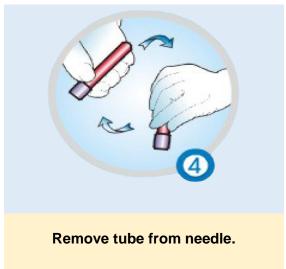
#### b) Specimen Collection Procedure

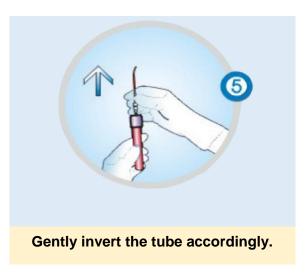
#### **Venepuncture Techniques**

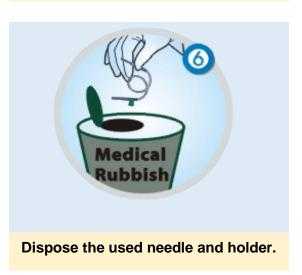




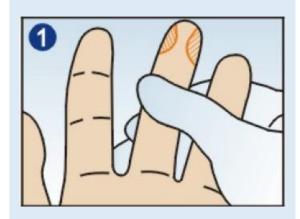








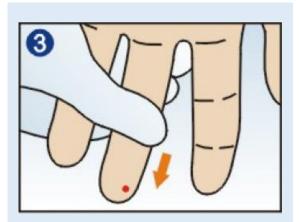
#### **Venepuncture Techniques (Finger Prick)**



Select appropriate puncture site and cleanse site thoroughly with medical alcohol. Puncture skin with proper lancet and gently wipe away the first drop of blood with sterile gauze or cotton ball.



Apply gentle pressure with the thumb and ease intermittently as blood drops, while holding blood collection tube and touching its collector end drops of blood to allow a free flow of blood to bottom of tube. Avoid scraping skin surface to collect blood specimen.



Fill blood tubes with required volume and twist back color-coded cap, then mix by inverting according to the suggested times to assure that sample is mixed with additive thoroughly.



If multi-sample collection is required, carry it out according to the recommended order.

#### Venepuncture Techniques (Heel Prick)



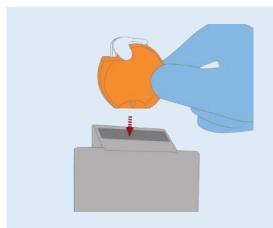
Ensure the heel is clean. Choose the appropriate site for sampling. Gently compress the heel.



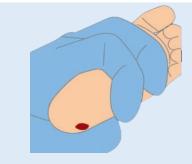
Remove protective cover of patient needle then perform venepuncture.



Gently compress the heel and keep it under tension. Place the device into the heel. Depress the button to activate the device to puncture the skin.



Dispose of the device by in a sharp's disposal container.



While maintaining a grip, hold the heel so that the droplet of blood is allowed to hang downwards Touch the droplet with the capillary tube, or collect the droplets in a blood bottle or on a blood spot screening card.



After each drop is produced, slightly release the heel to allow it to fall. Do not squeeze. Apply pressure to the wound site with sterile gauze.

#### 4. LABELING OF LABORATORY SPECIMEN

The specimen labelling requirements are as follows:

- a) Specimens must be clearly labelled with the patient's sticker or HIS barcode labels containing details such as:
  - i. Patient's full name
  - ii. MRN
  - iii. IC No./ passport number
  - iv. Laboratory Accession Number (Lab No.)
  - v. Date and time of specimen collection
  - vi. Test(s) ordered
- b) The specimen container must be labelled immediately after specimen collection, in the patient's presence, and the labelling should be verified with the patient.
- Specimens that do not fulfil the patient identification criteria above will be rejected.
- d) In the event that stickers or barcodes are not available, the required information may be handwritten. A minimum of two (2) patient identifiers are required to be written on the specimen label:
  - i. Patient's full name (compulsory)
  - ii. MRN
  - iii. IC No./ passport number
- e) For all specimens except for blood, urine and stool, details of specimen type (source and site if applicable) should be labelled on the specimen container clearly using water-proof ink.

#### 5. HANDLING OF LABORATORY SPECIMENS

#### 5.1 Routine Specimens

Specimens must be delivered to the laboratory immediately, preferably within an hour of specimen collection and not beyond the test stability period as outlined in the Appendix 1 – Test stability. Specimens received after the test stability period are unsuitable for testing and will be rejected and/or cancelled. Specimens must be treated as potentially infectious. Universal safety precautions must be adhered.

#### 5.2 Specimens Requiring Special Handling

Specimen that requires special handling shall be notified to the laboratory personnel prior to specimen collection. The specimen that requires special handling shall be collected

during working weekdays' office hours only. Examples of a specimen requiring special handling:

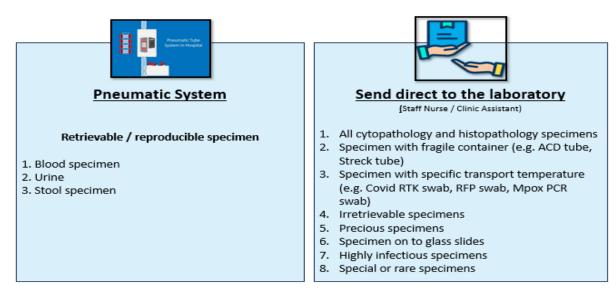
- a) Bone Marrow Aspirates
- b) Cytogenetic Tests
- c) Fine Needle Aspiration Cytology (FNAC)
- d) Frozen Section

#### 6. PACKING & TRANSPORTATION OF LABORATORY SPECIMEN

All specimens shall be packed in individual transparent specimen biohazard bags prior to transportation.

Routine blood, urine, stool and other retrievable or reproducible specimens can be transported via pneumatic tube or by hand. Specimens requiring special care and handling shall be delivered to the laboratory by hand, for example:

- a) All cytopathology and histopathology specimens
- b) Specimen with fragile container (e.g. Acid citrate dextrose (ACD) tube, streck tube, slide)
- c) Specimen with specific transport temperature (e.g. Covid-19 RTK swab, MonkeyPox PCR swab)
- d) Irretrievable specimens
- e) Highly infectious specimens
- f) Special or rare specimens



The specimen must be transported within the time frame appropriate to the nature of the requested specimen and test to be performed:

- a) Within the temperature interval specified.
- b) In the designated tubes and preservatives (e.g. anticoagulants) to ensure specimen integrity.
- c) In a manner that ensures safety for the laboratory personnel, dispatch staff, and public.

Universal safety precautions must be adhered to for all specimens defined as potentially infectious, e.g. Monkeypox PCR specimen, to ensure safety for the laboratory personnel, dispatch staff, and public.

The personnel who will be dispatching the specimen is responsible to key in the action into the HIS 'dispatched' checkbox provided.

In the event of any incident during specimen transportation that may affect the integrity of the specimen and pose a health risk, an e-incident report will be submitted by the laboratory personnel to notify the dispatch in-charge.



### **CHAPTER 4**

# SPECIMEN ACCEPTANCE AND REJECTION

#### SPECIMEN ACCEPTANCE AND REJECTION

The laboratory has established procedures for receipt and inspection of specimens including acceptance and rejection criteria and demonstrates evidence of adherence in order to ensure specimen identification, adequacy, and integrity of the specimen. The specimen inspection process involves verification of the specimen container label information with the request put up by a medical practitioner or nurse (on behalf of the medical practitioner) in HIS. Specimen evaluation also involves checking for the volume and quality of the specimens (including but not limited to factors such as haemolysis, lipemia, and icterus). Refer to SMCV-HOP-AH-LAB-001 Specimen Rejection Criteria for more details.

#### 1. LABORATORY SPECIMEN RECEIVING PROCEDURE

- a) Specimens can be sent to the lab via a pneumatic tube system or by hand, depending on the types and requirements. Upon receipt of the patient specimen and/or test request form (if applicable), the MLS will check the quantity and type of specimen received.
- b) Patient's full name, lab ascension number and MRN are unique identifiers used for specimen identification in the laboratory, in order to accurately identify and track specimens throughout the laboratory processes.
- c) The MLS will perform the following upon receiving the specimen:
  - i. Verify that the patient identification of the specimen received matches the identification of the test request in HIS.
  - ii. Examine the specimen visually to evaluate its acceptability.
  - iii. Review and evaluate the test request for suitability of the type of specimen and correct number of specimen tubes collected for the required test.
  - iv. Determine the suitability, with respect to the test ordered, of the transport conditions, including the following:
    - Transport medium or preservative for the specimen
    - Temperature of specimen upon receipt
    - Length of time between specimen collection and receipt
    - Transport container intact to ensure no leakage or cracks
    - Transportation mode

#### 2. SPECIMENS ACCEPTANCE AND REJECTION CRITERIA

MLS will evaluate the specimen received according to the acceptance and rejection criteria. All the acceptance and rejection criteria by sections are listed in Specimen Acceptance and Rejection Criteria. Specimens that meet the acceptance criteria will be processed accordingly.

#### 2.1 General

Detail	Acceptance Criteria	Rejection Criteria
Specimen Labelling	The specimen container is labelled with patient details.	The specimen container is not labelled with patient details.
	Specimens are labelled with clear, adequate details and correct patient identification.	Specimens labelled improperly, with incorrect patient details or inadequate patient information.
	Patient identification on specimen matches the electronic form in HIS and/or manual request form.	Patient identification on specimens does not match the patient information in the electronic form in HIS and/or manual request form.
Collection and transportation	Specimens are collected in the correct tube or container with appropriate preservatives or anticoagulants.	Specimens collected in wrong tube, wrong tube cap, container, or incorrect preservative or anticoagulant for the test requested.
	Sufficient specimen quantity or volume for testing.	Insufficient specimen quantity or volume.
	Specimen containers are not broken or leaking.	Broken or leaked specimen containers, which are obviously or subsequently proved to be contaminated.
	Specimens are collected in non-expired containers.	Specimens collected in expired or faulty specimen containers.
	Specimens transported at proper temperature.	Specimens transported at incorrect temperature.

Detail	Acceptance Criteria	Rejection Criteria
	Irretrievable specimens are delivered directly to the laboratory by hand.	Irretrievable specimens are delivered to the lab via a pneumatic tube instead of by hand.
	Specimens are transported promptly and within the test stability period.	Delay in specimen transportation to the lab after collection which is beyond the test stability period.
	Appropriate specimens are collected from proper sources and techniques.	Inappropriate or unsuitable specimens collected from proper sources and techniques. (e.g. blood collected from intravenous tubing or heparin locks).
	Add on test order notified and requested within test stability period.	Add on test order notified and requested beyond test stability period.
Consent Form	The consent form required for ordered tests is taken and completed by the ordering medical practitioner	Incomplete consent form.
Specimen for Referred Testing	Appropriate specimens which fulfil patient and specimen requirements.	Inappropriate/ unsuitable specimens which fail to meet patient and/or specimen requirements.

#### 2.2 Clinical Chemistry, Immunoassay, and Serology

Acceptance Criteria		Rejection Criteria	
Specimens free from contaminants.	haemolysis	and	Specimens which are haemolysed, or contain contaminant that results in testing interference or inaccurate results.

#### 2.3 Fluid and Excretion (Urinalysis)

Acceptance Criteria	Rejection Criteria
Urinalysis specimens are received within 2 hours after collection.	Urinalysis specimen received more than 2 hours after collection.
24-hour urine is collected with appropriate preservatives and received within 48 hours.	24-hour urine collections without the appropriate preservative for the test requested or received more than 48 hours.

#### 2.4 <u>Haematology & Transfusion Medicine</u>

Acceptance Criteria	Rejection Criteria
Tube filled to correct level to maintain proper blood-to-anticoagulant ratio.	Inadequate or overfilled specimen e.g. incorrect blood-to-anticoagulant ratio.
Specimen not clotted.	Clotted specimen.
Citrate tubes are filled to the appropriate volume and processed within 4 hours.	Citrate tube specimen volume which is less or more than ± 10% of the stated draw volume (incorrect blood-to-anticoagulant ratio).
Peripheral Blood Film (PBF) add-ons within 4 hours of collection.	Add-on PBF test using EDTA tubes collected more than 4 hours ago.
Blood specimen without recent transfusion (3 months) for Hb Analysis tests.	Blood specimen with recent transfusion (3 months) for Hb Analysis tests.
Specimen for transfusion is separate from other tests.	Sharing of specimens for transfusion with other tests.
6 mL EDTA tube for GSH and GXM for 13-year-old and above.	Incorrect blood collection tube or volume.

#### 2.5 Medical Microbiology

Acceptance Criteria	Rejection Criteria
Specimens are collected in sterile containers using an aseptic technique.	Non-sterile specimens for tests requiring sterile collection techniques.
Swabs for culture are moist and sterile.	Swabs for culture dry and not sterile.
Genital culture swabs are received within 8 hours.	Genital culture swabs are received more than 8 hours after collection.
Stool specimens are received within 24 hours.	Stool specimens are received more than 24 hours after collection.
Clear labelling with specimen type and source on the specimen container.	Specimen type or source not indicated on the specimen container.

#### 2.6 Histopathology

Acceptance Criteria	Rejection Criteria
Specimens are labelled properly and correctly with patient information on Histopathology Request Form and specimen container.	Absence or incorrect patient identification on Histopathology Request Form and specimen container.
Clinical history/ diagnosis, medical practitioner's signature, and name are completed on the request form.	Absence of clinical history/ diagnosis, medical practitioner's signature or name on request form.
The type of specimen indicated on the specimen container matches the information on the request form.	The type of specimen indicated on the specimen container does not match the information on the request form
Correct specimen type and site labelled on both specimen container and request form	Incorrect specimen type and site (e.g., right or left, front or back, etc.) not written on specimen container or request form
Each specimen is in an individual container and not shared with other specimens.	Different specimen types are placed in the same container (e.g., lipoma with hernia sac, polyp with curetting).

Acceptance Criteria	Rejection Criteria
Specimens are properly preserved and fixed in formalin. All Histopathological Examination (HPE) specimens must be fixed with 10% neutral buffered formalin, except frozen and IF specimens.	Specimen not properly preserved with sufficient formalin.
Specimen present in the specimen container.	Absence or insufficient quantity of specimen in the specimen container.

#### 2.7 Cytopathology

Acceptance Criteria	Rejection Criteria
Specimens are labelled properly and correctly with patient information on the Cytopathology Request Form and specimen container.	Absence or incorrect patient identification on Histopathology Request Form and specimen container.
Clinical history/ diagnosis and the medical practitioner's signature and name are included on the request form.	Absence of clinical history/ diagnosis, medical practitioner's signature and name on request form.
Specimen type is clearly written on the form.	Specimen type not written on the form.
Correct specimen type sent for analysis.	Incorrect specimen type sent.
Slides in good condition.	Broken slides.
Slides labelled with full patient name and MRN.	Unlabelled slide (without patient's full name and MRN).
Non-Gynae slides labelled as air dry smear or alcohol-fixed smear.	Non-Gynae slides unlabelled as air dry smear/ alcohol-fixed smear.

#### 3. MANAGEMENT OF REJECTED LABORATORY SPECIMEN

The MLS will inform the ordering medical practitioner, nurse in-charge or clinic assistant on the specimen rejection, including the reason for rejection and the need for recollection. Specimens that fail to meet the acceptance criteria will be kept in the laboratory.

If the ordering medical practitioner requests to proceed the testing using compromised specimen that may impact result interpretation, the MLS will consult the laboratory pathologist from the related test discipline. If the specimen is approved for processing, the MLS will document the issue in the final report in the LIS.

#### 4. HANDLING OF SPECIMENS WITH INCORRECT PATIENT IDENTIFICATION

For specimens with incorrect patient identification, the following action is required:

- a) The MLS will notify the ordering medical practitioner, nurse in-charge or clinic assistance, who collected the specimen.
- b) For retrievable specimens, specimen will be rejected and specimen recollection is required.
- c) For precious or irretrievable specimens, the person who collected the specimen is required to come to the laboratory to:
  - i. Identify and verify the specimen.
  - ii. Correctly label the specimen or the request form (if applicable) in the case of mislabelling.
  - iii. Complete the SMCV-LAB-GE-FORM001 Specimen Rejection Form and sign in acknowledgement.
- d) The MLS will raise an e-incident for rejections related to patient identification error within 24 hours of the incident. All e-incident reports must include a description of the incident and the persons involved.
- e) If the ordering medical practitioner requests to proceed with the testing using a compromised specimen that may impact result interpretation, the MLS must consult the laboratory pathologist of the related test discipline. If the specimen is approved for processing, the MLS will clearly document the issue in the final report in LIS.

#### 5. SPECIMENS ACCEPTANCE EXCEPTIONS

Specimen acceptance exceptions apply to the management of irretrievable or precious specimen rejections. The list of precious or irretrievable specimens as below:

- Amniotic fluid
- Bone Marrow Specimens

- Cerebrospinal Fluid (CSF)
- Cord blood
- Cytopathological Specimen
- Fetal Tissue
- Histopathological Specimen
- Placental Tissue
- Semen Specimens
- Serous fluid (pericardial, peritoneal, pleural etc)
- Specimen from newborn, neonate or paediatric
- Synovial fluid
- Any other specimen that is either difficult or impossible to recollect
- Any other specimen that requires invasive procedures for collection

If an irretrievable specimen or precious specimen is compromised, MLS will proceed with the following actions:

- a) Notify the ordering medical practitioner of the issue with the specimen and confirm whether to proceed with testing.
- b) If the ordering medical practitioner decides to cancel or discontinue the test, the MLS will cancel the test appropriately in HIS.
- c) If the ordering medical practitioner decides to proceed, the MLS will document the decision in LIS and process the test accordingly.
- d) The MLS will inform the person who collected the rejected specimen, and the person must come to the laboratory to complete the SMCV-LAB-GE-FORM001 Specimen Rejection Form.
- e) If the ordering medical practitioner requests to proceed with testing using a compromised specimen that may impact result interpretation, the MLS will consult the laboratory pathologist of the related test discipline. If the specimen is approved for processing, the MLS will document the information in the final report in LIS.

## **CHAPTER 5**

SPECIMEN PREPARATION

#### **Specimen Preparation**

#### General Specimen

#### **Blood Specimen Collection - Venepuncture**

Specimen	Blood	
Container	Blood Collection Tube	
Procedure	Position the patient's arm comfortably with the arm extended.	
	Apply the tourniquet to the patient's arm about 3-4 inches above the	
	venepuncture site.	
	Locate the vein and ask the patient to hold his/ her fist.	
	Clean the venepuncture site in a circular motion with an alcohol swab.	
	Allow it to air dry.	
	Perform venepuncture by inserting the needle, bevel side up, at a 15 -	
	30-degree angle, parallel to the vein.	
	Withdraw the patient's blood into the test tubes according to the blood	
	collection order of draw. Mix by gentle inversion.	
	Once a sufficient blood specimen is collected, remove the last tube and	
	release the tourniquet.	
	Place a dry cotton ball over the venepuncture site and slowly withdraw	
	the needle from the patient's arm.	
	Apply a bandage and continue applying mild pressure. pressure. The	
	patient's arm comfortably with arm extended.	

#### **Microcapillary Blood Sampling**

Specimen	Blood	
Container	Blood Collection Tube	
Procedure	<ul> <li>For paediatric patients, ensure that patients are correctly identified before taking blood by:         <ul> <li>Identifying patient via their wrist or foot band.</li> <li>Asking the parent or legal guardian present to identify the patient using three (3) identifiers (i.e. asking for the baby's full name, date of birth and IC No./ passport number or MRN).</li> </ul> </li> <li>Positioning the patient in a comfortable manner, and immobilize the patient if needed.</li> <li>Massage the selected puncture site (patient's finger or foot) to increase</li> </ul>	
	blood flow.	

•	Clean the puncture site with an alcohol swab in a circular motion. Allow
	it to air dry. Apply Vaseline.
•	Perform a finger-prick or heel-prick by pressing the lancet firmly on the
	finger/ heel.
•	Continue to massage the patient's finger or foot. Lower the part of the
	punctured site to increase blood flow.
•	Withdraw the blood into the capillary tube/ microtainer tube according
	to the blood collection order of draw for skin puncture.
•	Once a sufficient blood specimen is collected, apply a bandage and
	continue applying mild pressure.

#### **Blood Specimen for Glucose Tolerance Test**

Specimen	Blood
Container	Sodium Fluoride Blood Collection Tube
Procedure	Patient Preparation
	The patient must fast for at least 8 - 10 hours before the test.
	The patient should be normally active and not bedridden prior to the test.
	The patient should be free of any infectious or acute illness, including the
	common cold.
	An adequate carbohydrate intake (at least 150 g/day) is required for 3
	days before the test.
	The patient should refrain from smoking or drinking coffee on the morning
	of the test.
	2-Hour Glucose Tolerance Test
	The MLS will obtain a fasting blood specimen in a fluoride tube.
	The patient will be instructed to consume a 75 g glucose drink within 5
	minutes.
	The patient must remain fasting for 2 hours after consuming the glucose
	drink.
	A second blood specimen (in a fluoride tube) will be collected at the 2-
	hour mark.
	The test must be discontinued if the patient vomits during the procedure.
	3-Hour Glucose Tolerance Test
	The MLS will obtain a fasting blood specimen in a fluoride tube.
	The patient will be instructed to consume a 75 g glucose drink within 5
	minutes.
	The MLS will collect urine and blood specimens (in fluoride tubes) at the
	1st and 2nd hours after consumption of the glucose drink.
	The test must be discontinued if the patient vomits during the procedure.

#### **Dried Blood Spot**

Specimen	Blood
Container	Dried Blood Spot Paper
Procedure	Perform heel prick or finger prick for patient.
	Wipe away the first drop and collect subsequent drops of blood.
	Allow one drop to fall onto each circle of the filter paper.
	Collect at least three circles or more, if possible.
	Ensure that the blood soaks completely through the paper.
	Do not hold the filter paper against the puncture site.
	Allow the filter paper to dry thoroughly (at least 60 minutes) before
	enclosing it within an envelope or biohazard bag.
	The specimen should be transported to the laboratory by hand.

#### **Coagulation Specimen**

Specimen	Blood
Container	Sodium Citrate Blood Collection Tube
Procedure	<ul> <li>Collect blood using 3.2% sodium citrate tubes and follow the order of draw.</li> <li>A discard tube (additional sodium citrate tube) must always be used to</li> </ul>
	prime the winged collection set if the sodium citrate tube is the first tube being collected. This ensures that the blood tube fills to the indicated fill line properly. Inadequate filling or overfilling of the tube will affect the ratio and lead to inaccurate results.
	<ul> <li>Fill the blood tube up to the indicated fill line on the tube.</li> <li>Gently invert the tube end over end 3 - 4 times immediately after blood collection. Avoid vigorous shaking to prevent haemolysis.</li> <li>Check three unique identifiers (patient's full name, IC No./ passport</li> </ul>
	<ul> <li>number and MRN) on the sticker and label the specimen tube in front of the patient.</li> <li>Delayed Testing (sent to the referral laboratory or analyser issue): If the specimen is sent to the referral laboratory or testing is delayed due to analyser issues, a double centrifugation is required.</li> </ul>

#### **Bone Marrow**

Specimen	Bone Marrow Aspirate (BMA)
Container	Glass Slide, 60 mL Histopot and specific specimen container according to
	the test ordered
Procedure	An appointment must be made for the bone marrow procedure by ward
	or clinic with the following details:
	Additional tests (if required)
	o Location
	o Patient details
	Time (working hours only)
	The Consultant Haematologist will complete and email the
	Haematology Ancillary Tests Request Form for any ancillary tests, if required.
	During the BMA procedure, MLS will assist the Clinical Haematologist
	in performing the BMA smears and collect the trephine specimen,
	including the trephine imprint.
	If additional tests are required, the Clinical Haematologist will withdraw
	extra BMA to be collected in specific tubes, and ensure the BMA
	specimen is collected in good quality. MLS will inform the Clinical
	Haematologist for specimen recollection if the collected specimen is clotted.
	Slide folder, test tubes and specimen containers will be labelled with
	the correct patient sticker immediately after specimen collection at the
	site where the bone marrow procedure was performed.
	BMA slides will be labelled with pencil at the frosted end with the
	patient's name, bone marrow lab number, MRN and date of collection,
	at the bedside or near the patient.
	After the procedure, MLS will provide the referral request form to the
	Clinical Haematologist to fill out, including signature of
	acknowledgement and test orders.
	MLS will proceed with all the tests as well as the corresponding charges
	accordingly.

### Fluid & Excretion Specimen

#### <u>Urine</u>

Specimen	Urine
Container	Sterile Container
Procedure	<ul> <li>Instruct the patient to wash hands with soap and water before collecting the urine specimen.</li> <li>For male patients, cleanse the glands penis with soapy water and rinse with clean water.</li> <li>For female patients, cleanse the area around the urethral opening with</li> </ul>
	<ul> <li>clean water. Dry the area and collect the urine with the labia held apart.</li> <li>Discard the first portion of the urine stream and collect the midstream urine in the sterile container.</li> <li>Transport the specimen to the laboratory within 2 hours of collection.</li> <li>If this is not possible, keep the specimen refrigerated at 4 - 8°C to reduce the risk of contaminating organisms' overgrowth.</li> </ul>

#### 24 Hours Urine

Specimen	24 Hours Urine
Container	24-hour Urine Container
	*Inform laboratory personnel at least 15 minutes before collection of the 24-
	hour urine container.
	Refer to Appendix 2 for Preservative for 24-Hour Urine Collection.
Procedure	On the day of collection, record the start time on the bottle label.
	After starting, empty the bladder and discard the first urine.
	Collect all subsequent urine specimens in a clean container (e.g. plastic
	cup), and pour inside the container into the 24-hour urine bottle.
	Never collect urine using the 24-hour urine bottle directly as the
	corrosive preservatives inside the bottle may harm the patient.
	Record the time of the last 24-hour urine collection.
	The specimen should be transported to the laboratory by hand as soon
	as possible.

#### <u>CSF</u>

Specimen	CSF
Container	Bijou Bottle
Procedure	Collect 1 - 3 mL directly in a sterile screw-capped container each (or Cryo vial).

The specimen should be transported to the laboratory by har	nd as soon
as possible after collection.	
• For bacteriology test: transport at ambient temperatur	e without
transport media and never refrigerate.	
• For virology test: no transport medium is required,	preferably
transported at 4 - 8°C.	

#### <u>Fluid</u>

Specimen	Fluid specimen
	(Pleural, Effusion, Synovial, Amniotic, Bronchoalveolar lavage, Semen and
	etc)
Container	Sterile Container Except for Amniotic Fluid (Conical Tube)
Procedure	Collect the fluid specimen according to the Clinical Practice Guidelines
	(CPG).
	Transfer 2 - 5 mL specimens into a sterile screw-capped container.
	The specimen should be transported to the laboratory by hand.

### **Microbiology Specimen**

#### **Product of Conception (POC)**

Specimen	POC
Container	Sterile Container
Procedure	POC should be collected in a 50 mL sterile tube with normal saline.
	Transport the specimen to the laboratory as soon as possible by hand.

#### Nasogastric Aspirate

Specimen	Nasogastric Aspirate
Container	Sterile Container
Procedure	The patient should be fasting for ≥ 4 hours before the procedure, and
	the specimen should be collected in the early morning.
	Collect 5 - 10 mL and transfer it into a sterile container.
	Transport the specimen to the laboratory by hand.

#### <u>Faeces</u>

Specimen	Faeces
Container	Stool Container (Culture and Sensitivity (C&S), Rapid tests, Full Examination
	of the Microscopic Examination (FEME), Clostridium difficile PCR)
	Cary-Blair Swab (Gastrointestinal Panel) – For Laboratory Use Only
Procedure	For microbiological diagnosis, the specimen is advisable to be collected
	soon after onset of diarrhoea and preferably before the initiation of
	antibiotic therapy.
	Freshly passed stool should be collected in approximately 5 mL if liquid
	or 5 g if solid (pea-size), in a stool container.
	For culture test, stool specimens are preferably transported at 4 - 8°C
	within 1-2 hours.
	Transport the specimen to the laboratory by hand.

#### **General Swab Collection Procedure**

Specimen	General Swab	
Container	Amies Charcoal Swab (for swab/ wound/ pus/ tissue/ fluid)	
Procedure	<ul> <li>Open the swab package by grasping the plastic at the opposite end from the soft tip.</li> <li>Keep the soft tip enclosed in the package to avoid contamination before specimen collection.</li> <li>Carefully remove the swab tube from its packaging without touching the soft tip.</li> <li>Remove the cap from the swab collection tube and place the soft end of the collection swab into the tube.</li> <li>Prevent the cap from touching any material.</li> <li>Bend the swab against the edge of the transport media to snap off the end at the marked line on the handle.</li> <li>Secure the tube cap, ensuring the snapped end of the swab fits into the centre of the cap.</li> </ul>	
	Transport the specimen to the laboratory by hand.	

#### Panel Sexually Transmitted Infection (STI)

Specimen	High Vaginal Swab/ Urethra Swab/ Urine		
Container	Thick Dry Swab Coated with Nylon Fibres in Viral Transport Medium (VTM)		
	(Swab)		
	Sterile Container (Urine)		
Procedure	Ensure the procedure is performed in a sterile environment.		

Using a sterile swab, gently insert it into the appropriate collection site
(vaginal or urethral).
Rotate the swab gently to collect the specimen, then carefully remove
it.
<ul> <li>Immediately place the swab into a screw-cap tube containing VTM.</li> </ul>
• For urine specimens, collect midstream urine directly into a sterile
container.
• Label the specimen tube/container clearly with the patient's details
and the specimen type.

#### Rectal Swab

Specimen	Rectal swab	
Container	Amies Charcoal Swab	
Procedure	Moisten a swab with sterile saline.	
	Gently insert the swab through the rectal sphincter to a depth of 2 - 3	
	cm.	
	Rotate the swab 360 degrees for at least two rounds.	
	Gently remove the swab from the anus while turning the swab.	
	Ensure that the cotton tip is visibly stained with faeces.	
	For culture tests, the specimens should preferably transport at 4 - 8°C	
	within 1 - 2 hours.	

#### **Genital Swab**

Specimen	Genital swab		
Container	Amies Charcoal Swab		
Procedure	High vaginal swabs		
	Roll the swab firmly over the surface of the vaginal vault.		
	Cervical swabs		
	Rotate the swab inside the endocervix.		
	<u>Jrethral swabs</u>		
	The patient should avoid urinating for at least one hour before specimen		
	collection.		
	Contamination with micro-organisms from the vulva or the foreskin		
	should be avoided.		
	Gently pass the swab through the urethral meatus and rotate.		
	For males:		
	If a discharge is not apparent, collect material from about 2 cm inside the		
	urethra or milky exudate at the penis using a swab.		

#### Eye, Conjunctiva and Lid Swab

Specimen	Eye, Conjunctiva and Lid Swab		
Container	Amies Charcoal Swab		
Procedure	<ul> <li>It is preferable that both eyes are swabbed, even if the infection is unilateral.</li> <li>Swabs should be collected prior to the instillation of topical anaesthetics or antibiotics.</li> </ul>		
	<ul> <li>Clean the skin around the eye with a mild antiseptic to prevent contamination. Moisten the swab with sterile saline.</li> <li>Roll the swab in a circular motion over the conjunctiva.</li> <li>Occasionally, specimens collected by an ophthalmologist will be inoculated directly onto culture plates at the bedside.</li> <li>The ophthalmologist will inoculate the plates in a short spiral line.</li> <li>If lid swabs are also collected, these will be inoculated onto the same culture plates next to the conjunctival inoculation.</li> <li>Lid swabs will be inoculated in the shape of "'L" or "R" indicating left or</li> </ul>		
	<ul> <li>right, respectively.</li> <li>These plates should be kept in the incubator at 35 ± 2°C until processed.</li> <li>For bacteriology tests, transport specimens at ambient temperature.</li> <li>For virology tests, transport specimen at 4 - 8°C.</li> <li>Virus isolation requires special transport media. If a delay in transport or processing is anticipated, the specimen should be kept at 4°C.</li> </ul>		

#### **Wound Swab**

Specimen	Wound Swab		
Container	Amies Charcoal Swab		
Procedure	<ul> <li>Cleanse wound area using normal saline or sterile water.</li> <li>Remove and/or debride non-viable tissue to obtain access to the deep compartment of the wound.</li> <li>Apply optimal pressure on the wound to express fluid within the tissue</li> <li>Depress and rotate the swab against around 1 cm² area of viable wound tissue for approximately 5 seconds.</li> <li>Specimens should be kept at room temperature and ideally should</li> </ul>		
	<ul><li>reach the lab within 12 hours.</li><li>Do not refrigerate.</li></ul>		

#### **Throat Swab**

Specimen	Throat Swab			
Container	Amies Charcoal Swab (C&S)			
	Oropharyngeal Swab in VTM (Measles PCR)			
Procedure	Hold the tongue down with a depressor.			
	Use a strong light source to locate areas of inflammation.			
	Swab the posterior pharynx and the tonsillar region of the throat behind			
	the uvula.			
	Rub the area back and forth with a swab.			
	Withdraw the swab without touching the cheeks, teeth or gums and			
	insert it into a container.			

#### **Catheter Tip**

Specimen	Catheter Tip	
Container	Sterile Container	
Procedure	Cleanse the skin around the insertion site with 70% alcohol to reduce	
	contaminating skin flora then allow it to dry.	
	Remove any residual antimicrobial ointment.	
	Remove the catheter aseptically.	
	Clip 2 inches of the distal tip of the catheter directly into a sterile	
	container.	

#### Nasal Swab

Specimen	Nasal Swab			
Container	Amies Charcoal Swab (C&S)			
	E-swab in VTM (MRSA PCR Test)			
Procedure	Hold back the patient's head slightly.			
	Insert the swab straight into the nostril.			
	For adults, insert the swab at least 5 – 6 cm to reach the posterior			
	pharynx.			
	Leave the swab in place for a few seconds, rotate then withdraw slowly.			
	Repeat the same procedure on the other nostril using the same swab.			

#### Abscess / Abscess Swab

Specimen	Abscess / Abscess Swab		
Container	Amies Charcoal Swab (Abscess Swab)		
	Sterile container (Abscess)		
Procedure	Disinfect the skin overlying the abscess with 70% alcohol.		

•	Use a sterile needle and syringe to aspirate the fluid from the abscess
	with appropriate volume.
•	For swab specimens, rotate the swab on the abscess walls firmly
	without contact with intact skin.
•	Transfer the aspirate or swab aseptically into a container.

#### **Axillary Swab**

Specimen	Axillary Swab		
Container	Amies Charcoal Swab (C&S)		
Procedure	Swipe all sides of the swab tip back and forth five times over the skin		
	surface of the axillary.		
	Place the swab in the corresponding container.		

#### Ear Swab

Specimen	Ear swab	
Container	Amies Charcoal Swab	
Procedure	Do not apply any antibiotic drops within 3 hours prior to specimen	
	collection.	
	Swab the external ear canal by using a sterile swab.	
	Place the swab in the corresponding container with or without VTM.	

#### Nasopharyngeal Aspirates (NPA)/ Nasopharyngeal Secretion

Specimen	NPA/ Nasopharyngeal Secretion	
Container	Sterile Container	
Procedure	Insert a small catheter through the nares to the back of the nose.	
	Gently suction while withdrawing the catheter slowly.	
	Collect the aspirate in the container.	
	The specimen should be transported at 2 - 8°C for both bacteriology	
	and virology test.	

#### <u>Groin</u>

Specimen	Groin swab	
Container	Amies Charcoal Swab (C&S)	
	E-swab in VTM (MRSA PCR Test)	
Procedure	Gently wipe all sides of the swab tip over the skin surface of the left	
	groin in a back-and-forth motion at least five times.	
	Focus on the crease where the arm meets the body.	
	Repeat the process on the right groin.	

#### <u>Sputum</u>

Specimen	Sputum
Container	Sterile Container
Procedure	<ul> <li>Instruct the patient to take a deep breath and cough up sputum directly into a wide-mouth sterile container.</li> <li>Collect at least 1 mL of the specimen.</li> <li>Saliva or postnasal discharge must not be collected.</li> <li>For bacteriology test: transport at ambient temperature without transport media and do not refrigerate.</li> <li>For virology test: no transport medium is required, preferably transported at 4 - 8°C for up to 48 hours.</li> </ul>

#### **Cutaneous Specimen**

Specimen	Skin Scrapping / Nail Clipping/ Hair		
Container	Sterile Container		
Procedure	Get cutaneous specimens by scraping skin scales or infected nails into a sterile container.		

#### Vesicle Fluid/ Lesion

Specimen	Vesicle Fluid/ Lesion	
Container	Sterile Container (C&S)	
	Amies Charcoal Swab (C&S)	
	Dacron Swab (Monkeypox PCR)	
Procedure	Examine the body part and choose the largest and most representative	
	vesicle.	
	Clean the skin area around the lesion gently with a normal saline-	
	soaked cotton swab.	
	Rupture the vesicle carefully using hypodermic needle.	
	For vesicle swab, swab the vesicular fluid from the ruptured vesicle	
	quickly or use the swab to squeeze out the vesicular fluid.	
	For lesion swab, rotate the swab on the lesion margin firmly without	
	contact with intact skin.	
	Transfer the aspirate or swab into the container.	

#### Method of Collecting Per-Nasal and Post-Nasal Swabs (For Suspected Pertussis)

Specimen	Per-nasal and Post-nasal Swabs	
Container	Nasopharyngeal Swab/ Dacron Swab with Amies Gel	
	Kindly contact the Microbiology MLS for container preparation.	

Procedure	Seat the patient comfortably, tilt the head back and insert the nasal
110000010	,
	speculum.
	Insert a swab through the speculum parallel to the floor of the nose
	without pointing upwards.
	Alternately, bend the wire and insert it into the throat and move the
	swab upwards into the nasopharyngeal space.
	Rotate the swab on the nasopharyngeal membrane a few times,
	remove it carefully and insert it into a screw-cap tube containing a
	transport medium (Amies Gel).
	Break off the top part of the stick without touching the tube and tighten
	the screw cap firmly.
	Label the specimen tube.

#### Blood Cultures and Bone Marrow Aspirate for Tuberculosis (TB)

Specimen	Blood Culture/ BMA	
Container	Myco F Lytic bottle	
Procedure	<ul> <li>Fill 5 - 10 mL of blood into a Myco F Lytic bottle by using an aseptic technique.</li> <li>Send the specimens to the laboratory as soon as possible or incubate them at 37°C in an incubator if there is a delay in transit.</li> <li>Do not store in the refrigerator.</li> <li>For bone marrow aspirate, aspirate 5 - 10 mL and inoculate it directly into the bottles.</li> <li>Send the specimen to the laboratory as soon as possible.</li> </ul>	

#### **Cytopathology Specimen**

All specimens are to be collected by the requesting medical practitioner except for urine specimen.

#### Gynaecology Cytopathology specimen collection can be categorised into two types:

- 1. Conventional Papanicolaou (PAP) smear: a collection of cervical cells smeared smoothly on a microscopic slide and quickly fixed with cytospray or 95% alcohol.
- SurePath (Liquid-based cytology): a collection of cervical cells using a broom-type device
  or combination brush/plastic spatula with detachable heads is immersed in a vial
  containing preservative fluid.

#### Non-Gynaecological Cytopathology specimen collection

- Non-gynaecological cytopathology specimen including all body secretions and fluids (washing, aspiration, sputum, urine, discharge).
- Specimens should be kept refrigerated at 4 6°C if transport is expected to exceed such a time until reach laboratory for processing.

All specimens are to be collected by the requesting medical practitioner except for urine specimen.

Specimen type	Collection procedure	Storage and transport
Sputum	<ul> <li>The specimen shall be collected early in the morning via deep cough, and produced prior to consumption of food or drink and prior to teeth cleaning.</li> <li>The specimen shall be collected in a sterile container.</li> </ul>	The specimen shall be collected in a sterile container and kept at 4 - 6 °C before reaching the laboratory.
Urinary Tract	<ul> <li>Urine specimens shall be collected at least 10 mL of freshly voided or catheter specimen in a sterile urine container.</li> <li>The best specimen is the morning's second voiding or specimen collected 3 to 4 hours after the patient has last urinated.</li> </ul>	Keep the specimen at 4 - 6°C if transport is expected to exceed 12 hours.
Body Fluid for Cytopathology	<ul> <li>Including pleural or ascitic effusions, peritoneal washings, pericardial effusion, breast cyst fluid, hydrocele fluid, ovarian cyst fluid, etc, collected in a sterile container and sent to the laboratory immediately.</li> <li>The optimum volume of fluid shall be collected is 30 mL.</li> <li>Specimen should be collected in a sterile container and sent to the laboratory immediately.</li> </ul>	Keep the specimen at 4 - 6°C if transport is expected to exceed 12 hours.
Bronchial Brushing	<ul> <li>The specimen shall be obtained via a procedure conducted by a requesting medical practitioner.</li> <li>Minimum 2 slides of alcohol (95%) fixed or spray-fixed smears are required.</li> <li>The remaining material is rinsed into a sterile container or BD vial and sent to the laboratory.</li> </ul>	Keep the specimen at 4 - 6°C if transport is expected to exceed 4 hours.

Specimen type	Collection procedure	Storage and transport
Nipple or Eye	The specimen shall be collected by the requesting	Keep the specimen at
Discharge	medical practitioner.	4 - 6°C if transport is
	Minimum 2 slides of air-dried smear and alcohol	expected to exceed 4
	(95%) fixed required.	hours.
	The remaining material was rinsed into a sterile	
	container or BD vial and sent to the laboratory.	
Cerebrospinal	The specimen shall be obtained via a procedure	Keep the specimen at
Fluid for	conducted by the requesting medical practitioner.	4 - 6°C if transport is
Cytopathology	About 2-3 mL of CSF fluid collected in a sterile	expected to exceed 1
	container and sent fresh to the laboratory	hour.
	immediately.	

#### **Histopathology Specimen**

- Specimen should be taken by a medical practitioner.
- The size of the specimen container should be selected according to the size of the specimen.
- Ensure the specimen is fully immersed in formalin.
- Specimen type (source, position if applicable) must be labelled on the specimen container and must correspond with the specimen type written on the test request form.

Test	Renal Biopsy & Immunofluorescence		
Container	Formalin & Michel's Transport Medium		
Procedure	State Registered Nurse (SRN) must request special container for the procedure prior to the procedure from laboratory.		
	The special container will be provided by the laboratory on the procedure		
	<ul> <li>day.</li> <li>Collect the specimen and transport it to the laboratory immediately.</li> </ul>		

Test	Frozen Section		
Container	Sterile Container		
Procedure	Before procedure		
	The requesting surgeon must make booking with the Cytopathology		
	Section team at least two working days before the procedure.		
	Case details must be provided at the time of the booking.		

The Cytopathology Section team will inform the referral laboratory for				
frozen procedure to book the time slot.				
Confirmed booking slot will be notified to the surgeon and the OT				
personnel via phone call or official Lab WhatsApp group.				
The Cytopathology MLS will prepare all materials required for specimen				
transportation, communicate with the referral laboratory, and arrange				
dispatch of the specimen.				
The surgeon must pre-fill the referral laboratory request form and order				
the test in Origin.				
<u>During procedure</u>				
OT personnel must update the status of the specimen upon collection				
in WhatsApp group from time to time.				
Upon specimen arrival at the laboratory, Cytopathology MLS will check				
for:				
○ Specimen temperature				
○ Patient details				
○ Quantity of specimen				
o Status of specimen (without formalin and saline, gauze is not				
recommended)				
Cytopathology MLS will pack the specimen accordingly and send the				
specimen to the referral laboratory.				
Status of specimen with detailed timeline will be updated by				

Test	Rapid On-Site Cytological Evaluation (ROSE)
Container	Sterile Container Pre-Filled with Fixative Solution
Procedure	<ul> <li>The appointment should be made by Radiology staff to the Cytopathology Section team.</li> <li>Available timeslot for ROSE procedure: Monday to Friday (after 2.30pm).</li> <li>The Cytopathology MLS will attend the procedure with all required materials.</li> <li>Upon specimen collection by radiologist, Cytopathology MLS will perform slide smearing and fix the slides with quick haematoxylin stain.</li> <li>The specimen slides will then be screened under a microscope by Cytopathology MLS to assess the collection site and specimen sufficiency.</li> </ul>

group.

Cytopathology MLS and dispatch in Lab WhatsApp group.

A verbal report will be provided by the referral laboratory personnel to the surgeon and communicated to OT personnel via the Lab WhatsApp

Feedback from slide review will be provided by Cytopathology MLS to
radiologist.
The radiologist will determine whether resampling is required or not.
After procedure, the radiologist needs to complete the test request form
and order the test in HIS.
The Cytopathology MLS will pack the specimen container, slides and
request form to be sent to referral laboratory.

Test	Electron Microscopy		
Container	Special Vial with EM Grade Glutaraldehyde Solution		
Procedure	<ul> <li>The requesting surgeon must make booking via phone call or request through the official Laboratory WhatsApp group, 2 working days in advance.</li> <li>Cytopathology MLS will inform referral laboratory to book the slot and request for the special vial (kept at 4 - 6°C).</li> <li>The Cytopathology MLS will prepare all materials required for specimen transportation, communicate with the referral lab, and arrange dispatch of the specimen.</li> <li>After procedure, the surgeon needs to complete the test request form and order the test in HIS.</li> <li>The special vial and request form shall label accordingly before dispatching to the laboratory.</li> <li>Cytopathology MLS will pack the specimen accordingly and send the specimen to the referral laboratory.</li> </ul>		

#### Release of Histopathology Slides/ Block to Patient

- The ordering medical practitioner must provide a referral letter to request the release of tissue block or slides release from the referral laboratory.
- The TAT for the tissue blocks or slides release is 7 working days.
- Laboratory personnel will inform medical practitioner or clinic assistant once the tissue block or slide is ready for collection.
- Charges for the tissue block or slides release request must be paid before proceeding.
- The block release consent form must be completed by the patient or their representative, including a signature in the corresponding column and a photocopy of the patient's identification card or passport.
- Laboratory personnel will act as a witness and complete the witness column.
- Laboratory personnel will release the requested tissue block or slides to the patient.

#### **Request Second Opinion**

- The ordering medical practitioner needs to fill up histopathology request form for second opinion.
- The referral laboratory pathologist will select the suitable block or slide used for second opinion upon request.
- Laboratory personnel will get the block specimen returned from primary referral laboratory and arrange for specimen transportation to the referral laboratory for second opinion.
- The laboratory personnel must ensure the referral laboratory to return back the block or slide given for second opinion to the primary laboratory upon completion of reporting.

# CHAPTER 6

RESULT REPORTING

#### **RESULTS REPORTING**

#### 1. Turnaround Time (TAT)

- a) Laboratory reports are generally completed within the designated turnaround time.
   The details of the laboratory tests' turnaround time are provided in Appendix 3.
- b) In certain circumstances, the laboratory may be unable to meet the defined turnaround time for tests routinely performed in-house due to equipment malfunctions, LIS/ HIS server downtime, or the need for a second opinion.
- c) In the event that a reporting delay could potentially compromise patient care, the laboratory will promptly notify the ordering medical practitioner.

#### 2. Reporting of Laboratory Results

- Medical practitioners, clinic assistants and nurses will be able to view or print patients' results via the Electronic Medical Record (EMR) screen in HIS.
- b) The laboratory will not provide printed results for all in-house tests in order to observe and comply with the Personal Data Protection Act 2010.
- c) Patients should request for hardcopy results and/or reports from their medical practitioners or from the hospital's Medical Reports Department (MRD).
- d) The laboratory will notify verified results if:
  - i. The request to notify has been included in the test requisition
  - ii. The tests are classified as urgent
  - iii. The results are abnormal and fall within the critical value range

#### 3. Report from External/ Referral Laboratories

- a) The MLS will monitor the status of referred tests and trace for the results according to the TAT.
- b) Once received softcopy and / or hardcopy report from referral laboratories, the MLS will verify the information in the result, including:
  - i. Patient information (name, gender, IC No./ passport number, date of birth, age)
  - ii. Requestor information (name of ordering medical practitioner and hospital)
  - iii. Date of specimen collection in SMCV
  - iv. Date of reporting
  - v. Tests processed by referral laboratories
  - vi. Results
  - vii. Completeness of reports

- c) If no issues are found upon reviewing the referral test report, the MLS will upload the report, which is accessible in the HIS by doctors, nurses, clinic assistants and Medical Records Department.
- d) If any incorrect details are found in the referral test report, the MLS will:
  - i. Inform the ordering doctor the result if the result has been released.
  - ii. Inform the ordering doctor there will be a delay in uploading the reports in HIS due to incorrect information in the received reports.
  - iii. Inform referral laboratory to amend the incorrect information in the reports.
  - iv. Follow-up with the referral laboratory to ensure that the amended reports will be received.
  - e) Hardcopy reports will be dispatched to the clinic of the ordering doctors, if provided by referral laboratory.

#### 4. Critical Results

- a) For inpatients, laboratory personnel will inform the critical results of the ordering medical practitioner and nurse in charge of the patient via phone call.
- b) For outpatients, laboratory personnel will call or text the ordering medical practitioner to inform the patient's critical/ panic results. If the ordering medical practitioner does not respond to phone call and/or text within 30 minutes, the laboratory personnel shall notify the results to medical practitioner's clinic assistant of the critical result.
- c) The information for the critical results is as follows:

Chemical Pathology				
TEST	SPECIMEN	POPULATION	LOWER CRITICAL LIMIT	UPPER CRITICAL LIMIT
Acetaminophen	Serum	All	-	> 200 µmol/L
Bilirubin, Total	Serum	Newborn	-	> 260 µmol/L
Bicarbonate	Serum / plasma	All	< 10 mmol/L	> 40 mmol/L
Calcium	Serum	Newborn	< 1.7 mmol/L	> 3.0 mmol/L
Creatine Kinase	Serum	Adult	-	> 5000 U/L
CK-MB	Serum	All	-	> 15.0 ng/mL

Creatinine	Serum	All	-	> 330 µmol/L
Creatine Kinase	Serum	All	-	5000 U/L
D-Dimer	Whole blood	All	-	> 0.5 ng/mL
Glucose	Serum / plasma	All	< 2.8 mmol/L	> 20.0 mmol/L
Magnesium	Serum	All	< 0.4 mmol/L	> 2.5 mmol/L
рН	Whole blood	All	< 7.2	> 7.55
PCO2	Whole blood	All	< 20 mmHg	> 70 mmHg
PO2	Whole blood	All	< 45 mmHg	-
Phosphate	Serum	All	< 0.32 mmol/L	> 2.87 mmol/L
Potassium	Serum	Adult	< 2.8 mmol/L	> 6.0 mmol/L
	Serum	Newborn	< 2.5 mmol/L	> 7.0 mmol/L
	Serum (hemolysed)	All	-	> 8.0 mmol/L
Sodium	Serum	All	< 125 mmol/L	> 155 mmol/L
Troponin-T	Whole blood	All	-	> 40 ng/L
Troponin I	Serum	Adult Male	-	>34.2 ng/mL
(High Sensitivity)		Adult Female	-	>15.6 ng/mL
TSH	Serum / plasma	Newborn	-	> 20 mIU/mL
Urea	Serum	Paediatric 3 months - 12 years	-	> 19 mmol/L
Uric Acid	Serum	Paediatric 3 months - 12 years	-	> 500 µmol/L

Haematology					
TEST	SPECIMEN	POPULATION	LOWER CRITICAL LIMIT	UPPER CRITICAL LIMIT	
APTT	Plasma	All	-	> 80 seconds	
Fibrinogen	Plasma	All	< 0.8 g/L	> 7.0 g/L	
Haemoglobin	Whole blood	Adult	< 7.0 g/dL	19.0 g/dL	
	Whole blood	0-1 week	< 8.0 g/dL	22.0 g/dL	
	Whole blood	3 months-12 years	< 7.0 g/dL	20.0 g/dL	
PT	Plasma	All	-	> 40 seconds	
				Or INR > 4.0	
PCV	Whole blood	All	< 15 %	-	
Platelets	Whole blood	Adult	< 30 x 10 <sup>9</sup> /L	> 1,000 x 10 <sup>9</sup> /L	
	Whole blood	Paediatric	< 50 x 10 <sup>9</sup> /L	> 1,000 x 10 <sup>9</sup> /L	
WBC	Whole blood	All	< 2.0 x 10 <sup>9</sup> /L	> 30.0 x 10 <sup>9</sup> /L	
	Т	ransfusion Medic	cine		
TEST	SPECIMEN	POPULATION	CRITICA	L RESULTS	
Antibody screen	Whole blood	All	Positive and a new alloantibody is suspected or no previous antibody identification		
Direct Coombs	Cord blood	Newborn	Po	ositive	
	Microbiology				
TEST	SPECIMEN	POPULATION	CRITICA	L RESULTS	
Bacterial Antigen	CSF	All	Po	ositive	
Culture	Whole Blood	All	Po	ositive	
	Stool	All	Salmonella,	Vibrio, Shigella	

	CSF/ Effusion Fluid	All	Positive
	All specimen types	All	MRSA
Culture	All specimen	All	Multi-resistant organism (MRO)
	types		Extended spectrum beta-lactamase (ESBL)
			Corynebacterium diphtheria
			Neisseria meningitides
			Neisseria gonorrhoeae
			Brucella sp. (Presumptive)
Direct smear	Culture swab	All	Trichomonas vaginalis seen
Gram Stain	CSF	All	Organism seen
Mycobacterium sp, acid fast bacillus (AFB), M. tuberculosis	All specimen types (Culture & Stain)	All	Positive
		Molecular	
TEST	SPECIMEN	POPULATION	CRITICAL RESULTS
Chlamydia trachomatis / Neisseria gonorrhoea (CT/NG) PCR	Urine / swab	All	Detected
Clostridium Difficile Toxin PCR	Stool	All	Positive
Mycobacterium sp, acid fast bacillus (AFB), M. tuberculosis PCR	All specimen types	All	Positive

Influenza A / B PCR	Nasal swab	All	Positive
Respiratory Full Panel	Nasopharyngeal & oropharyngeal swab	All	Detected (any parameter)
Respiratory Viruses Antigen Screen (RVAS)	Nasopharyngeal swab	All	Detected (any parameter)
SARS-CoV-2 (COVID-19) Rapid PCR	Nasopharyngeal & oropharyngeal swab	All	Detected
SARS-CoV-2 (COVID-19) RT- PCR	Nasopharyngeal & oropharyngeal swab	All	Detected

Serology/ Infectious Diseases				
TEST	SPECIMEN	POPULATION	CRITICAL RESULTS	
Cryptococcus Antigen Test	Serum / CSF	All	Positive	
HIV COMBO	Serum / plasma	All	Positive	
Malaria parasite	Whole blood	All	Positive	
SARS-CoV-2 (COVID-19) Antigen	Nasopharyngeal swab	All	Positive	
SARS-CoV-2 (COVID-19) Antibody	Serum	All	Positive	

# **APPENDIX 1**

IN-HOUSE TEST STABILITY

# Appendix 1: Test Stability

# Haematology

		Test Stability	
Test	Specimen Type	Room Temperature	Fridge (2 °C - 8 °C)
APT Downey test	<ul> <li>Vaginal blood from pregnant woman</li> <li>Blood in diapers (liquid form, not dry) from neonate</li> <li>Blood in vomitus / gastric content/ nasogastric aspirate from neonate</li> <li>Blood in faeces from neonate</li> </ul>	2 - 6 hours	-
Bone Marrow Slide	Bone Marrow Aspirate	2 - 6 hours	-
Coagulation test (PT, APTT, Fibrinogen)	Plasma (Sodium citrate)	4 hours	-
ESR	Whole Blood (EDTA)	4 - 6 hours	24 hours
FBC	Whole Blood (EDTA)	24 hours	2 days
G6PD Screen	Cord blood / venous blood (EDTA)	-	3 days
Hb (Carestart)	Cord blood (EDTA)	-	3 days (cord blood)
Hb Analysis	Whole Blood (EDTA)	4 hours	-
Heinz Bodies	Whole Blood (EDTA)	4 hours	-
Kleihaur Betke Elusion Test	Maternal Whole Blood (EDTA)	24 hours	4 days
Malaria Parasite	Whole Blood (EDTA)	2 – 4 hours	-
Peripheral Blood Firm (PBF)	Whole Blood (EDTA)	4 hours	-
Reticulocyte Count	Whole Blood (EDTA)	24 hours	2 days

#### **Transfusion Medicine**

		Test Stability	
Test	Specimen Type	Room Temperature	Fridge (2°C - 8°C)
ABO & Rh(D) typing (Gel card)	Plasma & Packed Cell (EDTA)	4 hours	2 days
Cord blood ABO	Whole Blood (EDTA)	4 hours	2 days
Crossmatch order	Plasma & Packed Cell (EDTA)	4 hours	2 days
DAT	Plasma & Packed Cell (EDTA)	4 hours	2 days
IDAT	Plasma & Packed Cell (EDTA)	4 hours	2 days

# **Biochemistry & Immunology**

		Test Sta	ability
Test	Specimen	Room Temperature	Fridge (2°C - 8°C)
Albumin BCG	Serum	7 days	7 days
AlkP	Serum	7 days	7 days
ALT	Serum	3 days	7 days
Amylase	Serum	24 hours	7 days
AST	Serum	4 days	7 days
Bilirubin Total	Serum	24 hours	7 days
C3	Serum	3 days	7 days
C4	Serum	2 days	2 days
Calcium Total	Serum	7 days	7 days
Chloride (CI)	Serum	7 days	7 days
Cholesterol, HDL	Serum	2 days	7 days
СК	Serum	2 days	7 days
Creatinine	Serum	7 days	7 days
CRP	Serum	7 days	7 days
D-dimer	Plasma (Lithium heparin)	8 hours	-
Direct Bilirubin (Conjugated)	Serum	2 days	7 days
GGT	Serum	7 days	7 days
Glucose	Serum	2 days	7 days
Hba1c	Whole Blood (EDTA)	8 hours	7 days
HS CRP	Serum	7 days	7 days
Iron	Serum	10 hours	7 days
LDH	Serum	3 days	3 days
Magnesium	Serum	7 days	7 days

		Test Stability	
Test	Specimen	Room Temperature	Fridge (2 °C - 8 °C)
Paracetamol	Serum	24 hours	7 days
Phosphate Inorganic	Serum	24 hours	3 days
Potassium (K)	Serum	7 days	7 days
Rheumatic Factor (RF)	Serum	-	2 days
Sodium (Na)	Serum	7 days	7 days
Total Cholesterol	Serum	7 days	7 days
Total Protein	Serum	7 days	7 days
Transferrin	Serum	-	24 hours
Triglyceride	Serum	2 days	7 days
Troponin T Whole Blood (Lithium heparin)		8 hours	-
UIBC	Serum	7 days	7 days
Urea	Serum	7 days	7 days
Uric acid	Serum	8 hours	3 days

# Immunology, Hormone & Tumour Markers

		Test Sta	bility
Test	Specimen	Room Temperature	Fridge (2°C - 8°C)
AFP	Serum	3 days	7 days
Beta HCG	Serum	-	7 days
CA 125	Serum	-	7 days
CA 153	Serum	-	7 days
CA 199	Serum	-	7 days
CEA	Serum	-	7 days
СМКВ	Serum	8 hours	3 days
Cortisol	Serum	-	7 days
Estradiol	Serum	-	7 days
Ferritin	Serum	-	7 days
Folate	Serum	-	7 days
Folic acid	Serum	-	3 days
Free T3	Serum	-	6 days
Free T4	Serum	-	6 days
FSH	Serum	-	7 days
HAVAB IgG	Serum	-	7 days
HAVAB IgM	Serum	-	7 days
HBE AB	Serum	-	7 days
HBE AG	Serum	-	7 days
HBs AB	Serum	-	7 days
HBs AG	Serum	24 hours	6 days
HCV Ab	Serum	3 days	7 days
High Sensitivity Trop I	Serum	8 hours	24 hours

_		Test Stability	
Test	Specimen	Room Temperature	Fridge (2°C - 8°C)
HIV Ab/Ag	Serum	3 days	7 days
iPTH	Plasma (EDTA)	-	2 days
LH	Serum	7 days	7 days
NT PRO BNP	Serum	3 days	6 days
Procalcitonin	Serum	8 hours	24 hours
Progesterone	Serum	-	7 days
Prolactin	Serum	-	7 days
Rubella lgG	Serum	-	7 days
Syphilis	Serum	3 days	7 days
Testosterone	Serum	8 hours	7 days
Total PSA	Serum	-	24 hours
TSH	Serum	-	7 days
Vitamin B12	Serum	3 days	7 days
Vitamin D	Serum	3 days	7 days

# **Urine Biochemistry**

		Test Sta	ability
Test	Specimen	Room Temperature	Fridge (2 °C - 8 °C)
Urine Amylase	Urine	24 hours	3 days
Urine Calcium	Urine	2 days	4 days
Urine Chloride	Urine	7 days	7 days
Urine Cortisol	Urine	-	7 days
Urine Creatinine	Urine	2 days	6 days
Urine Glucose	Urine	2 hours	2 hours
Urine Magnesium	Urine	3 days	3 days
Urine Microalbumin	Urine	-	6 days
Urine Osmolarity	Urine	-	7 days
Urine Phosphate Inorganic	Urine	4 days	7 days
Urine Potassium	Urine	7 days	7 days
Urine Protein	Urine	24 hours	7 days
Urine Sodium	Urine	7 days	7 days
Urine Urea	Urine	2 days	7 days
Urine Uric Acid	Urine	2 days	2 days

# Serology

		Test Sta	bility
Test	Specimen Type	Room Temperature	Fridge (2 °C - 8 °C)
Allergy Comprehensive Panel (51 Allergen)	Serum	24 hours	7 days
ASOT	Serum	2 days	2 days
Chikungunya Serology	Whole Blood (EDTA)	-	2 days
Dengue lgG & lgM	Whole Blood (EDTA)	-	2 days
Dengue NS1	Whole Blood (EDTA)	-	2 days
H.Pylori Ab	Serum	Immediately	3 days
HIV 1/2 Ab (kit)	Serum	-	7 days
HIV p24 Ab/Ag (kit)	Serum	-	7 days
Influenza Rapid Test	Serum	24 hours	2 days
Leptospirosis IgM	Serum	immediately	3 days
Momospot	Serum	2 days	2 days
Mycoplasma Antibody	Serum	-	2 days
Mycoplasma lgM	Serum	-	7 days
RPR	Serum	-	7 days
TPPA	Serum	-	7 days
Typhoid IgG & IgM	Serum	-	3 days
WWF	Serum	-	7 days

#### **Immunology**

		Test Stability	
Test	Specimen Type	Room Temperature	Fridge (2°C - 8°C)
ANA	Serum	-	7 days
ANCA	Serum	-	7 days
Anti-dsDNA	Serum	-	7 days
EBV VCA IgA (NPC screen)	Serum	-	7 days
ENA	Serum	-	7 days

#### Fluid & Excretion

		Test Stability	
Test	Specimen Type	Room Temperature	Fridge (2°C - 8°C)
LH Ovulation Rapid Test	Urine	2 days	-
Urine Amphetamine	Urine	2 days	-
Urine Barbiturate	Urine	2 days	-
Urine Benzodiazepine	Urine	2 days	-
Urine Cannabinoids	Urine	2 days	-
Urine Cocaine	Urine	2 days	7 days
Urine Opiate	Urine	2 days	-
Urine Phencyclidine	Urine	2 days	-
Urine Pregnancy Test	Urine	2 days	-

### Fluid FEME & Biochemistry

		Test Stability	
Test	Test Specimen Type		Fridge (2°C - 8°C)
Urine FEME	Urine	2 hours	-
Fluid FEME	Fluids	2 hours	-
Synovial Fluid	Synovial Fluid	24 - 48 hours	-
	Pleural Fluid	6 hours	-
CI.	Peritoneal Fluid	6 hours	-
Glucose	Synovial Fluid	< 1 hour	-
	CSF	5 hours	3 days
1011	Pleural Fluid	6 hours	-
LDH	Peritoneal Fluid	6 hours	-
	Pleural Fluid	6 hours	-
Total protein	Peritoneal Fluid	6 hours	-
	CSF	1 day	6 days
A I = = =	Pleural Fluid	6 hours	-
Amylase	Peritoneal Fluid	6 hours	-
Constining	Pleural Fluid	6 hours	-
Creatinine	Peritoneal Fluid	6 hours	-
Bilirubin	Fluid	24 hours	7 days

# Molecular & Microbiology Manual Test

		Test Stability		
Test	Specimen Source	Room Temperature	Fridge (2 °C - 8 °C)	Remarks
COVID-19	Nasal /	1 hour	4 hours	_
Antigen	Nasopharyngeal Swab	111001	1110015	
COVID-19 Rapid PCR	Nasal / Nasopharyngeal Swab	8 hours	3 days	-
RVAS	Nasopharyngeal Swab/ Aspirate	-	8 hours	-
FOB	Stool	-	3 days	-
Rotavirus	Stool	-	3 days	-
MRSA PCR	Nasal & Groin Swab	-	<2 days	-
	Sputum Sediment	-	7 days	-
MTB/RIF	Raw Sputum	3 days	7 days	-
C.difficile Toxin PCR	Stool	24 hours	5 days	-
Flu/RSV PCR	Nasal / Nasopharyngeal Swab	24 hours	7 days	Specimen should be immediately placed in up to 3 mL of VTM
HBV DNA Viral Load	Plasma	24 hours	7 days	-
Gastrointestinal Panel	Stool	4 days	4 days	-
Meningitis Panel	CSF	1 day	7 days	-
Respiratory Panel	Nasopharyngeal and/or Osopharyngeal Swab	4 hours	3 days	Specimen should be immediately placed in up to 3 mL of VTM
Stool FEME	Stool	24 hours	2 days	-
Stool Culture	Stool	24 hours	2 days	-

### **Culture and Sensitivity Test**

Test	Specimen Type	Test Stability	
rest	Specimen Type	Room temperature	2-8 °C
Blood	Blood culture	<24 hours	-
Fluid	Fluid or Pus in Sterile container	4 hours	-
Genital swab	Charcoal swab	8 hours	-
Others	Sterile container	4 hours	-
Swab / Wound / Pus / Tissue / Fluid	Charcoal swab	4 hours	-
Tissue	Saline / Sterile container	4 hours	-
Urine	Urine	2 hours	-



# **APPENDIX 2**

PRESERVATIVE FOR 24-HOUR URINE COLLECTION

Appendix 2 - Preservative for 24-Hour Urine Collection

No	Test	Preservative Used	Remarks
1	24 Hours Urine Creatinine Clearance	20 mL HCI	-
2	24 Hour Urine Cortisol	Plain	-
3	24 Hours Urine Calcium	20 mL HCI	-
4	24 Hours Urine Phosphate Inorganic	20 mL HCI	-
5	24 Hours Urine Protein	Plain	Avoid collection of specimens within 24hours of intense exercise since this can falsely elevate protein excretion
6	24 Hours Urine Urea	Plain	-
7	24 Hours Urine Uric Acid	Plain	-
8	24 Hours Urine Oxalate	20 mL HCl	-
9	Urine Protein Electrophoresis	Plain	-
10	Vanillylmandelic Acid	20 mL HCI	-
11	Catecholamines	20 mL HCI	-
12	Urine Lead	Plain	-
13	24 Hours Urine Oxalate	20 mL HCI	-
14	Urine Copper	Plain	-
15	Urine Free Cortisol	Plain	Send to the laboratory immediately
16	Urine Metanephrine	20 mL HCI	-

HCI: Hydrochloric Acid

# **APPENDIX 3**

TEST PROFILE AND
TAT

PANEL	TEST LIST	
ALLERGY COMPREHENSIVE PANEL (51 ALLERGEN)	Foods  Egg white, Chicken  Milk, Cow  Cod  Wheat, Whole  Rice  Peanut  Soybean  Hazelnut  Crab  Shrimp  Tomato  Pork  Beef  Carrot  Potato  Tuna  Salmon  Strawberry  Yeast, Baker's  Garlic  Egg yolk, Chicken  Lobster  Cheddar Cheese  Chicken  Mutton  Cacao Bean/Chocolate Bean  Milk, Goat  Shunch  Shrimp	Mites  D. Pteronyssinus D. Farinae Blomia Tropicalis  Molds (Mould Mix) Penicillium notatum Cladosporium herbarum Aspergillus fumigates Candida albicans Alternaria alternate  Pollens (Grass/Weed Mix) Bermuda Grass Timothy Grass Ragweed, Short Mugwort, Common Goldenrod  Trees (Tree Mix) Acacia Pine  Animal Dander Cat dander Dog dander Chicken feathers/Skin Duck feathers/Skin Cockroach Mix (German, Oriental, American)
ALLERGY P412-lgG4	<ul> <li>Dermatophagoides farinae</li> <li>Dermatophagoides pteronyssinus</li> </ul>	• Latex

PANEL	TEST LIST		
ALLERGY EURO 54 PANEL	<ul> <li>Bermuda grass</li> <li>Timothy grass</li> <li>Grass mix 5 (Sweet vernal, Bermuda)</li> <li>Timothy grass</li> <li>cultivated rye</li> <li>Acacia</li> <li>Pine (Australian)</li> <li>Oil palm</li> <li>Dermatophagoides pteronyssinus</li> <li>Dermatophagoides farinae</li> <li>Dermatophagoides microceras</li> <li>Tyrophagus putrescentiae</li> <li>Glycyphagus domesticus</li> <li>Blomia tropicalis</li> <li>Cat</li> <li>Dog</li> <li>Horse</li> <li>nBos d6 BSA (Milk)</li> <li>Feather mix 1 (Chicken, Duck, Goose)</li> <li>Kapok</li> <li>Honey bee venom</li> <li>Candida albicans</li> <li>Mould mix 1 (Aspergillus fumigatus, Alternaria alternata, Cladosporium herbarum)</li> <li>Penicillium notatum</li> <li>Wheat flour</li> <li>Gluten egg</li> <li>White milk</li> </ul>	<ul> <li>nBos d5 beta-lactoglobulin (Milk)</li> <li>nBos d8 Casein (Milk)</li> <li>Chocolate</li> <li>Peanut</li> <li>Hazelnut</li> <li>Soybean</li> <li>Almond</li> <li>Baker's yeast</li> <li>Glutamate</li> <li>Codfish</li> <li>Crab</li> <li>Shrimp</li> <li>Tuna</li> <li>Salmon</li> <li>Lobster</li> <li>Duck meat</li> <li>Beef (cooked)</li> <li>Pork (cooked)</li> <li>Cheddar cheese</li> <li>Chicken</li> <li>Lamb</li> <li>Tomato</li> <li>Garlic</li> <li>Strawberry</li> <li>Kiwi</li> <li>Shellfish mix 1 (Spiny lobster, Oyster, Clam)</li> <li>Coffee</li> <li>CCD-marker</li> </ul>	
	nBos d4 alpha-lactalbumin (Milk)		

PANEL	TEST LIST		
ALLERGY PANEL 1 (32 ALLERGENS)	<ul> <li>Egg white</li> <li>Squid</li> <li>Milk, Cow</li> <li>Wheat</li> <li>Peanut</li> <li>Soybean</li> <li>Shrimp</li> <li>Blomia Tropicalis</li> <li>Fish Cod</li> <li>Crab</li> </ul>	Pet Furry Dander Mix Cat, Dog, Guinea Pig, Mouse, Rat  Grass Pollen Mix  Bermuda  Rye and Bahia grass  Timothy grass  Meadow grass  Kentucky grass  Johnson grass	
	House Dust and Cockroach Mix  Blattella germanica  D. Pteronyssinus  Farinae  Hollister-stier Labs	<ul> <li>Mold Mix 1</li> <li>Aspergillus fumigatus</li> <li>Alternaria</li> <li>Cladosporium herbarum</li> <li>Penicillium chrysogenum</li> </ul>	
ALLERGY PANEL 2 (COMMON MIX)	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Egg white</li> <li>Milk, Cow</li> <li>Peanut</li> <li>Soybean</li> <li>Fish Cod</li> <li>Wheat</li> </ul>	<ul> <li>House Dust and Cockroach Mix</li> <li>Blattella germanica</li> <li>D. Pteronyssinus</li> <li>D.Farinae</li> <li>Hollister-stier Labs</li> </ul> Seafood Mix	
	Pet Furry Dander Mix Cat, Dog, Guinea Pig, Mouse, Rat	<ul><li>Blue Mussel</li><li>Salmon</li><li>Shrimp</li></ul>	
ALLERGY PANEL 3 (DOMESTIC)	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Blomia Tropicalis</li> <li>Pet Furry Dander Mix</li> <li>Cat, Dog, Guinea Pig, Mouse, Rat</li> </ul>	House Dust and Cockroach Mix  Blattella germanica  D. Pteronyssinus  D.Farinae  Hollister-stier Labs	

PANEL	TES	ST LIST
ALLERGY PANEL 4 (COMMON FOOD)	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Egg white</li> <li>Milk, Cow</li> <li>Wheat</li> <li>Peanut</li> <li>Soybean</li> <li>Chicken</li> </ul>	
ALLERGY PANEL 5 (HOUSE DUST MITES)	<ul><li>D. Pteronyssinus</li><li>D.Farinae</li><li>Blomia Tropicalis</li></ul>	
ALLERGY PANEL 6 (SEAFOOD)	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Shrimp</li> <li>Crab</li> <li>Fish Cod</li> <li>Clam</li> <li>Squid</li> </ul>	
ALLERGY PANEL 7	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Anchovy</li> <li>Milk, Cow</li> <li>Egg White</li> <li>Peanut</li> <li>Shrimp</li> <li>Soy Bean</li> </ul>	<ul> <li>Wheat</li> <li>D. Pteronyssinus</li> <li>D.Farinae</li> </ul> Pet Furry Dander Mix <ul> <li>Cat, Dog, Guinea Pig, Mouse, Rat</li> </ul>
ALL SCREEN	<ul> <li>E2A-PBX1</li> <li>ETV6-RUNX1</li> <li>MLL-AF4</li> <li>BCR-ABL1</li> <li>e1a2</li> <li>SIL-TAL1</li> </ul>	

PANEL	TEST	LIST
ALPHA THALASSAEMIA GENOTYPING	Large deletion  • -α3.7  • -α4.2  •SEA  •THAI  •FIL  60 Alpha 2 Point Mutation (Please contact laboratory for more details information)	
AML SCREEN	<ul><li>RUNX1 - RUNX1T1</li><li>CBFB-MYH11</li></ul>	
AMPHETAMINES TYPE SUBSTANCE SCREEN	Amphetamines and methamphetamines	
ANCA	<ul><li>p-ANCA</li><li>c-ANCA</li></ul>	
ANTI-ENA ANTIBODIES	<ul> <li>AMA-M2</li> <li>Ribosomal P-Protein</li> <li>Histones</li> <li>Nucleosomes</li> <li>dsDNA</li> <li>PCNA</li> <li>CENP B</li> <li>Jo-1</li> </ul>	<ul> <li>PM-ScI</li> <li>ScI-70</li> <li>SS-B</li> <li>Ro-52</li> <li>SS-A</li> <li>Sm</li> <li>RNP/S</li> </ul>

PANEL	TEST LIST		
ASEAN ALLERGY PANEL (36 ALLERGENS)	<ul> <li>Phadiatop ImmunoCap (Total IgE)</li> <li>Codfish</li> <li>Tuna</li> <li>Salmon</li> <li>Mucor</li> <li>Bermuda grass</li> <li>Timothy grass</li> <li>Alternaria</li> <li>Sesame seed</li> <li>Aspergillus</li> <li>Candida</li> <li>Peanut</li> <li>Milk (Cow's milk)</li> <li>Chocolate</li> <li>Egg white</li> <li>Egg white</li> <li>Egg yolk</li> <li>Chicken</li> <li>Beef</li> <li>Clam</li> <li>Crab</li> <li>Shrimp</li> <li>Codfish</li> <li>Tuna</li> <li>Cadlman</li> <li>Permuda grass</li> <li>Alternaria</li> <li>Candida</li> <li>Candida</li> <li>Candida</li> <li>Cladosporium</li> <li>Penicillin</li> <li>Cat Dander</li> <li>Dog Dander</li> <li>Cockroach mix</li> <li>Dermatophagoides</li> <li>Pteronyssinus</li> <li>Dermatophagoides farinae</li> <li>Blomia Tropicallis</li> <li>House dust</li> </ul>		
BCR ABL	<ul><li>e13a2</li><li>e14a2</li></ul>		
BETA THALASSAEMIA GENOTYPING	349 Beta Thala Mutation (Please contact laboratory for more details information)		
BETA - 2 - GLYCOPROTEIN	<ul> <li>Beta 2 glycoprotein IgM Ab</li> <li>Beta 2 glycoprotein IgG Ab</li> </ul>		

PANEL	TEST LIST		
BLOOD CULTURE IDENTIFICATION PANEL	Bacteria  Acinetobacter calcoaceticus-baumannii complex  Bacteroides fragilis  Enterobacter cloacae complex  Escherichia coli  Klebsiella aerogenes  Klebsiella oxytoca  Klebsiella pneumoniae group  Proteus spp.  Salmonella spp.  Serratia marcescens  Haemophilus influenzae  Neisseria meningitidis  Pseudomonas aeruginosa  Stenotrophomonas maltophilia  Enterococcus faecalis  Enterococcus faecium  Listeria monocytogenes  Staphylococcus aureus  Staphylococcus epidermidis  Staphylococcus lugdunensis  Streptococcus pneumoniae  Streptococcus pyogenes	<ul> <li>Yeast</li> <li>Candida albicans</li> <li>Candida auris</li> <li>Candida glabrata</li> <li>Candida krusei</li> <li>Candida parapsilosis</li> <li>Candida tropicalis</li> <li>Cryptococcus (C. neoformans/C. gattii)</li> </ul> Antimicrobial resistance genes <ul> <li>IMP</li> <li>KPC</li> <li>OXA-48-like</li> <li>NDM</li> <li>VIM</li> <li>mcr-1</li> <li>CTX-M</li> <li>mecA/C</li> <li>mecA/C and MREJ (MRSA)</li> <li>vanA/B</li> </ul>	
CATECHOLAMINES	<ul><li>Norepinephrine</li><li>Epinephrine</li><li>Dopamine</li></ul>		
CSF FEME	<ul><li>Colour</li><li>Appearance</li><li>RBC</li><li>WBC</li></ul>	<ul> <li>WBC Differential Count (If more than 5 cells/uL)</li> <li>Glucose</li> <li>CSF protein</li> <li>Xanthochromia</li> </ul>	
DIABETES AUTO AB	<ul><li>GAD Autoantibodies</li><li>IA-2 Autoantibodies</li></ul>		

PANEL	TEST LIST
ENCEPHALITIS RECEPTORS AUTOIMMUNE PROFILE 3 (SERUM)	<ul> <li>Anti-nuclear antibody (ANA)</li> <li>Autoimmune Encephalitis Receptor Antibodies:</li> <li>N-methyl-D-Aspartate Receptor Antibody (Anti-NMDAR)</li> <li>Glutamate receptor, type AMPA 1/2 Antibody (Anti-AMPA1/2)</li> <li>Contactin-associated protein 2 receptor Antibody (Anti-CASPR2)</li> <li>Leucine-rich glioma-inactivated protein 1 receptor Antibody (Anti-LGI1)</li> <li>Dipeptidyl aminopeptidase-like protein 6 receptor Antibody (Anti-DPPX</li> <li>GABA B receptor Antibody (Anti-GABAb)</li> </ul>
ENCEPHALITIS RECEPTORS AUTOIMMUNE PROFILE 5 (CSF)	<ul> <li>N-methyl-D-Aspartate Receptor Antibody (Anti-NMDAR)</li> <li>Glutamate receptor, type AMPA 1/2 Antibody (Anti-AMPA1/2)</li> <li>Contactin-associated protein 2 receptor Antibody (Anti-CASPR2)</li> <li>Leucine-rich glioma-inactivated protein 1 receptor Antibody (Anti-LGI1)</li> <li>Dipeptidyl aminopeptidase-like protein 6 receptor Antibody (Anti-DPPX</li> <li>GABA B receptor Antibody (Anti-GABAb)</li> </ul>
ENUMERATION LYMPHOCYTES SUBSETS	<ul> <li>CD3</li> <li>CD4</li> <li>CD8</li> <li>CD19</li> <li>CD16+56</li> </ul>
EYE VITREOUS FLUID FOR PCR	<ul> <li>Cytomegalovirus</li> <li>Herpes Simplex Virus</li> <li>Varicella Zoster Virus</li> </ul>
FIRST SCREENING TEST	<ul> <li>Dichotomous Marker</li> <li>Trisomy 21 Age Risk</li> <li>Trisomy 22 Risk</li> <li>Trisomy 18/13 Risk</li> </ul>

PANEL		TES.	T LIST	
FOOD INTOLERANCE [FITT200]	Dairy  Egg Yolk Egg White Cow's Milk Alpha-lactalbumin Beta-lactoglobulin Casein Goat Milk Sheep Milk Buffalo Milk  Grains Rice Rye flour Corn (Maize) Barley Buckwheat Wheat Oat Millet Couscous Durum Wheat Gliadin Malt Quinoa Spelt Wheat bran Tapioca Amaranth  Nuts  Almond Brazil Nut Cashew Nut Coconut	Fruits	Vegetables  Artichoke Asparagus Aubergine Bean (Broad) Bean (Green) Bean (Red Kidney) Bean (White Haricot) Beetroot Broccoli Brussel Sprout Cabbage Cabbage (Red) Capper Carrot Cauliflower Celery Chard Chickpea Chicory Cucumber Fennel (Leaf) Leek Lentil Lettuce Marrow Onion Pea Peppers (Mixed) Potato Radish Rocket Shallot Soybean	Herbs / Spices  Aniseed Basil Bay leaf Camomile Cayenne Cinnamon Clove Coriander (Leaf) Cumin Curry Dill Garlic Ginger Ginkgo Ginseng Hops Liquorice Marjoram Mint Mustard Seed Nettle Nutmeg Parsley Peppercorns Peppermint Red Chilli Rosemary Saffron Sage Tarragon Thyme Vanilla
	<ul> <li>Amaranth</li> <li>Nuts</li> <li>Almond</li> <li>Brazil Nut</li> <li>Cashew Nut</li> </ul>	<ul> <li>Pear</li> <li>Pineapple</li> <li>Plum</li> <li>Pomegranate</li> <li>Raisin</li> <li>Raspberry</li> <li>Redcurrant</li> </ul>	<ul> <li>Onion</li> <li>Pea</li> <li>Peppers (Mixed)</li> <li>Potato</li> <li>Radish</li> <li>Rocket</li> <li>Shallot</li> </ul>	<ul><li>Rosemary</li><li>Saffron</li><li>Sage</li><li>Tarragon</li><li>Thyme</li></ul>

PANEL	TEST LIST		
FREE TESTOSTERONE INDEX	<ul> <li>Testosterone</li> <li>Albumin</li> <li>Free Testosterone Index</li> <li>Free Testosterone</li> <li>Bioavailable Testosterone</li> <li>Sex Binding Hormone</li> </ul>		
FULL BLOOD COUNT (FBC)	<ul> <li>RBC</li> <li>Haemoglobin</li> <li>PCV</li> <li>MCV</li> <li>MCH</li> <li>MCHC</li> <li>RDW</li> <li>Platelet count</li> </ul>	<ul> <li>Total WBC</li> <li>WBC Differential and Absolute Count:</li> <li>Neutrophil</li> <li>Lymphocyte</li> <li>Monocyte</li> <li>Eosinophil</li> <li>Basophil</li> </ul>	
GANGLIOSIDE AUTOIMMUNE PROFILE	Autoimmune Ganglioside-monosialic Acid IgM  Sulfatide IgM GM1 IgM GM2 IgM GM3 IgM GM4 IgM GD1a IgM GD1b IgM GD2 IgM GD3 IgM GD3 IgM GT1a IgM GT1b IgM GQ1b IgM GQ1b IgM	Autoimmune Ganglioside-monosialic Acid IgG  Sulfatide IgG GM1 IgG GM2 IgG GM3 IgG GM4 IgG GD1a IgG GD1b IgG GD2 IgG GD3 IgG GT1a IgG GT1b IgG GT1b IgG GT1b IgG	

PANEL	TEST LIST
GASTROINTESTINAL PANEL	Viruses  Adenovirus F40/41  Astrovirus  Norovirus GI/GII  Rotavirus A  Sapovirus (I, II, IV, and V)  Bacteria  Adenovirus F40/41  Astrovirus  Coli (EPEC)  Enteropathogenic E. coli (EPEC)  Enterotoxigenic E. coli (EPEC)  Shiga-like toxin-producing E. coli (STEC) stx1/stx2  Shigella/Enteroinvasive E. coli (EIEC)  Parasites  Cryptosporidium  Cyclospora cayetanensis  Entamoeba histolytica  Giardia lamblia
GENETIC	C282Y VARIANT
HAEMOCHROMATOSIS	H63D VARIANT
GIST MUTATION (KIT AND PDGFRA)	<ul> <li>KIT</li> <li>PDGFRA</li> <li>BRAF</li> <li>NTRK</li> <li>FGFR1, 2 &amp; 3</li> <li>NTRK1, 2 &amp; 3</li> <li>MSI</li> </ul>
GLUCAGON STIMULATION TEST	CORTISOL GLUCOSE GROWTH HORMONE  TESTS RESULT IN TIME INTERVAL: 0 MIN, 60MIN, 90MIN, 120MIN, 150MIN, 180MIN
HIGH SENSITIVITY MYASTHENIA GRAVIS	<ul> <li>AChR Cluster Ab</li> <li>Low aff-MuSK Ab</li> </ul>
SCREEN HISTOPLASMA SEROLOGY	<ul> <li>LRP4 Ab</li> <li>Histoplasma Yeast CompFix</li> <li>Histoplasma Immunodiffusion</li> </ul>
HLA TYPING CLASS I LOW OR MEDIUM	<ul><li>HLA-A</li><li>HLA-B</li></ul>

PANEL	TEST LIST	
HLA TYPING CLASS I HIGH RESOLUTION	HLA-C	
HLA TYPING CLASS I/II	<ul> <li>HLA-A</li> <li>HLA-B</li> <li>HLA-C</li> <li>DR</li> <li>DQ</li> <li>DPB1</li> <li>DPA1</li> </ul>	
HLA TYPING CLASS I/II HIGH RESOLUTION (HSA)	<ul> <li>HLA-A</li> <li>HLA-B</li> <li>HLA-C</li> <li>DRB1</li> <li>DRB3/4/5</li> </ul>	
HLA TYPING CLASS II LOW OR MEDIUM	<ul> <li>DRB1</li> <li>DQB1</li> <li>DRB3,4,5</li> </ul>	
HLA TYPING CLASS II HIGH RESOLUTION	<ul><li>DR</li><li>DQ</li></ul>	
HLA TYPING (HIGH RESOLUTION) - NGS	<ul> <li>HLA-A</li> <li>HLA-B</li> <li>HLA-C</li> <li>DRB1</li> </ul>	
HLA TYPING HIGH RESOLUTION (5 LOCI)	<ul> <li>HLA-A</li> <li>HLA-B</li> <li>HLA-C</li> <li>DRB1</li> <li>DQB1</li> </ul>	
HLA TYPING HIGH RESOLUTION (6 LOCI)	<ul> <li>HLA-A</li> <li>HLA-B</li> <li>HLA-C</li> <li>DQA1</li> <li>DQB1</li> <li>DPA1</li> <li>DPB1</li> </ul>	
LEUKEMIA WORKUP	AML     ALL	

PANEL	TEST LIST	
LiverFAst	Test Score:     Fibrosis     Activity     Steatosis	Biomarker:
LIVER SPECIFIC ANTINODY	<ul> <li>Anti-Ro-52</li> <li>Anti-AMA M2</li> <li>Anti-M2-3E/ BPO</li> <li>Anti-Sp100</li> <li>Anti-PML</li> </ul>	<ul> <li>Anti-gp120</li> <li>Anti-LC1</li> <li>Anti-LKM-1</li> <li>Anti-SLA/LP</li> </ul>
LUNG CANCER MARKER PANEL 1 (LUCM)	<ul> <li>CEA</li> <li>CYFRA 21-1</li> <li>NSE</li> <li>ProGRP</li> <li>SCC</li> </ul>	
LUPUS ANTICOAGULANT INHIBITOR	Basic Coagulation Screening:  APTT Prothrombin Time	Lupus Anticoagulant Screening:  PTT-LA/STA-CLOT  DRVVTGlobulin (EP)  Alpha 1 globulin (EP)  Alpha 2 globulin (EP)  Beta 1 Globulin (EP)  Beta 2 Globulin (EP)  Gamma globulin (EP)
LYMPHOMA WORKUP	CLL NHL HCL	

PANEL	TES	T LIST
MALE HORMONAL STUDIES [ANDROGEN STUDIES]	<ul><li>Free androgen index</li><li>Sex hormone binding globulin</li><li>Testosterone</li></ul>	
MENINGITIS ENCEPHALITIS PANEL  MYASTHENIA GRAVIS AUTOIMMUNE PROFILE	Bacteria  Escherichia coli K1  Haemophilus influenzae  Listeria monocytogenes  Neisseria meningitidis  Streptococcus agalactiae  Streptococcus pneumoniae  Yeast  Cryptococcus (C. neoformans/C. gattii)  AChR Ab  MuSK Ab	<ul> <li>Viruses</li> <li>Cytomegalovirus (CMV)</li> <li>Enterovirus (EV)</li> <li>Herpes simplex virus 1 (HSV-1)</li> <li>Herpes simplex virus 2 (HSV-2)</li> <li>Human herpesvirus 6 (HHV-6)</li> <li>Human parechovirus (HPeV)</li> <li>Varicella zoster virus (VZV)</li> </ul>
(SMC)  MYOSITIS PROFILE	<ul> <li>Myositis Specific Autoantibody</li> <li>Anti-Mi-2 alpha (nuclear helicase)</li> <li>Anti-Mi-2 beta (nuclear helicase)</li> <li>Anti-TIFI-gamma (anti-p155/p140)</li> <li>Anti MDA5 (anti-CADM 140)</li> <li>Anti-NXP2 (Nuclear matrix protein 2)</li> <li>Anti-SAE1 (Anti-Sumo)</li> <li>Anti-Jo-1 (Histidyl-tRNA synthetase)</li> <li>Anti-SRP (Signal recognition particle)</li> <li>Anti-PL-7 (Threonly-tRNA synthetase)</li> <li>Anti-PL-12 (Alanyl-tRNA synthetase)</li> <li>Anti-EJ (Glycyl-tRNA synthetase)</li> <li>Anti-CJ (Isoleucyl-tRNA)</li> <li>Anti-cN-1A (Anti-HNG-CoA reductase)</li> </ul>	Myositis Associated Autoantibody  Anti-Ku Anti-PM-Scl100 Anti-PM-Scl75 Anti-Ro-52

PANEL	TEST LIST
NICC BASIC (DNA LAB)	<ul> <li>Trisomies (T9, T13, T16, T21, T22)</li> <li>Sex chromosome aneuploidies (XO, XXY, XXX &amp; XYY)</li> <li>Gender (optional)</li> </ul>
NICC BASIC (GGA)	<ul> <li>Trisomies (T9, T13, T16, T21, T22)</li> <li>Sex chromosome aneuploidies (XO, XXY, XXX &amp; XYY)</li> <li>Other 19 chromosome aneuploidies (Supplementary Information)</li> <li>Gender</li> </ul>
NICC BASIC (PANORAMA USA)	<ul> <li>Trisomies (T13, T18, T21)</li> <li>Sex chromosome aneuploidy</li> <li>Triploidy</li> <li>Gender (Optional)</li> </ul>
NICC BASIC (STEMLIFE)	<ul> <li>Trisomies (T13, T18, T21)</li> <li>Sex chromosome aneuploidies (XO, XXX, XXY, XYY)</li> <li>8 microdeletions</li> <li>Gender</li> </ul>
NICC BASIC (SYNAPSE)	<ul> <li>Trisomies (T13, T18, T21)</li> <li>Aneuploidies for 23 chromosomes</li> <li>Sex chromosome aneuploidies (XO, XXY, XYY, XXX)</li> <li>Gender</li> </ul>
NICC COMPREHENSIVE (DNA LAB)	<ul> <li>Trisomies (T9, T13, T16, T21, T22)</li> <li>Sex chromosome aneuploidies (XO, XXY, XXX &amp; XYY)</li> <li>84 microdeletions</li> <li>Gender (optional)</li> </ul>
NICC COMPREHENSIVE (GGA)	<ul> <li>Trisomies (T9, T13, T16, T21, T22)</li> <li>Sex chromosome aneuploidies (XO, XXY, XXX, XYY &amp; XXXX)</li> <li>7 Microdeletions</li> <li>14 copy number variants (Supplementary Information)</li> <li>Other 19 chromosome aneuploidies (Supplementary Information)</li> <li>Gender</li> </ul>

PANEL	TEST	LIST
NICC COMPREHENSIVE (PANORAMA USA)	<ul> <li>Trisomies (T13, T18, T21)</li> <li>Monosomy X</li> <li>Triploidy</li> <li>22q11.2 microdeletion</li> <li>4 microdeletions</li> <li>Gender (Optional)</li> </ul>	
NICC COMPREHENSIVE (STEMLIFE)	<ul> <li>Trisomies (T21, T18, T13, T9, T16 &amp; T2</li> <li>Sex chromosome aneuploidies (XO, XX)</li> <li>8 microdeletions</li> <li>Gender</li> </ul>	
NICC COMPREHENSIVE (SYNAPSE)	<ul> <li>Trisomies (T13, T18, T21)</li> <li>Aneuploidies for 23 chromosomes</li> <li>Sex chromosome aneuploidy</li> <li>Gender</li> <li>Microdeletion / microduplication (60 type)</li> </ul>	es)
NIPT VISTARA (PANORAMA USA)	<ul> <li>FGFR2</li> <li>CDKL5</li> <li>MECP2</li> <li>SYNGA</li> <li>BRAF1</li> <li>CBL</li> <li>HRAS</li> <li>KRAS</li> <li>MAP2K</li> <li>NRAS</li> <li>PTPN1</li> <li>RAF1</li> <li>RIT1</li> <li>FGFR3</li> </ul>	<ul> <li>COL1A1</li> <li>COL1A2</li> <li>CHD7</li> <li>HDAC8</li> <li>JAG1</li> <li>NIPBL</li> <li>NSD1</li> <li>RAD21</li> <li>SMC1A</li> <li>SMC3</li> <li>TSC1</li> <li>TSC2</li> <li>SHOC2</li> <li>SOS1</li> <li>SOS2</li> </ul>
NEUROMYELITIS OPTICA AUTOIMMUNE PROFILE	<ul><li>Aquaporin 4</li><li>Anti-MOG</li></ul>	
NON-KETOTIC HYPERGLYCEMIA (NKH)	Amino Acid (CSF)     Amino Acid (Plasma)	

PANEL	TES'	T LIST
OLIGOCLONAL BANDS [SERUM & CSF]	<ul><li>Oligoclonal bands (serum)</li><li>Oligoclonal bands (CSF)</li></ul>	
OSMOLARITY	<ul><li>Sodium</li><li>Glucose</li><li>Urea</li><li>Osmolarity</li></ul>	
OVARIAN CANCER RISK ASSESSMENT	<ul><li>CA-125</li><li>HE-4</li></ul>	
PANEL STI	<ul> <li>Ureaplasma urealyticum</li> <li>Neisseria gonorrhoeae</li> <li>Mycoplasma hominis</li> <li>Mycoplasma genitalium</li> </ul>	<ul><li> Ureaplasma parvum</li><li> Chlamydia trachomatis</li><li> Trichomonas Vaginalis</li></ul>
PANEL STI-14	Neisseria gonorrhoeae     Chlamydia trachomatis     Mycoplasma genitalium     Trichomonas vaginalis     Ureaplasma urealyticum     Ureaplasma parvum     Mycoplasma hominis     Haemophilus ducreyi (HD)     Lymphogranuloma venereum (LGV)     Treponema pallidum (TP)	<ul> <li>Virus</li> <li>Cytomegalovirus (CMV)</li> <li>Varicella-zoster virus (VZV)</li> <li>Herpes simplex virus type 1 (HSV1)</li> <li>Herpes simplex virus type 2 (HSV2)</li> </ul>
PANEL ZIKA DENGUE CHIKUNGUNYA	<ul><li>Chikungunya PCR</li><li>Dengue PCR</li><li>Zika PCR</li></ul>	
PARANEOPLASTIC ANTIGEN AUTOIMMUNE 6	<ul> <li>Amphiphysin Antibody</li> <li>CV2 Antibody</li> <li>PNMA2 Antibody</li> <li>Ri Antibody</li> <li>Yo Antibody</li> </ul>	<ul><li>Hu Antibody</li><li>Recoverin Antibody</li><li>SOX1 Antibody</li><li>Titin Antibody</li></ul>

PANEL	TEST LIST	
PLASMA METANEPHRINE	<ul><li>Metanephrine</li><li>Normetanephrine</li><li>Total Metanephrines</li></ul>	
PLEURAL FLUID FEME	<ul><li>Colour</li><li>Appearance</li><li>RBC</li><li>WBC</li></ul>	WBC Differential Count (If more than 5 cells/uL) Glucose Total protein

PANEL	TEST LIST
	Viruses  Adenovirus  Coronavirus  Human metapneumovirus  Human rhinovirus/enterovirus  Influenza A virus  Influenza B virus  Parainfluenza virus  Respiratory syncytial virus
PNEUMONIA PANEL	Bacteria (semi-quantitative)  Acinetobacter calcoaceticus-baumannii complex  Enterobacter cloacae complex  Escherichia coli  Haemophilus influenza  Klebsiella aerogenes  Klebsiella oxytoca  Klebsiella pneumoniae group  Moraxella catarrhalis  Proteus spp.  Pseudomonas aeruginosa  Serratia marcescens  Staphylococcus aureus  Streptococcus pneumonia  Streptococcus pyogenes
	Atypical bacteria (qualitative)  Chlamydia pneumonia  Legionella pneumophila  Mycoplasma pneumoniae  Antimicrobial resistance genes  Carbapenemases (IMP, KPC, NDM, OXA-48-like, VIM)  ESBL (CTX-M), Methicillin resistance (mecA/C and MREJ (MRSA))

PANEL	TEST LIST
QF PCR SCREENING	<ul> <li>Trisomy 21</li> <li>Trisomy 18</li> <li>Trisomy 13</li> <li>Chromosome X</li> <li>Chromosome Y</li> </ul>
RESPIRATORY FULL PANEL	Viruses  Adenovirus Coronavirus 229E Coronavirus HKU1 Coronavirus NL63 Coronavirus OC43 Severe Acute Respiratory Syndrome Coronavirus 2 Human Metapneumovirus Human Rhinovirus/Enterovirus Influenza A virus Influenza A virus A/H1 Influenza A virus A/H3 Influenza A virus A/H1-2009 Influenza B virus Parainfluenza virus 1 Parainfluenza virus 2 Parainfluenza virus 3 Parainfluenza virus 4 Respiratory syncytial virus  Bacteria Bordetella parapertussis Bordetella pertussis Chlamydia pneumoniae Mycoplasma pneumoniae

PANEL	TEST LIST
RESPIRATORY PANEL 19	<ul> <li>Human Adenovirus</li> <li>Influenza A &amp; B Virus</li> <li>Parainfluenza Virus Type 1</li> <li>Parainfluenza Virus Type 2</li> <li>Parainfluenza Virus Type 3</li> <li>Parainfluenza Virus Type 4</li> <li>Human Rhinovirus (A/B/C)</li> <li>Human Resp.Syncytial Virus A, B</li> <li>Bocavirus 1/2/3/4</li> <li>Metapneumovirus</li> <li>Coronavirus 229E, NL63, OC43</li> <li>Enterovirus</li> </ul>

PANEL	TEST LIST
	Viruses
	Influenza virus A (covering H1N1-2009, H7N9, H1N1, H3N2, H5N1)
	Influenza virus B (covering Victoria strain and Yamagata strain)
	Respiratory Syncytial Virus A
	Respiratory Syncytial Virus B
	Coronavirus 229E
	Coronavirus OC43
	Coronavirus NL63
	Coronavirus HKU1
	Adenovirus (covering group B, C and E)
	Bocavirus
	Rhinovirus/Enterovirus
	Parainfluenza Virus I
	Parainfluenza Virus II
	Parainfluenza Virus III
	Parainfluenza Virus IV Human Metapneumovirus
	Bacteria
RESPIRATORY PANEL	Escherichia coli
36	Mycoplasma pneumoniae
	Chlamydia pneumoniae
	Streptococcus pneumoniae
	Klebsiella pneumoniae
	Legionella pneumophila
	Bordetella pertussis
	Staphylococcus epidermidis
	Salmonella
	Staphylococcus aureus
	Rickettsia
	Haemophilus influenzae
	Moraxella catarrhalis
	Acinetobacter baumannii
	Streptococcus pyogenes
	Fungi
	Candida albicans
	Pneumocystis jirovecii
	Aspergillus fumigatus
	Cryptococcus Pseudomonas aeruginosa

PANEL	TEST LIST	
RESPIRATORY VIRUSES ANTIGEN SCREEN (RVAS)	<ul> <li>Adenovirus</li> <li>Influenza A</li> <li>Influenza B</li> <li>RSV</li> </ul>	
SECOND TRIMESTER TEST	<ul> <li>Trisomy 21</li> <li>Trisomy 18/13</li> <li>Neural Tube Defect (Total hCG &amp; AFP)</li> </ul>	
SERUM FREE LIGHT CHAIN	<ul> <li>Kappa Free Light Chain</li> <li>Lambda Free Light Chain</li> <li>Kappa/Lambda ratios</li> </ul>	
SERUM PROTEIN ELECTROPHORESIS	<ul> <li>Immunoglobulin G</li> <li>Immunoglobulin A</li> <li>Immunoglobulin M</li> <li>Protein</li> <li>Albumin</li> </ul>	<ul><li>DRB1</li><li>DQB1</li><li>DPB1</li></ul>
SNP MICROARRAY ANALYSIS 750K & HD	<ul> <li>Aneuploidies for chromosome 1-22</li> <li>XY Trisomy and monosomy</li> <li>Gender</li> <li>Microdeletions and Duplications</li> <li>UPD and AOH</li> <li>Imprinted genes on Chr 6, 7,11, 14,15,20</li> </ul>	
SPINAL MUSCULAR ATROPHY	<ul><li>SMN1</li><li>SMN2</li></ul>	
STOOL / FEACES FEME	<ul> <li>Colour</li> <li>Consistency</li> <li>Mucus</li> <li>RBC</li> <li>Puscells</li> <li>Parasites</li> <li>Ova</li> <li>Cysts</li> <li>Total WBC</li> </ul>	<ul> <li>Neutrophils</li> <li>Lymphocytes</li> <li>Monocytes</li> <li>Eosinophils</li> <li>Basophils</li> <li>Neutrophil Count</li> <li>Lymphocyte Count</li> <li>Monocyte Count</li> <li>Eosinophil Count</li> <li>Basophil Count</li> </ul>

PANEL	TEST LIST	
SYNOVIAL FLUID FEME	<ul> <li>Colour</li> <li>Appearance</li> <li>RBC</li> <li>WBC</li> <li>WBC Differential Count (If more than 5 cells/uL)</li> </ul>	<ul> <li>Glucose</li> <li>Total protein</li> <li>Uric acids</li> <li>Monosodium Urate Crystals</li> </ul>
TORCH SCREEN	<ul> <li>CMV IgG</li> <li>CMV IgM</li> <li>HSV 1 &amp; 2 IgG</li> <li>HSV 1 &amp; 2 IgM</li> <li>Rubella IgG</li> <li>Rubella IgM</li> <li>Toxoplasma IgG</li> <li>Toxoplasma IgM</li> </ul>	
UFEME	<ul> <li>Appearance</li> <li>Colour</li> <li>Glucose</li> <li>Bilirubin</li> <li>Ketone</li> <li>Specific Gravity</li> <li>Reaction-pH</li> <li>Protein</li> <li>Urobilinogen</li> <li>Nitrite</li> </ul>	<ul> <li>Blood</li> <li>Leucocytes</li> <li>RBCs</li> <li>WBCs</li> <li>Epithelial Cells</li> <li>Crystal</li> <li>Hyaline Cast</li> <li>Pathological Cast</li> <li>Bacteria</li> <li>Mucous Thread</li> <li>Yeast</li> </ul>
URINE METANEPHRINE	<ul><li>Metanephrine (Urine)</li><li>Normetanephrine (Urine)</li><li>Total Metanephrines (Urine)</li></ul>	
URINE OSMOLARITY	<ul> <li>Urine Sodium</li> <li>Urine Glucose</li> <li>Urine Urea</li> <li>Urine Potassium</li> <li>Urine Osmolarity</li> </ul>	

PANEL	TEST LIST	
URINE PHASE CONTRAST	<ul> <li>Appearance</li> <li>Colour</li> <li>Glucose</li> <li>Bilirubin</li> <li>Ketone</li> <li>Specific Gravity</li> <li>Reaction-pH</li> <li>Protein</li> <li>Urobilinogen</li> <li>Nitrite</li> <li>Blood</li> </ul>	<ul> <li>Red Blood Cell Morphology (Dysmorphic / Isomorphic)</li> <li>Leucocytes</li> <li>RBCs</li> <li>WBCs</li> <li>Epithelial Cells</li> <li>Crystal</li> <li>Hyaline Cast</li> <li>Pathological Cast</li> <li>Bacteria</li> <li>Mucous Thread</li> <li>Yeast</li> </ul>
VON WILLEBRANDS FACTOR	<ul><li>APTT</li><li>Coagulation Factor VIII</li><li>vW Antigen</li><li>vW Activity</li></ul>	
WWF	<ul><li>SO</li><li>SH</li><li>AH</li><li>BH</li></ul>	<ul> <li>OA</li> <li>BO</li> <li>OX2</li> <li>OXK</li> <li>OX19</li> </ul>

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
ADMISSION PROFILE FBC, ESR CRP, LFT, RP UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
ADMISSION PROFILE (PAEDIATRICS) FBC CRP, LFT, RP2	1 PAED EDTA 1 PAED HEPARIN	1.5 HOURS
AMENORRHEA PROFILE Estradiol, Free T4, FSH, LH, Prolactin	1 SST	2.5 HOURS
ANAEMIA PROFILE 1 Ferritin, Iron, TIBC	1 SST	2.5 HOURS
ANAEMIA PROFILE 2 Folic Acid, Vitamin B12	1 SST	2.5 HOURS
ANTENATAL PROFILE FBC ABO & Rh Typing HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis	2 EDTA 1 SST	2.5 HOURS
ANTENATAL PROFILE + NIPT BASIC (GGA/SYNAPSE) FBC ABO & Rh Typing HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis NICC Basic	2 EDTA 1 SST 1 NICC KIT (GGA / Synapse)	2.5 HOURS 10 - 12 WORKING DAYS (NICC)
ANTENATAL PROFILE + NIPT BASIC (STEMLIFE/DNA LAB) FBC ABO & Rh Typing HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis NICC Basic	2 EDTA 1 SST 1 NICC KIT (Stem life / DNA Lab)	2.5 HOURS 10 - 12 WORKING DAYS (NICC)
ANTENATAL PROFILE 2 FBC ABO & Rh Typing, Antibody Screen HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis	2 EDTA 1 SST	2.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
ANTENATAL PROFILE 2 + NIPT BASIC (GGA/Synapse) FBC ABO & Rh Typing, Antibody Screen HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis NICC Basic	2 EDTA 1 SST 1 NICC KIT (GGA / Synapse)	2.5 HOURS 10 - 12 WORKING DAYS (NICC)
ANTENATAL PROFILE 2 + NIPT BASIC (STEMLIFE/DNA LAB) FBC ABO & Rh Typing, Antibody Screen HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis NICC Basic	2 EDTA 1 SST 1 NICC KIT (Stem life / DNA Lab)	2.5 HOURS 14 WORKING DAYS (NICC)
ANTENATAL PROFILE 2 + NICC COMPREHENSIVE FBC ABO & Rh Typing, Antibody Screen HBsAb, HBsAg, HIV 1/2 Ag/Ab, Rubella IgG, Syphilis NICC Comprehensive	2 EDTA 1 SST 1 NICC KIT (Stem life / DNA LAB)	2.5 HOURS 10 - 12 WORKING DAYS (NICC)
APS SCREENING PROFILE Beta-2 Glycoprotein, Phospholipid Ab	1 SST	1-2 WEEKS
ARTHRITIS PROFILE FBC, ESR CRP, RF, Uric Acid	1 EDTA 1 SST	1.5 HOURS
ASCITES WORKUP Ascites FEME, Ascites Biochemistry C&S for Swab/Wound/Pus/Tissue/Fluid, Direct Smear for AFB, Direct Smear for Gram Stain Ascites Cytology TB Culture	STERILE CONTAINERS	3 HOURS 3 WORKING DAYS (Cytology, C&S) 2 MONTHS (TB Culture)
AUTOIMMUNE HEPATITIS PROFILE ANA, ANCA Anti Smooth Muscles, Immunoglobulin IgG, IgM & IgA, Mitochondrial Ab	2 SST	1 WEEK (ANA & ANCA) 1-2 WEEKS
AUTOIMMUNE PROFILE ANA, Anti ds-DNA, Anti-ENA	1 SST	1 WEEK

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
BASIC SCREENING PROFILE FBC, ESR LFT, LP, RP1 UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
BASIC SCREENING PROFILE 2 FBC, ESR, HbA1c LFT, LP, RP1 UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
BASIC SCREENING PROFILE 3 HbA1c LFT, LP, RP1	1 EDTA 1 SST	1.5 HOURS
BIOCHEMICAL HEPATITIS PROFILE HAV IgM, HBsAg, HCV Ab HBC IgM, Ceruloplasmin	2 SST	2.5 HOURS  1-2 DAYS (HBC IgM, Ceruloplasmin)
BLOOD CULTURE AND SENSITIVITY (AEROBIC AND ANAEROBIC) Blood Culture: Aerobic Blood Culture: Anaerobic	2 BLOOD CULTURE BOTTLES (1 ANAEROBIC & 1 AEROBIC)	5 DAYS
BLOOD PROFILE 1 (BP1) FBC, ESR, PBF ABO & Rh Typing CRP, LFT, LP, RP1, HBsAg, HBsAb, HCV Ab, TSH, RPR UFEME	2 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS 3 WORKING DAYS (PBF)
BLOOD PROFILE 2 (BP2) FBC, ESR, PBF ABO & Rh Typing LFT, LP, RF, RP1, AFP, CEA, HAV IgG, HBsAb, HBsAg, TSH, RPR UFEME	2 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS 3 WORKING DAYS (PBF)
BLOOD PROFILE 3 (BP3) FBC, ESR CRP, LFT, LP, RP1, CA-199, FT3, FT4, TSH, RPR UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
CANCER MARKER (FEMALE) AFP, CA-125, CA-153, CA-199, CEA	1 SST	2.5 HOURS
CANCER MARKER (MALE) AFP, CA-199, CEA, PSA TOTAL	1 SST	2.5 HOURS
CARDIAC MARKERS HS-TROP I, CKMB, CK	1 SST	2 HOURS
CARDIAC MARKERS 2 CK, CKMB	1 SST	2 HOURS
CHEMO PROFILE FBC LFT, RP1	1 EDTA 1 SST	1.5 HOURS
COAGULATION PROFILE FBC APTT, PT & INR	1 EDTA 1 CITRATE	1 HOUR
COAGULATION PROFILE 2 FBC APTT, PT & INR	1 CITRATE	1 HOUR
COLORECTAL BASIC SCREEN FBC, ESR LFT, LP, RP1, CA-199, CEA, H. Pylori UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS
COMPREHENSIVE CANCER MARKER SCREEN (FEMALE) AFP, CA-125, CA-153, CA-199, CEA EBV VCA IGA (NPC Screen) Beta-2 Microglobulin	2 SST	2.5 HOURS  1 WEEK (EBV VCA IGA)  3-5 WORKING DAYS (Beta-2 Microglobulin)
COMPREHENSIVE CANCER MARKER SCREEN (MALE) AFP, CA-199, CEA, PSA Total, Testosterone EBV VCA IGA (NPC Screen) Beta-2 Microglobulin	2 SST	2.5 HOURS  1 WEEK (EBV VCA IGA (NPC Screen)  3-5 WORKING DAYS (Beta-2 Microglobulin)

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
CORD BLOOD PROFILE G6PD Screen ABO & Rh Typing, Direct Coomb's Test TSH	1 EDTA 1 LITHIUM HEPARIN	2.5 HOURS
COVID-19 ADMISSION PROFILE FBC, ESR CRP, LFT, RP1, Ferritin, LDH D-Dimer Blood C&S (Aerobic & Anaerobic) UFEME	1 EDTA 1 SST 1 LITHIUM HEPARIN 2 BLOOD CULTURE BOTTLES (1 ANAEROBIC & 1 AEROBIC) 1 STERILE URINE CONTAINER	2.5 HOURS 5 DAYS (Blood C&S)
CSF PANEL 1 CSF FEME C&S for CSF, Direct Smear for AFB, Direct Smear for Gram Stain Meningitis Encephalitis Panel	BIJOU BOTTLES	3 HOURS 3 DAYS (C&S for CSF)
CSF PANEL 2 CSF FEME C&S For CSF, Direct Smear for Gram Stain CSF Cytology Cryptococcus Antigen	BIJOU BOTTLES	3 HOURS  1-2 DAYS (Cryptococcus Ag)  3 DAYS (C&S for CSF)  3-5 WORKING DAYS (Cytology)
DENGUE FEVER STUDIES FBC Dengue IgG & IgM, Dengue NS1	1 EDTA	1 HOUR
DENGUE FEVER STUDIES 2 Dengue IgG & IgM, Dengue NS1	1 EDTA	1 HOUR
DIABETIC PROFILE FBC, HbA1c LFT, LP, RP1 Urine Microalbumin	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
DIALYSIS PRE-& POST UREA Urea Pre-Dialysis Urea Post-Dialysis	1 SST (PRE-DIALYSIS) 1 SST (POST-DIALYSIS)	1 HOUR (EACH)

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
Pre-Dialysis: FBC iPTH Na, K, Cl, Albumin, Calcium, Creatinine (Enzymatic), Glucose, LFT, LP, Phosphate Inorganic, Urea Pre-Dialysis, HBsAg, HBsAb, HCV Ab, HIV 1/2 Ag/Ab, Iron, Ferritin, TIBC, Transferrin Saturation  Post-Dialysis: Urea Post-Dialysis	2 EDTA 1 SST (PRE-DIALYSIS) 1 SST (POST-DIALYSIS)	2.5 HOURS (PRE-DIALYSIS) 1.5 HOURS (POST-DIALYSIS)
DIALYSIS VIROLOGY PROFILE HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab	1 SST	2.5 HOURS
DIVC SCREEN FBC D-DIMER APTT, Fibrinogen, PT & INR, Thrombin Time	1 EDTA 1 LITHIUM HEPARIN 2 CITRATES	1 HOUR 24 HOURS (Thrombin Time)
ELECTROLYTES Chloride, Sodium, Potassium	1 SST	1 HOUR
ESTRADIOL AND PROGESTERONE Estradiol, Progesterone	1 SST	2.5 HOURS
FEMALE HORMONE PROFILE Estradiol, Free T4, FSH, LH, Progesterone, Prolactin	1 SST	2.5 HOURS
FEMALE HORMONE PROFILE 2 Estradiol, FSH, LH, Progesterone, Prolactin	1 SST	2.5 HOURS
FEMALE ONCOLOGY SCREENING PROFILE FBC, ESR ABO & Rh Typing LFT, LP, RP1, AFP, CA-125, CA-153, CA-199, CEA, HBsAb, HBsAg, Syphilis, TSH UFEME	2 EDTA 2 SST 1 STERILE URINE CONTAINER	2.5 HOURS
FEMALE SCREENING PROFILE FBC ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab, Syphilis	2 EDTA 1 SST	2.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
FERTILITY SCREENING PROFILE FBC ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab, Syphilis, TSH	2 EDTA 1 SST	2.5 HOURS
FERTILITY SCREENING PROFILE 2 FBC ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab, Prolactin, Rubella IgG, Syphilis, TSH	2 EDTA 1 SST	2.5 HOURS
FERTILITY SCREENING PROFILE 3 FBC, HbA1c ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab, Prolactin, Rubella IgG, Syphilis, TSH, Vitamin D AMH	2 EDTA 2 SST	2.5 HOURS 1-2 DAYS (AMH)
FULL BLOOD PICTURE (FBP) FBC, PBF	1 EDTA	1 HOUR 3 WORKING DAYS (PBF)
GLUCOSE TOLERANCE TEST 2 POINTS (GTT2) Glucose (Fasting) Glucose (2HPP)	1 <sup>ST</sup> HOUR: 1 FLUORIDE 2 <sup>nd</sup> HOUR: 1 FLUORIDE	1.5 HOURS (EACH INTERVAL)
GLUCOSE TOLERANCE TEST 3 POINTS (GTT3) Glucose (Fasting) Glucose (1st Hour) Glucose (2nd Hour)	1 <sup>ST</sup> HOUR: 1 FLUORIDE 2 <sup>nd</sup> HOUR: 1 FLUORIDE 3 <sup>rd</sup> HOUR: 1 FLUORIDE	1.5 HOURS (EACH INTERVAL)
GROUP, SCREEN AND HOLD ABO & Rh Typing, Antibody Screen	1 EDTA	1 HOUR
HB ANALYSIS / Hb Electrophoresis (HSC) Ferritin, Iron HB Electrophoresis  (Patient shall have no transfusion within 3 months)	1 EDTA 1 SST	2.5 HOURS  1 WEEK (HB Electrophoresis)
HEPATITIS B CARRIER PROFILE ALT, AFP, HBeAb, HBeAg, HBsAb, HBsAg	1 SST	2 .5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
HEPATITIS B SCREEN HbsAb, HbsAg	1 SST	2.5 HOURS
HEPATITIS SCREEN HbsAb, HbsAg, HCV Ab, HAV IgG, HAV IgM	1 SST	2.5 HOURS
HSP BLOOD PROFILE 2 FBC. HbA1c LFT, LP, RP1, AFP, CEA UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS
HYPERTENSION PROFILE LP, RP1 UFEME	1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
IRON STUDIES Iron, Ferritin, TIBC, Transferrin saturation	1 SST	2.5 HOURS
LIPID PROFILE Cholesterol Total, Cholesterol/HDL Ratio, HDL, LDL, Non-HDL Cholesterol, Triglycerides	1 SST	1.5 HOURS
LIVER FUNCTION TEST Total Protein, Albumin, Globulin, A/G Ratio, Total Bilirubin, ALT, AST, ALP, GGT	1 SST	1.5 HOURS
LUPUS FOLLOW UP FBC, ESR Albumin, ALT, AST, Creatinine (Enzymatic), CRP, Urea, C3, C4 Anti ds-DNA UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS 1 WEEK (Anti ds-DNA)
LUPUS FULL ASSESSMENT FBC, ESR, Reticulocyte Count Direct Coomb's Test Albumin, Chloride, Creatinine (Enzymatic), C3, C4 Anti ds-DNA, ANA UFEME	2 EDTA 2 SST 1 STERILE URINE CONTAINER	1.5 HOURS 1 WEEK (ANA & Anti ds-DNA)
MALE HORMONE PROFILE RP1, FSH, LH, Prolactin, Testosterone	1 SST	2.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
MALE ONCOLOGY SCREENING PROFILE FBC, ESR ABO & Rh Typing LFT, LP, RP1, AFP, CA-199, CEA, HBsAb, HBsAg, PSA Total, Syphilis, TSH UFEME	2 EDTA 2 SST 1 STERILE URINE CONTAINER	2.5 HOURS
MALE SCREENING PROFILE FBC ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab, Syphilis	2 EDTA 1 SST	2.5 HOURS
MFM ANTENATAL SCREEN FBC, HbA1c, ABO & Rh Typing, Antibody Screen RP1, LFT, HbsAb, HbsAg, HCV Ab, HIV 1/2 Ag/Ab, Free T3, Free T4, TSH, Rubella IgG, Syphilis UFEME Microalbumin Creatinine Ratio (Urine)	2 EDTA 2 SST 1 URINE STERILE CONTAINER	2.5 HOURS
MONITORING PROFILE FBC CRP, LFT, RP1	1 EDTA 1 SST	1.5 HOURS
MONITORING PROFILE 2 FBC, ESR Albumin, ALT, AST, Creatinine (Enzymatic), CRP, Urea	1 EDTA 1 SST	1.5 HOURS
NEONATAL JAUNDICE SCREEN FBC, Reticulocyte count Bilirubin (Conjugated & Unconjugated)	1 PEAD EDTA 1 PEAD HEPARIN	1.5 HOURS
PAEDIATRIC BASIC SCREEN FBC CRP	1 PEAD EDTA and/or 1 PEAD HEPARIN	1 HOUR
PAEDIATRIC SCREENING PROFILE (PSP) FBC, CRP Dengue IgM/IgG, Dengue NS1 Antigen, Mycoplasma IgM Influenza Rapid Test	2 PEAD EDTA or 1 PAED EDTA & 1 PAED HEPARIN 1 NASAL SWAB	1.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
PARTIAL SEPTIC WORKOUT FBC CRP Blood Culture: Paediatrics Urine C&S	1 EDTA 1 SST 1 BLOOD CULTURE BOTTLE (YELLOW) 1 URINE STRILE CONTAINER	1 HOUR 3 DAYS (URINE C&S) 5 DAYS (BLOOD CULTUE: PAEDIATRICS)
PHOSPHOLIPID ANTIBODY Cardiolipin Ab, Lupus Anticoagulant	1 SST, 3 CITRATE	1-2 WEEKS
PRE-ECLAMPSIA BLOOD PROFILE FBC LFT, RP2, Uric Acid UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
PRE - OPERATION (BASIC) PROFILE FBC ABO & Rh Typing HBsAb, HBsAg, HCV Ab, HIV 1/2 Ag/Ab RPR	2 EDTA 1 SST	2.5 HOURS
PRE - OPERATION MINOR FBC Na, K, Cl, Creatinine (Enzymatic), Glucose, Urea, HBsAg, HCV Ab UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS
PRE - OPERATION PROFILE FBC ABO & Rh Typing APTT, PT & INR Na, K, Cl, Creatinine (Enzymatic), Glucose, LFT, Urea, HBsAg, HCV Ab UFEME	2 EDTA 1 SST 1 CITRATE 1 STERILE URINE CONTAINER	2.5 HOURS
PRE-OPERATION PROFILE + GSH FBC GSH APTT, PT & INR Na, K, CI, Creatinine (Enzymatic), Glucose, LFT, Urea, HBsAg, HCV Ab UFEME	2 EDTA 1 CITRATE 1 SST 1 STERILE URINE CONTAINER	2.5 HOURS

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
PRE - OPERATION PROFILE 2 FBC, ESR ABO & Rh Typing APTT, PT & INR Na, K, CI, Creatinine (Enzymatic), Glucose, Urea, HBsAg, HIV 1/2 Ag/Ab UFEME	2 EDTA 1 SST 1 CITRATE 1 STERILE URINE CONTAINER	2.5 HOURS
PROLONGED JAUNDICE SCREEN (PJS) Bilirubin (Conjugated & Unconjugated), LFT, TFT	2 PAED HEPARIN	2.5 HOURS
PROLONGED JAUNDICE SCREEN 2 FBC, Reticulocyte count Bilirubin (Conjugated & Unconjugated) TFT UFEME	1 PEAD EDTA 2 PEAD HEPARIN 1 URINE STERILE CONTAINER	2.5 HOURS
PROLONGED JAUNDICE SCREEN 3 (PJS3) LFT, Free T4, TSH	1 PAED HEPARIN	2.5 HOURS
PROLONGED JAUNDIC SCREEN 4 FBC Bilirubin (Conjugated & Unconjugated, LFT TFT	1 PEAD EDTA 2 PEAD HEPARIN	2.5 HOURS
RENAL PROFILE 1 Na, K, Cl, Albumin, Adjusted calcium, Calcium, Creatinine (Enzymatic), Glucose, Phosphate Inorganic, Urea, Uric Acid	1 SST	1.5 HOURS
RENAL PROFILE 2 Na, K, Cl, Creatinine (Enzymatic), Urea	1 SST	1.5 HOURS
STD PROFILE 1 HIV 1/2 Ag/Ab, Syphilis Chlamydia IgG & IgM, Herpes Simplex I&II IgG & IgM	2 SST	2.5 HOURS  3-5 WORKING DAYS (Chlamydia, Herpes Simplex)
STD PROFILE 3 HIV 1/2 Ag/Ab, Syphilis Chlamydia IgG, Herpes Simplex I&II IgG	2 SST	2.5 HOURS  3-5 WORKING DAYS (Chlamydia, Herpes Simplex)

PROFILE TEST	SPECIMEN REQUIREMENT	TURNAROUND TIME
SYNACTEN SUPRESSION TEST Cortisol 0-hour, 30 min, 60 min, 90 min, 120 min	1 SST (EACH INTERVAL)	2.5 HOURS
THALASSAEMIA STUDIES PROFILE FBC, Reticulocyte Count, PBF HB Electrophoresis Ferritin, Iron, TIBC, Transferrin Saturation	2 EDTA 1 SST	2.5 HOURS  1 WEEK (HB Electrophoresis)
THYROID PROFILE Free T3, Free T4, TSH	1 SST	2.5 HOURS
VIRUS-VECTOR SCREEN  Dengue IgM/IgG, Dengue NS1 Antigen Chikungunya Serology	1 EDTA 1 SST	1 HOUR
UVEITIS BASIC PROFILE 1 FBC, ESR CRP, Lipid Profile, Liver Function Test, Renal Profile 1, Rheumatic Factor, RPR UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS
UVEITIS BASIC PROFILE 1 FBC, ESR CRP, Lipid Profile, Liver Function Test, Renal Profile 1, Rheumatic Factor, RPR ANA, ANCA ACE, QuantiFERON TB UFEME	1 EDTA 1 SST 1 STERILE URINE CONTAINER	1.5 HOURS  1-2 WORKING DAYS (ANA & ANCA)  2 WEEKS (ACE & Q.TB)
24 HOURS URINE CREATININE CLEARANCE SERUM CREATININE 24 HOURS CREATININE CLEARANCE	1 SST 1 24 HOURS URINE CONTAINER	1.5 HOURS

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
5-HYDROXYINDOLE-ACETIC ACID (5HIAA)	24 HOURS URINE	24 HOURS URINE CONTAINER	14 WORKING DAYS	PATIENT REQUIREMENT:  If medically feasible, for 48 hours before specimen collection, patient should not take the acetaminophen or tryptophan containing supplements.  For 48 hours prior to, as well as during, the urine collection, the patient should limit the following to one serving of fruits, vegetables, nuts, caffeinated beverages or foods per day.  SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
17 HYDROXY PROGESTERONE	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
ABO & RH TYPING	PLASMA & PACKED CELL	1 EDTA	1 HOUR	-
ABSOLUTE EPSINOPHIL COUNT	WHOLE BLOOD	1 EDTA	1 HOUR	-
ACETAMINOPHEN (PARACETAMOL)	SERUM	1 SST	2 HOURS	-
ACETYLCHOLINE RECEPTOR ANTIBODY (AUSTRALIA)	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
ACETYLSALICYLIC ACID (ASPIRIN)	SERUM	1 SST	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ACID PHOSPHATASE	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
ACTIVATE PROTEIN C RESISTANCE (APC) / FACTOR V LEIDEN	PLASMA	1 SODIUM CITRATE	14 WORKING DAYS	SPECIMEN REQUIREMENT:  Specimen shall be collected on working day before 3 pm  MEDICAL DIAGNOSIS REQUIRED:  Indicate patient's anticoagulant therapy in order's remark
ACYLCARNITINE	DRIED BLOOD SPOTS	FILTER PAPER	5 WORKING DAYS	ACTION REQUIRED:     Contact the laboratory to request the container
ADENOSINE DEAMINASE	SERUM / CSF / BODY FLUID	1 SST / 1 BIJOU BOTTLE / 1 STERILE URINE CONTAINER	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
ADJUSTED CALCIUM	SERUM	1 SST	1 HOUR	-
ADRENOCORTICOTROPIC HORMONE (ACTH)	WHOLE BLOOD	1 EDTA	2 WORKING DAYS	-
ALBUMIN	SERUM	1 SST	1 HOUR	-
ALDOLASE	SERUM	1 SST	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
ALDOSTERONE	PLASMA	2 EDTA	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ALL SCREEN	WHOLE BLOOD / BONE MARROW ASPIRATE	2 EDTA	14 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ALP (ALKALINE PHOSPHATASE)	SERUM	1 SST	1 HOUR	-
ALLOGENIC	STEM CELL PRODUCT	N/A	1 WORKING DAY	SPECIMEN REQUIREMENT:  • Specimen shall send to lab immediately
ALPHA THALASSAEMIA GENOTYPING	FETUS Specimen: AMNIOTIC FLUID / CVS / POC WITHOUT FIX / FETAL BLOOD  INDIVIDUAL: BLOOD  NEWBORN: BLOOD	FETUS Specimen: 1 CONICAL TUBE / 1 STERILE CONTAINER	10 WORKING DAYS	PATIENT REQUIREMENT:  Gestation age (CVS): 10 - 12 weeks  Minimum gestation age (amniotic fluid): 15 weeks  Provide a copy of HbEp or previous thalassemia DNA test report of the individual or parents  DOCUMENT REQUIRED:  Consent form  SPECIMEN REQUIREMENT:  Fetal Specimen: Send with 3 mL maternal EDTA blood
ALPHA-1-ANTITRYPSIN	SERUM	1 SST	3 WORKING DAYS	-
ALPHA-FETOPROTEIN (AFP)	SERUM	1 SST	2 HOURS	-
ALT (ALANINE TRANSAMINASE)	SERUM	1 SST	1 HOUR	-
ALUMINIUM	SERUM	1 ROYAL BLUE TUBE	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
AMIKACIN	SERUM	1 SST	1 WORKING DAY	<ul> <li>INFORMATION REQUIRED:</li> <li>Last dosage</li> <li>Specimen collection time</li> </ul>
AMINO ACID CHROMATOGRAPHY	PLASMA	1 LITHIUM HEPARIN	15 WORKING DAYS	-
AMINO ACID CHROMATOGRAPHY - URINE	URINE	1 STERILE URINE CONTAINER	15 WORKING DAYS	ACTION REQUIRED:     Ordering doctor must call IMR MO for order
AML SCREEN	WHOLE BLOOD / BONE MARROW ASPIRATE	2 EDTA	14 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
AMMONIA	PLASMA	1 LITHIUM HEPARIN	1 WORKING DAY	-
AMOEBIASIS ANTIBODY	WHOLE BLOOD / SERUM	1 EDTA / 1 RED PLAIN TUBE	5 WORKING DAYS	-
AMOXICILLIN	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
AMPHETAMINES (SYABU)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
AMPHETAMINES TYPE SUBSTANCE SCREEN	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
AMYLASE	SERUM	1 SST	1 HOUR	-
AMYLASE (FLUID)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
ANCA	SERUM	1 SST	2 WORKING DAYS	BATCH RUN: MONDAY & THURSDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ANDROSTENEDIONE	SERUM	1 SST	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
ANGIOTENSIN CONVERTING ENZYMES (ACE)	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
ANTI DIURETIC HORMONE (ADH)	PLASMA	1 EDTA	14 WORKING DAYS	PATIENT REQUIREMENT:  • Patient shall fast and thirst for at least 8 hours  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
ANTI DNASE B	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
ANTI ds-DNA ANTIBODY	SERUM	1 SST	1 WORKING DAY	BATCH RUN: WEDNESDAY
ANTI GANGLIOSIDE MONOSIALIC ACID (ANTI GM1)	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	4 WORKING DAYS	BATCH RUN: FRIDAY
ANTI MOG (MYELIN OLIGODENDROCYTE GLYCOPROTEIN)	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	4 WORKING DAYS	BATCH RUN: WEDNESDAY
ANTI MOG (MYELIN OLIGODENDROCYTE GLYCOPROTEIN) - MAYO CLINIC	SERUM	1 SST	14 WORKING DAYS	PATIENT REQUIREMENT:     For optimal antibody detection, specimen collection should occur prior to initiation of immunosuppressant medication.  SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ANTI MOG (MYELIN OLIGODENDROCYTE GLYCOPROTEIN) - OXFORD	SERUM AND / OR CSF	1 SST AND / OR 1 BIJOU BOTTLE	20 WORKING DAYS	ACTION REQUIRED:     Notify the laboratory if sending the specimen along with a CSF specimen.
ANTI MULLERIAN HORMONE (AMH)	SERUM	1 SST	1 DAY	-
ANTI NUCLEAR ANTIBODY (ANA)	SERUM	1 SST	2 WORKING DAYS	BATCH RUN: MONDAY & THURSDAY
ANTI SACCHAROMYCES CEREVISIE ANTIBODY (ASCA)	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
ANTI SMOOTH MUSCLES	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: WEDNESDAY
ANTIBODY IDENTIFICATION	WHOLE BLOOD	4 EDTA	22 WORKING DAYS	CALL THE LABORATORY TO OBTAIN PRELIMINARY RESULTS (IF AVAILABLE).
ANTIBODY SCREEN	WHOLE BLOOD	1 EDTA	1 HOUR	-
ANTI-CARDIOLIPIN ANTIBODY	SERUM	1 SST	7 WORKING DAYS	BATCH RUN: TUESDAY
ANTI-CYCLIC CITRULLINATED PEPTIDE (ANTI-CCP)	SERUM	1 SST	1 DAY	-
ANTI-ENA ANTIBODIES	SERUM	1 SST	1 WORKING DAY	BATCH RUN: SATURDAY
ANTI-HISTONE ANTIBODY	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
ANTI-MUSK	SERUM	1 SST	44 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ANTI-MUSK [SMC]	SERUM	1 SST	1 WORKING DAY	BATCH RUN: WEDNESDAY
ANTI-PHOSPHOLIPASE-A2-RECEPTOR (PLA2R)	SERUM	1 SST	3 WORKING DAYS	-
ANTITHROMBIN III	PLASMA	1 SODIUM CITRATE	1 WEEK	
APOLIPOPROTEIN A	SERUM	1 SST	3 WORKING DAYS	¥
APOLIPOPROTEIN B	SERUM	1 SST	3 WORKING DAYS	-
APT DOWNEY TEST	VOMITUS / GASTRIC CONTENT / NASOGASTRIC ASPIRATE / FAECES	1 STERILE CONTAINER	1 HOUR	-
APTT	PLASMA	1 SODIUM CITRATE	1 HOUR	-
AQUAPORIN 4	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	4 WORKING DAYS	BATCH RUN: WEDNESDAY
AQUAPORIN 4 - MAYO CLINIC	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
AQUAPORIN 4 - OXFORD	SERUM	1 SST	22 WORKING DAYS	-
ARSENIC	WHOLE BLOOD	1 ROYAL BLUE	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ARSENIC - URINE	URINE	1 STERILE URINE CONTAINER	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
ASOT	SERUM	1 SST	1 HOUR	-
ASPERGILLUS ANTIBODY	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
AST (ASPARTATE AMINOTRANSFERASE)	SERUM	1 SST	1 HOUR	-
AUTOLOGOUS	STEM CELL PRODUCT	N/A	-	ACTION REQUIRED:     Specimens must be sent to the laboratory immediately.
B2 TRANSFERRIN	NASAL / OTIC / WOUND / OTHER BODY FLUID	1 STERILE CONTAINER	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
BARBITURATES	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
BARTONELLA IGM & IGG	SERUM	1 SST	7 WORKING DAYS	-
BCR-ABL	WHOLE BLOOD / BONE MARROW ASPIRATE	2 EDTA	21 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
BENCE JONES PROTEIN	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	SPECIMEN REQUIREMENT:  • Morning specimen preferred
BENZODIAZEPINE	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
BETA - AMYLOID AGGREGATION LEVEL	PLASMA	2 EDTA	22 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
BETA - CAROTENE	SERUM	1 SST	15 WORKING DAYS	PATIENT REQUIREMENT:  Patient must fast overnight Patient must abstain from alcohol 24 hours before collection  SPECIMEN REQUIREMENT: Specimen should be avoided from light
BETA HCG	SERUM	1 SST	1 HOUR	-
BETA-2 GLYCOPROTEIN	SERUM	1 SST	7 WORKING DAYS	BATCH RUN: TUESDAY
BETA-2 MICROGLOBULIN	SERUM	1 SST	1 WORKING DAY	-
BETA-THALASSEMIA GENOTYPING	• FETUS Specimen:  20ML AMNIOTIC FLUID /  30MG CVS /  1ML FETAL BLOOD /  30 MG POC WITHOUT FIX  • INDIVIDUAL:  3 ML BLOOD  • NEWBORN:  1 ML BLOOD	1 STERILE FLUID CONTAINER / 1 - 2 EDTA	10 WORKING DAYS	PATIENT REQUIREMENT: Gestation age (CVS): 10 - 12 weeks Minimum gestation age (Amniotic fluid): 15 weeks Provide a copy of HbEp or previous thalassaemia DNA test report of the individual or parents  DOCUMENT REQUIRED: Consent form  SPECIMEN REQUIREMENT: Fetal specimen: Send with 3 mL maternal EDTA blood
BILE ACID	SERUM	1 SST	3 WORKING DAYS	PATIENT REQUIREMENT:     Fasting specimen preferred

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
BILIRUBIN (CONJUGATED & UNCONJUGATED)	SERUM	1 SST	1 HOUR	-
BILIRUBIN TOTAL	SERUM	1 SST	1 HOUR	-
BILIRUBIN TOTAL (FLUID)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
BILIRUBIN TOTAL (BILISTICK)	WHOLE BLOOD	1 CAPILLARY TUBE	15 MINS	-
BK & JC VIRAL LOAD	SERUM / WHOLE BLOOD / CSF / URINE	1 SST / 1 EDTA / 1 BIJOU BOTTLE / 1 STERILE URINE CONTAINER	2 WORKING DAYS	-
BLOOD ALCOHOL	WHOLE BLOOD	1 FLUORIDE	2 WORKING DAYS	-
BLOOD CHROMIUM	WHOLE BLOOD	1 ROYAL BLUE	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
BLOOD CULTURE: AEROBIC	WHOLE BLOOD / STERILE FLUID	BLOOD CULTURE BOTTLE	5 WORKING DAYS	ACTION REQUIRED:     Mention the specimen type if a non-blood specimen is sent.
BLOOD CULTURE: ANAEROBIC	WHOLE BLOOD	BLOOD CULTURE BOTTLE	5 WORKING DAYS	ACTION REQUIRED:     Mention the specimen type if a non-blood specimen is sent.

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
BLOOD CULTURE: PAEDIATRICS	WHOLE BLOOD	BLOOD CULTURE BOTTLE (min 1mL)	5 WORKING DAYS	ACTION REQUIRED:     Mention the specimen type if a non-blood specimen is sent.
BONE MARROW ASPIRATE	BONE MARROW ASPIRATE	1 EDTA	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory to make an appointment during working hours
BONE MARROW ASPIRATE & TREPHINE	BONE MARROW ASPIRATE	1 EDTA	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory to make an appointment during working hours
BORDETELLA PERTUSSIS IGA	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
BORDETELLA PERTUSSIS IGG	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
BRCA I & II	HPE / WHOLE BLOOD	TISSUE / BLOCK / 2 EDTA	15 WORKING DAYS	SPECIMEN REQUIREMENT: Somatic: FFPE block or 15 unstained slides (10um, >5mm² sections) with at least 30% tumor cellularity & 1 H&E slides  Germline: 2 EDTA (whole blood)
BRUCELLA AB	SERUM	1 SST	10 WORKING DAYS	-
BRUCELLA AGGLUTINATION	SERUM	1 SST	5 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
BRUCELLA PCR	EDTA / CSF	1 EDTA / 1 BIJOU BOTTLE	5 WORKING DAYS	-
C1 ESTERANCE INHIBITOR	SERUM	1 SST	14 WORKING DAYS	PATIENT REQUIREMENT:  • Fasting is preferred  ACTION REQUIRED:  • Specimen shall send to lab immediately  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
CA - 125	SERUM	1 SST	2 HOURS	-
CA - 153	SERUM	1 SST	2 HOURS	-
CA - 199	SERUM	1 SST	2 HOURS	-
CALCITONIN	SERUM	1 SST	14 WORKING DAYS	PATIENT REQUIREMENT:  Patient should not take multivitamins or dietary supplements (e.g. hair, skin and nail supplements) containing biotin (vitamin b7) before 12 hours of Specimen collection.  SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CALCIUM	SERUM	1 SST	1 HOUR	-
CALPROTECTIN	STOOL	1 STERILE STOOL CONTAINER	1 WORKING DAY	-
CANNABINOIDS (MARIJUANA)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
CARBAMAZEPINE (TEGRETOL)	SERUM	1 SST	1 WORKING DAY	-
CARBAPENEM RESISTANT PCR	MICROBIAL ISOLATE	AGAR PLATE / NUTRIENT SLANT	14 WORKING DAYS	-
CARNITINE	PLASMA	1 LITHIUM HEPARIN	7 WORKING DAYS	-
CATECHOLAMINES	24 HOURS URINE	24 HOURS URINE CONTAINER	14 WORKING DAYS	ACTION REQUIRED:     Call the laboratory 15 minutes before collecting the container
CD3 ENUMERATION	STEMCELL	1 EDTA	3 - 5 HOURS	No individual order for peripheral blood specimen  ACTION REQUIRED:  Ordering doctor must sign on test request form  Specimen shall send to the laboratory immediately
CD34 ENUMERATION	WHOLE BLOOD	1 EDTA	3 - 5 HOURS	ACTION REQUIRED:     Ordering doctor must sign on test request form     Specimen shall send to the laboratory immediately

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CD4	WHOLE BLOOD	1 EDTA	2 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working days only  BATCH RUN:  TUESDAY & FRIDAY
CD4 AND CD8	WHOLE BLOOD	1 EDTA	2 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working days only  BATCH RUN:  TUESDAY & FRIDAY
CD8	WHOLE BLOOD	1 EDTA	2 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working days only  BATCH RUN:  TUESDAY & FRIDAY
CEA	SERUM	1 SST	2 HOURS	-
CERULOPLASMIN	SERUM	1 SST	1 WORKING DAY	-
CHIKUGUNYA SEROLOGY	SERUM	1 SST	1 HOUR	-
CHIKUNGUNYA PCR	WHOLE BLOOD / SERUM	2 EDTA / 1 SST	3 WORKING DAYS	-
CHIMERISM ANALYSIS (STR)	WHOLE BLOOD	1 EDTA	30 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CHLAMYDIA AND GONORRHOEAE PCR	GENITAL SWAB / URINE	1 DRY SWAB / 1 STERILE URINE CONTAINER	1 WORKING DAY	-
CHLAMYDIA ANTIGEN	NASOPHARYNGEAL ASPIRATE / BAL / (CERVICAL / GENITAL / CONJUCTIVAL) SMEAR / SCRAPPING	STERILE CONTAINER / SMEAR / SCRAPING	3 WORKING DAYS	-
CHLAMYDIA IGG	SERUM	1 SST	3 WORKING DAYS	-
CHLAMYDIA IGM	SERUM	1 SST	3 WORKING DAYS	-
CHLORIDE	SERUM	1 SST	1 HOUR	-
CHOLESTEROL (HDL)	SERUM	1 SST	1 HOUR	-
CHOLESTEROL (TOTAL)	SERUM	1 SST	1 HOUR	-
CHOLINESTERASE	SERUM	1 SST	1 WORKING DAY	-
CHROMOGRANIN A	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
CHROMOSOMAL MICROARRAY ASSAY (CMA)	AMNIOTIC FLUID & WHOLE BLOOD	1 CONICAL TUBE & 2 EDTA	14 WORKUNG DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CK (CREATINE KINASE)	SERUM	1 SST	1 HOUR	-
СКМВ	SERUM	1 SST	1 HOUR	-
CLOSTRIDIUM DIFFICILE CULTURE	STOOL	1 STERILE STOOL CONTAINER	5 WORKING DAYS	-
CLOSTRIDIUM DIFICILE TOXIN	STOOL	1 STERILE STOOL CONTAINER	3 HOURS	-
CMV IGG	SERUM	1 SST	3 WORKING DAYS	-
CMV IGM	SERUM	1 SST	3 WORKING DAYS	-
CMV VIRAL LOAD	WHOLE BLOOD / URINE / EYE VITREOUS FLUID / TISSUE BIOPSY / AMNIOTIC FLUID / BAL / CSF / SALIVA / SEMEN / DRY OR WET SWAB	1 EDTA / 1 STERILE CONTAINER	2 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CN GENOME	FETUS Specimen:  20ML AMNIOTIC FLUID / 30MG CVS / 30 MG POC WITHOUT FIX  INDIVIDUAL:  3 ML BLOOD / 5 DRIED BLOOS SPOT / BUCCAL SWAB  NEWBORN:  1 ML BLOOD / DRIED BLOOD SPOTS	1 STERILE FLUID CONTAINER / 1 STERILE CONTAINER WITH SALINE / 1 - 2 EDTA / DRIED BLOOD SPOT CARD	18 WORKING DAYS	PATIENT REQUIREMENT:  • Gestation age (CVS): 10 - 12 weeks  • Minimum gestation age (Amniotic fluid): 15 weeks  DOCUMENT REQUIRED:  • Consent form  SPECIMEN REQUIREMENT:  • Fetal Specimen: Send with 3mL maternal EDTA blood
COCAINE	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
CODEIN	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
COELIAC DISEASE SCREEN	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
COMPLEMENT C3	SERUM	1 SST	1 HOUR	-
COMPLEMENT C4	SERUM	1 SST	1 HOUR	-
COPPER	SERUM	1 SST TUBE	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CORTISOL - 24 HOUR URINE	24 HOURS URINE	24 HOURS URINE CONTAINER	2 HOURS	-
CORTISOL 0 HOUR	SERUM	1 SST	1 HOUR	-
CORTISOL 30 MINUTES	SERUM	1 SST	1 HOUR	•
CORTISOL 60 MINUTES	SERUM	1 SST	1 HOUR	-
CORTISOL 90 MINUTES	SERUM	1 SST	1 HOUR	-
CORTISOL 120 MINUTES	SERUM	1 SST	1 HOUR	-
CORTISOL SINGLE	SERUM	1 SST	1 HOUR	•
COVID-19 (SARS-COV-2) IGM & IGG	SERUM	1 SST	1 WORKING DAY	-
COVID-19 [SARS-CoV-2] NEUTRALIZING AB	SERUM	1 SST	2 WORKING DAYS	-
COVID-19 ANTIGEN	NASAL SWAB	DRY SWAB	3 HOURS	-
COXSACKIE B VIRUS	RESPIRATORY / BODY FLUID / TISSUE	SWAB WITH VTM / 1 STERILE CONTAINER WITH SALINE	28 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
C-PEPTIDE	SERUM	1 SST	1 WORKING DAY	-
C-REACTIVE PROTEIN (CRP)	SERUM	1 SST	1 HOUR	-
CREATININE	SERUM	1 SST	1 HOUR	-
CRI-DU CHAT SYNDROME (5p15)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
CROSSMATCH [PACKED CELL IRRADIATED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	SPECIMEN REQUIREMENT (PATIENT'S AGE):  4-month-old - 12-year-old:  • 6ml EDTA x 1 is preferred  • If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:  • 6 mL EDTA X 1

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CROSSMATCH [PACKED CELLS LEUCODEPLETED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	SPECIMEN REQUIREMENT (PATIENT'S AGE):  4-month-old - 12-year-old:  • 6ml EDTA x 1 is preferred  • If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:  • 6 mL EDTA X 1
CROSSMATCH [PACKED CELLS]	PLASMA & PACKED CELL	1 EDTA	3 HOURS (ROUTINE) 1 HOUR (URGENT)	SPECIMEN REQUIREMENT (PATIENT'S AGE):  4-month-old - 12-year-old:  6 ml EDTA x 1 is preferred  If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:  6 mL EDTA X 1

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CROSSMATCH [PEDI-PACK]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	SPECIMEN REQUIREMENT (PATIENT'S AGE):  ≤ 4-month-old:  • Paediatric 0.5ml EDTA x 1 from baby &  • 6ml EDTA x 1 from mother  4-month-old - 12-year-old:  • 6ml EDTA x 1 is preferred  • If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:  • 6 mL EDTA X 1  • Provide volume required in remark
CROSSMATCH [WHOLE BLOOD]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	SPECIMEN REQUIREMENT (PATIENT'S AGE):  4-month-old - 12-year-old:  • 6ml EDTA x 1 is preferred  • If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:  • 6 mL EDTA X 1

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CRYOGLOBULIN	SERUM	1 SST	3 WORKING DAYS	PATIENT REQUIREMENT:     Overnight fasting is required      ACTION REQUIRED:     Call the laboratory to make appointment before test order
CRYOPRECIPITATE	WHOLE BLOOD	1 EDTA	45 MINUTES	-
CRYPTOCCOCUS ANTIGEN	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	1 WORKING DAY	-
CSF 14-3-3 PROTEIN	CSF	SPECIAL KIT	20 WORKING DAYS	ACTION REQUIRED:     Call the laboratory 2 working days before procedure to get special kit
CULTURE & SENSITIVITY (GONOCOCCI)	SWAB/URINE	1 STERILE URINE CONTAINER/ CHARCOAL SWAB	5 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR CATHETER TIP	CATHETER TIP	TIP, CATHETER	3 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR HIGH VAGINAL/CERVICAL SWAB	HIGH VAGINAL/CERVICAL SWAB	CHARCOAL SWAB	5 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR RESPIRATORY SPECIMEN	RESPIRATORY SPECIMEN	STERILE CONTAINER	3 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR SEMEN	SEMEN	STERILE CONTAINER	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
CULTURE AND SENSITIVITY FOR SWAB / WOUND / PUS / TISSUE / FLUID	SWAB / WOUND / PUS / TISSUE / FLUID	STERILE CONTAINER/ CHARCOAL SWAB	3 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR URETHRAL	URETHRAL SWAB	CHARCOAL SWAB	5 WORKING DAYS	-
CULTURE AND SENSITIVITY FOR URINE / CATHETER	URINE	1 STERILE URINE CONTAINER	3 WORKING DAYS	-
CULTURE AND SENSITIVTY FOR CEREBROSPINAL FLUID	CSF	1 BIJOU BOTTLE	3 WORKING DAYS	-
CULTURE FOR FUNGUS	SWAB / WOUND / PUS / TISSUE / FLUID	STERILE CONTAINER/ SWAB	10 WORKING DAYS	-
CYCLOSPORIN	WHOLE BLOOD	1 EDTA	1 WORKING DAY	-
CYFRA 21-1	SERUM	1 SST	1 WORKING DAY	-
D-DIMER	WHOLE BLOOD	1 LITHIUM HEPARIN	1 HOUR	-
DEHYDROXY EPIANDOSTERNE SULPHATE (DHEAS)	SERUM	1 SST	1 WORKING DAY	-
DENGUE IGM/IGG	WHOLE BLOOD	1 EDTA	1 HOUR	-
DENGUE NS1 ANTIGEN	WHOLE BLOOD	1 EDTA	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
DHT (DIHYDROTESTOSTERONE)	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
DIABETES AUTO-AB (GAD AND IA-2)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: SATURDAY
DIASTASE (AMYLASE)	BODY FLUID	1 STERILE URINE CONTAINER	1 HOUR	-
DIGEORGE SYNDROME (N25 22Q11.2)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:     Specimen shall be collected on working hours only
DIGOXIN	SERUM	1 SST	1 WORKING DAY	-
DIPHTHERIA	THROAT SWAB / NASOPHARYNGEAL SWAB / NASOPHARYNGEAL ASPIRATE / PSEUDOMEMBRANE EXUDATES / POSITIVE ISOLATE	1 SWAB WITH AMIES CLEAR / 1 STERILE CONTAINER / 1 BLOOD AGAR	7 WORKING DAYS	ACTION REQUIRED:  • Call the laboratory to get specific swab
DIRECT BILIRUBIN (CONJUGATED)	SERUM	1 SST	1 HOUR	-
DIRECT COOMB'S TEST	WHOLE BLOOD	1 EDTA	2 HOURS	-
DIRECT SMEAR FOR ACID FAST BACILLI (AFB)	SWAB/ URINE/ TISSUE/ FLUID	1 STERILE CONTAINER/ 1 CHARCOAL SWAB	2 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
DIRECT SMEAR FOR FUNGUS	SWAB/ URINE/ TISSUE/ FLUID	1 STERILE CONTAINER/ 1CHARCOAL SWAB	2 HOURS	-
DIRECT SMEAR FOR GONOCOCCI	SWAB/URINE	1 STERILE URINE CONTAINER/ CHARCOAL SWAB	2 HOURS	-
DIRECT SMEAR FOR GRAM STAIN	SWAB/ URINE/ TISSUE/ FLUID	1 STERILE CONTAINER/ 1 CHARCOAL SWAB	2 HOURS	-
DIRECT SMEAR FOR TRICHOMONAS, GONOCOCCI & MONILIA	SWAB/URINE	1 STERILE URINE CONTAINER/ CHARCOAL SWAB	2 HOURS	-
DNA PATERNITY TEST	FETUS:  20ML AMNIOTIC FLUID /  30MG CVS /  30 MG POC WITHOUT FIX /  1ML FETAL BLOOD	FETUS: CONICAL TUBE / STERILE CONTAINER / EDTA		PATIENT REQUIREMENT:  Gestation age (CVS): 10 - 12 weeks  Minimum gestation age (Amniotic fluid): 15 weeks
DNA PATERNITY TEST - ADD ON (FOR TWINS ONLY)	INDIVIDUAL: 3 ML BLOOD / BUCCAL SWAB	INDIVIDUAL: EDTA / SWAB	5 WORKING DAYS	DOCUMENT REQUIRED:  Consent form
	NEWBORN: 1 ML BLOOD	NEWBORN: EDTA		

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
DRUG CONFIRMATORY (GCMS) TESTING	URINE	1 STERILE URINE CONTAINER	7 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY
DRY COPPER WEIGHT	2MG LIVER TISSUE	METAL-FREE SPECIMEN VIAL / PARAFFIN BLOCK (WITH NO MORE THAN 1 OR 2 CUTS PREVIOUSLY MADE)	14 WORKING DAYS	ACTION REQUIRED:  Call the laboratory before test order  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
DUCHENNE MUSCULAR DYSTROPHY / BECKER MUSCULAR DYSTROPHY (DMD)	WHOLE BLOOD	1 EDTA	90 WORKING DAYS	-
EBV EA IGA (NPC MARKER)	SERUM	1 SST	5 WORKING DAYS	-
EBV PCR	WHOLE BLOOD / CSF / BAL	2 EDTA / 1 BIJOU BOTTLE / 1 STERILE CONTAINER	2 WORKING DAYS	-
EBV VCA IGA (NPC SCREEN)	SERUM	1 SST	3 WORKING DAYS	-
EBV VCA IGG	SERUM	1 SST	3 WORKING DAYS	-
EBV VCA IGM	SERUM	1 SST	3 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
EFFUSION FLUID FEME	EFFUSION FLUID	FLUID	2 HOURS	-
EGFR PCR	BLOCK/ SLIDE	BLOCK/SLIDE	3 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE Block / 10 unstained slides
EGFR T790M MUTATION TESTING	WHOLE BLOOD	STRECK TUBE	7 WORKING DAYS	-
ELECTROLYTES	SERUM	1 SST	1 HOUR	-
ENDOMYSIAL ANTIBODY [IGA]	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
ENTAMOEBA HISTOLYTICA AB	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
ENTERO VIRUS SEROLOGY	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
ERYTHROPOIETIN	SERUM	1 SST	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
ESR	WHOLE BLOOD	1 EDTA	1 HOUR	-
ESTRADIOL (E2)	SERUM	1 SST	2 HOURS	-
ESTRIOL E3	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
FACTOR IX ASSAY	PLASMA	2 SODIUM CITRATES	7 WORKING DAYS	BATCH RUN: WEDNESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
FACTOR VII	PLASMA	2 SODIUM CITRATES	7 WORKING DAYS	-
FACTOR VIII ASSAY	PLASMA	2 SODIUM CITRATES	7 WORKING DAYS	BATCH RUN: WEDNESDAY
FAECAL OCCULT BLOOD [FOB]	STOOL	1 STERILE STOOL CONTAINER	1 HOUR	-
FAECAL PARASITOLOGY	STOOL	1 STERILE STOOL CONTAINER	1 WORKING DAY	-
FAECES FEME	STOOL	1 STERILE STOOL CONTAINER	24 HOURS	-
FAT GLOBULES	STOOL	1 STERILE STOOL CONTAINER	1 WORKING DAY	-
FERRITIN	SERUM	1 SST	2 HOURS	-
FIBRINOGEN	PLASMA	1 SODIUM CITRATE	1 HOUR	-
FILARIASIS IGG	SERUM	1 SST	1 WORKING DAY	-
FIRST TRIMESTER SCREENING	SERUM	1 SST	1 WORKING DAY	ACTION REQUIRED:  Ordering doctor must fill up test request form
FLOW CYTOMETRY	BONE MARROW ASPIRATE / WHOLE BLOOD	1 EDTA	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory to make appointment before order

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
FLP1L1 - PDGFRA	BONE MARROW ASPIRATE	1 LITHIUM HEPARIN	21 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
FLP1L1 - PDGFRB	BONE MARROW ASPIRATE	1 LITHIUM HEPARIN	21 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
FLT-3-ITD/D835 MUTATION	BONE MARROW ASPIRATE / WHOLE BLOOD	1 EDTA	30 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
FLUORESCENT TREPONEMAL ANTIBODY (FTA)	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
FOLIC ACID	SERUM	1 SST	2 HOURS	-
FRACTIONAL EXCRETION OF URIC ACID	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
FREE T3	SERUM	1 SST	2 HOURS	-
FREE T4	SERUM	1 SST	2 HOURS	-
FRESH FROZEN PLASMA [FFP IRRADIATED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
FRESH FROZEN PLASMA [FFP]	PLASMA & PACKED CELL	1 EDTA	45 MINUTES	-
FRUCTOSAMINE	SERUM	1 SST	5 WORKING DAYS	WEEKLY BACTH RUN TEST
FSH	SERUM	1 SST	2 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
FULL BLOOD COUNT (FBC)	WHOLE BLOOD	1 EDTA	1 HOUR	-
ABO GENOTYPING	WHOLE BLOOD	3 EDTA	20 WORKING DAYS	-
G6PD GENOTYPING	WHOLE BLOOD DRIED BLOOD SPOT / BUCCAL SWAB / SALIVA	2 EDTA / 1 DBS CARD / 1 SWAB / 1 SALIVA KIT	14 WORKING DAYS	ACTION REQUIRED:     Call the laboratory to get specific container
G6PD SCREEN	WHOLE BLOOD	1 EDTA	1 HOUR	-
GAD AB	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
GALACTOMANNAN TEST	SERUM	1 SST	1 WORKING DAY	-
GALACTOMANNAN TEST (FOR BAL)	BAL	1 STERILE CONTAINER	1 WORKING DAY	-
GALACTOSEMIA	DRIED BLOOD SPOT	FILTER PAPER	7 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
GASTRIN	SERUM	1 SST	14 WORKING DAYS	PATIENT REQUIREMENT:  8 hours fasting is required  No intake of multivitamin or dietary supplements contain biotin 12 hours before blood sampling  No intake of any drugs that interfere with gastrointestinal motility at least 2 weeks before blood sampling  SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
GENETIC HAEMOCHROMATOSIS	WHOLE BLOOD	2 EDTA	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
GENTAMICIN	SERUM	1 SST	1 WORKING DAY	-
GGT (GAMMA GLUTAMYL TRANSFERASE)	SERUM	1 SST	1 HOUR	-
GIST MUTATION (KIT AND PDGFRA)	BLOCK/SLIDE	BLOCK/SLIDE	10 WORKING DAYS	-
GLIADIN ANTIBODY	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
GLOMERULAR BASE MEMBRANE	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: FRIDAY
GLUCOSE	SERUM	1 SST	1 HOUR	-
GLUCOSE (FLUID)	FLUID	STERILE CONTAINER	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
GROUP, SCREEN AND HOLD [GSH]	PLASMA & PACKED CELL	1 EDTA (6mL)	1 HOUR	SPECIMEN REQUIREMENT (PATIENT'S AGE):  ≤ 4-month-old:  • Paediatric 0.5ml EDTA x 1 from baby &  • 6ml EDTA x 1 from mother  4-month-old - 12-year-old:  • 6ml EDTA x 1 is preferred  • If not Feasible, minimum of 2ml EDTA x 1  ≥13-year-old:C  • 6 mL EDTA X 1
GROWTH HORMONE	SERUM	1 SST	1 WORKING DAY	-
H. PYLORI	SERUM	1 SST	1 HOUR	-
HAEMOGLOBIN (HB)	WHOLE BLOOD	1 EDTA	1 HOUR	-
HAEMOGLOBIN A1C (HBA1C)	WHOLE BLOOD	1 EDTA	1 HOUR	-
HAPTOGLOBIN	SERUM	1 SST	3 WORKING DAYS	-
HAV IGG	SERUM	1 SST	2 HOURS	-
HAV IGM	SERUM	1 SST	2 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HEPATITIS B CORE ANTIBODY (HBC IGG)	SERUM	1 SST	1 WORKING DAY	-
HBC IGM	SERUM	1 SST	1 WORKING DAY	-
HBE AB	SERUM	1 SST	2 HOURS	-
HBE AG	SERUM	1 SST	2 HOURS	-
HBS AB	SERUM	1 SST	2 HOURS	-
HBS AG	SERUM	1 SST	2 HOURS	-
HBS AG QUANTIFICATION	SERUM	1 SST	1 WORKING DAY	-
HBV DNA VIRAL LOAD	PLASMA	3 EDTA	5 WORKING DAYS	-
HCV AB	SERUM	1 SST	2 HOURS	-
HCV GENOTYPING	PLASMA / SERUM	2 EDTA / 1 SST	14 WORKING DAYS	-
HCV RNA VIRAL LOAD (QUANTITATIVE)	WHOLE BLOOD	3 EDTA	1 WORKING DAY	-
HEINZ BODIES	WHOLE BLOOD	1 EDTA	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HELICOBACTER PYLORI CULTURE AND SENSITIVITY	GASTRIC BIOPSY	SPECIAL TUBE (IN ICE BOX)	20 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only  ACTION REQUIRED:  • Call laboratory to get container
HEMATOLOGY IHC STAIN	BONE MARROW	SLIDE	3 WORKING DAYS	-
HEMOGLOBIN PIGMENT (PORPHYRIN)	URINE	1 STERILE URINE CONTAINER	14 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be avoided from light
HEMOSIDERIN	URINE	1 STERILE URINE CONTAINER	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
HEPATITIS D ANTIBODY	SERUM	1 SST	12 WORKING DAYS	-
HEPATITIS E ANTIBODY	SERUM	1 SST	3 WORKING DAYS	-
HERPES SIMPLEX I&II IGG	SERUM	1 SST	3 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
HERPES SIMPLEX I&II IGM	SERUM	1 SST	3 WORKING DAYS	<b>BATCH RUN</b> : TUESDAY & FRIDAY
HERPES SIMPLEX TYPE I IGG	SERUM	1 SST	3 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
HERPES SIMPLEX TYPE I IGM	SERUM	1 SST	3 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
HERPES SIMPLEX TYPE II IGG	SERUM	1 SST	3 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HERPES SIMPLEX TYPE II IGM	SERUM	1 SST	3 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
HERPES SIMPLEX VIRUS - PCR	WHOLE BLOOD / PLASMA / URINE / CSF / GENITAL / VESICULAR SWAB	2 EDTA / 1 STERILE URINE CONTAINER / 1 SWAB	3 WORKING DAYS	-
HIGH SENSITIVITY C-REACTIVE PROTEIN (HS-CRP)	SERUM	1 SST	1 HOUR	-
HIGH SENSITIVITY TROPONIN I	SERUM	1 SST	1.5 HOURS	-
HISTOPLASMA SEROLOGY	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
HIV 1/2 AG/AB	SERUM	1 SST	2 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HIV RESISTANCE	WHOLE BLOOD	1 EDTA	40 WORKING DAYS	PATIENT REQUIREMENT: Patient's recent viral load should be > 1000 cp/Ml  ACTION REQUIRED: Inform the laboratory to proceed whether (protease and reverse transcriptase) test or integrase test
HIV VIRAL LOAD	WHOLE BLOOD	3 EDTA	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
HLA ANTIBODY IDENTIFICATION	SERUM	2 SST	7 WORKING DAYS	BATCH RUN: THURSDAY
HLA B*1502 TYPING	WHOLE BLOOD	2 EDTA	7 WORKING DAYS	BATCH RUN: THURSDAY
HLA B-27	WHOLE BLOOD	2 EDTA	7 WORKING DAYS	BATCH RUN: THURSDAY
HLA TYPING CLASS I HIGH RESOLUTION	WHOLE BLOOD	2 EDTA	7 WORKING DAYS	BATCH RUN: THURSDAY
HLA TYPING CLASS I LOW OR MEDIUM	WHOLE BLOOD	1 ACD / 5 EDTA	7 WORKING DAYS	-
HLA TYPING CLASS I/II	WHOLE BLOOD	3 EDTA	7 WORKING DAYS	BATCH RUN: THURSDAY
HLA TYPING CLASS I/II HIGH RESOLUTION (HSA)	WHOLE BLOOD	1 ACD / 5 EDTA	7 WORKING DAYS	-
HLA TYPING CLASS II HIGH RESOLUTION	WHOLE BLOOD	3 EDTA	7 WORKING DAYS	BATCH RUN: THURSDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HLA TYPING CLASS II LOW OR MEDIUM	WHOLE BLOOD	1 ACD / 5 EDTA	7 WORKING DAYS	-
HLA TYPING HIGH RESOLUTION (5 LOCI)	WHOLE BLOOD	2 ROYAL BLUE TUBES	25 WORKUNG DAYS	-
HLA TYPING HIGH RESOLUTION (6 LOCI)	WHOLE BLOOD	2 ROYAL BLUE TUBES	25 WORKUNG DAYS	-
HLA-TYPING (HIGH RESOLUTION) - NGS	WHOLE BLOOD	2 EDTA	10 WORKING DAYS	BATCH RUN: THURSDAY
HOMOCYSTEINE	SERUM	1 SST	1 WORKING DAY	-
HTLV 1 & 2 ANTIBODIES	SERUM	1 SST	3 WORKING DAYS	-
HUMAN EPIDIDYMIS PROTEIN 4 (HE 4)	SERUM	1 SST	1 WORKING DAY	-
HUNGTINGTON DISEASE (HTT)	WHOLE BLOOD	2 EDTA	15 WORKING DAYS	DOCUMENT REQUIRED:  • Consent form
IDH1/2	FFPE TISSUE	BLOCK/SLIDE	7 WORKING DAYS	-
IEM SCREEN (INBORN ERROR OF METABOLISM)	DRIED BLOOD SPOT	FILTER PAPER	5 WORKING DAYS	-
IMMEDIATE SPIN CROSSMATCH PACKED CELL (ISXM)	PLASMA & PACKED CELL	1 EDTA	30 MINS	-
IMMUNOFIXATION OF PARAPROTEINS	SERUM	1 SST	10 WORKING DAYS	-
IMMUNOGLOBULIN E (IGE)	SERUM	1 SST	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
IMMUNOGLOBULIN IGA	SERUM	1 SST	1 WORKING DAY	-
IMMUNOGLOBULIN IGG	SERUM	1 SST	1 WORKING DAY	-
IMMUNOGLOBULIN IGG, IGM, IGA	SERUM	1 SST	1 WORKING DAY	-
IMMUNOGLOBULIN IGM	SERUM	1 SST	1 WORKING DAY	-
IMMUNOGLOBULIN SUBCLASS IGG 1- 4	SERUM	1 SST	14 WORKING DAYS	PATIENT REQUIREMENT:  • Fasting preferred  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
IMMUNOPHENOTYPING	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory for appointment before order
INDIRECT COOMB'S TEST	PLASMA	1 EDTA	1 HOUR	-
INFLUENZA RAPID TEST (FIA)	NASAL SWAB	DRY SWAB	1 HOUR	-
INFLUENZA/RSV PCR	NASAL SWAB	DRY SWAB	3 HOURS	-
INSULIN	SERUM	1 SST	1 WORKING DAY	-
INSULIN LIKE GROWTH HORMONE (IGF-1)	SERUM	1 SST	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
INTRINSIC FACTOR AB	SERUM	1 SST	8 WORKING DAYS	PATIENT REQUIREMENT:  8 hours-fasting is required  Patients should not receive vitamin b12 injection or radiolabelled vitamin b12 injection within the previous 2 weeks.
INVITAE TEST (GENERAL)	Call the laboratory for more	e details	ACTION REQUIRED:	
IRIS LACTOSE INTOLERANCE TEST	Call the laboratory 3 day	s before procedure	ACTION REQUIRED	:
IRIS UREA BREATH TEST (UBT)	PROCEED TEST IN LAB		1 HOUR	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
IRON	SERUM	1 SST	1 HOUR	-
ISLET CELL AUTO AB	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
JAK2 EX12/ MPL EX10 MUTATION	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	60 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
JAK2 GENE	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	14 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
JAPANESE ENCEPHALITIS IGM	PLASMA / SERUM / CSF	2 EDTA / 1 SST / 1 BIJOU BOTTLE	14 WORKING DAYS	-
KARYOTYPING	PLEASE CALL TH	E LABORATORY FOR M	ORE DETAILS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
KARYOTYPING - BONE MARROW	PLEASE CALL TH	E LABORATORY FOR MO	ORE DETAILS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
KLEIHAUER BETKE ELUSION TEST	WHOLE BLOOD	1 EDTA (MATERNAL)	3 DAYS	-
K-TRACK	WHOLE BLOOD & FFPE TISSUE	1 STRECK TUBE & BLOCK	30 WORKING DAYS	ACTION REQUIRED:  Call the laboratory to get container
K-TRACK (BO)	WHOLE BLOOD	1 STRECK TUBE	14 WORKING DAYS	ACTION REQUIRED:  • Call the laboratory to get container
K-TRACK (MET)	WHOLE BLOOD & FFPE TISSUE	1 STRECK TUBE & BLOCK	30 WORKING DAYS	ACTION REQUIRED:  • Call the laboratory to get container
K-TRACK (n)	WHOLE BLOOD	1 STRECK TUBE	14 WORKING DAYS	ACTION REQUIRED:  • Call the laboratory to get container
LACTIC ACID	WHOLE BLOOD	1 FLUORIDE	1 WORKING DAY	-
LAP SCORE	WHOLE BLOOD / BONE MARROW SMEAR	1 EDTA / FRESH BONE MARROW UNFIXED SMEARS	2 WORKING DAYS	-
LDH (LACTATE DEHYDOGENASE)	SERUM	1 SST	1 HOUR	-
LDH (LACTATE DEHYDOGENASE) - FLUID	FLUID	1 STERILE CONTAINER	1 HOUR	-
LEAD - BLOOD	WHOLE BLOOD	1 ROYAL BLUE	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
LEGIONELLA ANTIBODY	SERUM	1 SST	12 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
LEGIONELLA RAPID TEST	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
LEISHMANIA SEROLOGY	SERUM	1 SST	5 WORKING DAYS	•
LEPTOSPIROSIS IGM	SERUM	1 SST	1 HOUR	-
LEPTOSPIROSIS PCR	WHOLE BLOOD / EARLY MORNING FIRST VOID URINE	3 EDTA / URINE	3 WORKING DAYS	-
LEUCINE-RICH GLIOMA-INACTIVATED PROTEIN -1	SERUM	1 SST	3 WORKING DAYS	NO SINGLE TEST, UNDER ERAP3 PROFILE
LH OVULATION RAPID TEST	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
LIPASE	SERUM	1 SST	1 WORKING DAY	-
LITHIUM	SERUM	1 SST	1 WORKING DAY	-
ALLERGY COMPREHENSIVE PANEL (51 ALLERGEN)	SERUM	1 SST	2 HOURS	-
ALLERGY EURO 54 PANEL	SERUM	1 SST	3 WORKING DAYS	-
ALLERGY P412 - IgG4	SERUM	1 SST	3 WORKING DAYS	-
ALLERGY PANEL 1 (32 ALLERGENS)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ALLERGY PANEL 2 (COMMON MIX)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ALLERGY PANEL 3 (DOMESTIC)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ALLERGY PANEL 4 (COMMON FOOD)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ALLERGY PANEL 5 (HOUSE DUST MITES)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ALLERGY PANEL 6 (SEAFOOD)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ALLERGY PANEL 7	SERUM	1 SST	1 WORKING DAY	BATCH RUN: MONDAY & THURSDAY
ASEAN ALLERGY PANEL (36 ALLERGENS)	SERUM	1 SST	3 WORKING DAYS	-
BKV & CMV PCR	EDTA	3 EDTA	7 WORKING DAYS	-
BLOOD CULTURE IDENTIFICATION PANEL	POSITIVE BLOC	DD CULTURE	1 WORKING DAY	-
BRAF	BLOCK/SLIDE	BLOCK/SLIDE	6 WORKING DAYS	ACTION REQUIRED:     Call the laboratory before order
CSF FEME	CSF	1 BIJOU BOTTLE	2 HOURS	-
DIABETES AUTO-AB (ANTI GAD & 1A-2 ANTIBODY)	SERUM	1 SST	7 WORKING DAYS	-
DIHYDRORHODAMINE (DHR)	WHOLE BLOOD	1 LITHIUM HEPARIN	14 WORKING DAYS	ACTION REQUIRED:     Call the laboratory for appointment before order

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
EBER (EBV-ISH)	BLOCK/SLIDE	BLOCK/SLIDE	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory for appointment before order
EGFR LUNG PANEL (EGFR, ALK, ROS1)	BLOCK/SLIDE	BLOCK/SLIDE	9 WORKING DAYS	ACTION REQUIRED:     Call the laboratory for appointment before order
ENCEPHALITIS RECEPTORS AUTOIMMUNE PROFILE 3 (SERUM)	SERUM	1 SST	3 WORKING DAYS	-
ENCEPHALITIS RECEPTORS AUTOIMMUNE PROFILE 5 (CSF)	CSF/ SERUM	1 BIJOU BOTTLE/ 1 SST	3 WORKING DAYS	-
ENUMERATION LYMPHOCYTES SUBSETS	WHOLE BLOOD	1 EDTA	2 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only  BATCH RUN:  TUESDAY & FRIDAY
EXTENDED RED CELL GENOTYPING	WHOLE BLOOD & SERUM	3 EDTA & 1 SST	22 WORKING DAYS	-
EYE VITREOUS FLUID FOR PCR (CMV, HSV, VZV)	EYE VITREOUS FLUID/ CORNEAL SRCAPPING / EYE SWAB	1 STERILE CONTAINER / 1 SWAB IN UTM	2 WORKING DAYS	-
FEACAL & STOOL CULTURE	STOOL	1 STERILE CONTAINER	3 WORKING DAYS	-
FISH (EXTERNAL)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	ACTION REQUIRED:     Please call the laboratory to specify FISH test details
FOOD INTOLERANCE	SERUM	1 SST	7 WORKING DAYS	BATCH RUN: WEDNESDAY

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
FREE TESTOSTERONE INDEX	SERUM	1 SST	4 WORKING DAYS	-
GANGLIOSIDE AUTOIMMUNE PROFILE	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	4 WORKING DAYS	BATCH RUN: FRIDAY
GASTROINTESTINAL PANEL	STOOL	1 STERILE STOOL CONTAINER	3 HOURS	-
H. PYLORI ANTIGEN (STOOL)	STOOL	1 STOOL CONTAINER	36 WORKING DAYS	-
H. PYLORI RT-PCR	STOOL/	1 STOOL CONTAINER	2 DAYS	-
HAEMATOLOGY SPECIAL STAIN	TREPHINE	BLOCK/SLIDE	3 DAYS	-
HER2 DDISH	BLOCK/SLIDE	BLOCK/SLIDE	5 WORKING DAYS	ACTION REQUIRED:  Call the laboratory before order
HIGH SENSITIVITY MYASTHENIA GRAVIS SCREEN	SERUM	1 SST	20 WORKING DAYS	-
HORIZON STS 20 (LUNG) WITH PDL-1	FFPE BLOCK	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE block should be < 6 months old
HORIZON STS 20 (BREAST)	FFPE BLOCK	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE block should be < 6 months old
HORIZON STS 20 (COLORECTAL)	FFPE BLOCK	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE block should be < 6 months old
HORIZON STS 20 (OVARIAN)	FFPE BLOCK	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE block should be < 6 months old
HORIZON STS 20 (PROSTATE)	FFPE BLOCK	BLOCK/SLIDE	12 WORKING DAYS	• FFPE block should be < 6 months old

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
HORIZON STS 179	FFPE BLOCK / 8 UNSTAINED SLIDE	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide should be > 50% tumor content
HORIZON STS 192 WITH PDL-1	FFPE BLOCK / 8 UNSTAINED SLIDE	BLOCK/SLIDE	12 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide should be > 50% tumor content
HORIZON ULTIMA 1000 (TISSUE BIOPSY)	FFPE TISSUE & WHOLE BLOOD	BLOCK/SLIDE & 1 SPECIAL TUBE	20 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide should be 20 – 30 % tumor content
HORIZON ULTIMA 1000 (LIQUID BIOPSY)	WHOLE BLOOD	1 SPECIAL TUBE	20 WORKING DAYS	-
HORIZON ULTIMA PLUS	FFPE BLOCK & WHOLE BLOOD	BLOCK/SLIDE & 2 SPECIAL TUBES & 2 EDTA	10 WORKING DAYS	SPECIMEN REQUIREMENT:  • FFPE block should be < 6 months old
HORIZON LBX DYNAMIC TRACKER	WHOLE BLOOD	1 SPECIAL TUBE & 2 EDTA	10 WORKING DAYS	-
HPV DNA	GENITAL SWAB / ORAL SWAB	1 DRY SWAB	2 WORKING DAYS	-
ISLET CELL AUTO AB	SERUM	1 SST	7 WORKING DAYS	-
KRAS	BLOCK/SLIDE	BLOCK/SLIDE	15 WORKING DAYS	ACTION REQUIRED:  Call the laboratory before order
KRAS/NRAS	BLOCK/SLIDE	BLOCK/SLIDE	15 WORKING DAYS	ACTION REQUIRED:     Call the laboratory before order
LEUKEMIA WORKUP	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
LIVER SPECIFIC ANTIBODY	SERUM	1 SST	4 WORKING DAYS	<b>BACTH RUN:</b> WEDNESDAY & SATURDAY
LiverFASt	SERUM & PLASMA	1 SST & 1 CITRATE	1 WORKING DAYS	<b>BATCH RUN:</b> TUESDAY & FRIDAY
LKM AUTO ANTIBODIES	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: WEDNESDAY
LUNG CANCER MARKER PANEL 1 (LUCM)	SERUM	1 SST	1 WORKING DAY	-
LUPUS ANTICOAGULANT INHIBITORS	PLASMA	2 SODIUM CITRATES	7 WORKING DAYS	BATCH RUN: WEDNESDAY
LUTEINIZING HORMONE (LH)	SERUM	1 SST	2 HOURS	-
LYME DISEASE IGM & IGG	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
LYMPHOMA WORKUP (LYMPHOPROLIFERATIVE DISORDER: CLL, NHL, HCL)	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	3 WORKING DAYS	-
MAGNESIUM	SERUM	1 SST	1 HOUR	-
MALARIA PARASITE (BFMP)	WHOLE BLOOD	1 EDTA	2 HOURS	-
MALARIA PARASITE IDENTIFICATION	WHOLE BLOOD	1 EDTA	1 WORKING DAY	-
MALARIA PCR	WHOLE BLOOD	1 EDTA	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
MALE HORMONAL STUDIES [ANDROGEN STUDIES]	SERUM	1 SST	1 WORKING DAY	•
MAPLE SYRUP URINE DISEASE (MSUD)	SERUM	1 SST	15 WORKING DAYS	•
MASSIVE TRANSFUSION PROTOCOL CYCLE 1&2 [MTP CYCLE 1&2]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
MASSIVE TRANSFUSION PROTOCOL CYCLE EXTENDED [MTP CYCLE EXTENDED]	PLASMA & PACKED CELL	UPON REQUEST	UPON REQUEST	-
MEASLES AB	SERUM / PLASMA	1 SST / EDTA	7 WORKING DAYS	-
MEASLES PCR	THROAT SWAB / NASOPHARYNGEAL SECRETION / TRACHEAL ASPIRATE / URINE	1 SWAB IN UTM / 1 STERINE CONTAINER	3 WORKING DAY	-
MEASLES PCR	THROAT SWAB/ NASOPHARYNGEAL SECRETION / TRACHEAL ASPIRATE / URINE	1 SWAB IN UTM / 1 STERILE CONTANER	14 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
MELAS MUTATION	WHOLE BLOOD / URINE SEDIMENT / MUSCLE BIOPSY	1 EDTA / 1 STERILE URINE CONTAINER / 1 STERILE CONTAINER	66 WORKING DAYS	ACTION REQUIRED:  Ordering Dr to call IMR MO for order
MELIODOSIS SEROLOGY	SERUM	1 SST	7 WORKING DAYS	-
MENINGITIS ENCEPHALITIS PANEL	CSF	1 BIJOU BOTTLE	3 HOURS	-
MERCURY	WHOLE BLOOD	1 ROYAL BLUE	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
METHADONE	URINE	1 STERILE URINE CONTAINER	3 WORKING DAYS	-
METHAEMOGLOBIN			PLEASE CALL LAB-	
METHAMPHETAMINES	URINE	1 STERILE URINE CONTAINER	7 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY
METHOTREXATE LEVEL	SERUM	1 SST	1 WORKING DAY	-
MICROALBUMIN CREATININE RATIO	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
MICROFILARIA AB	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY E VERY SATURDAY
MICROFILARIA MICROSCOPY	WHOLE BLOOD	1 EDTA	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
MILLER DIEKER SYNDROME (MDS 11P13.3)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:  • Sample shall be collected on working hour only
MITOCHONDRIAL AB	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: WEDNESDAY
MIXING STUDIES APTT	PLASMA	1 SODIUM CITRATE	1 WORKING DAY	-
MIXING STUDIES PT	PLASMA	1 SODIUM CITRATE	1 WORKING DAY	-
MONKEY POX (MPOX) PCR	VESICLE / PUS / NASAL	1 DACRON SWAB IN VTM	1 WORKING DAY	ACTION REQUIRED:     Call the laboratory to get container
MONOSPECIFIC COOMB'S TEST	WHOLE BLOOD	1 EDTA	1 WORKING DAY	-
MONOSPOT TEST	SERUM	1 SST	1 HOUR	-
MRSA PCR	NASAL & ORO SWAB	MRSA SWAB	3 HOURS	-
MRSA SCREEN	NASAL / GROIN / AXILLARY	CHARCOAL SWAB	3 WORKING DAYS	-
MSI PCR	BLOCK/ SLIDE	BLOCK/SLIDE	7 WORKING DAYS	-
MTB/RIF PCR (SPUTUM AND TRACHEAL ASPIRATE)	RESPIRATORY SPECIMEN / CSF	1 STERILE CONTAINER	3 HOURS	-
MULTIPLE MYELOMA WORKUP	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	3 WORKING DAYS	-
MUMPS IGG	SERUM	1 SST	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
MUMPS IGM	SERUM	1 SST	3 WORKING DAYS	-
MYASTHENIA GRAVIS AUTOIMMUNE PROFILE (SMC)	SERUM	1 SST	1 WORKING DAY	BATCH RUN: WEDNESDAY
MYCOPHENOLIC ACID	PLASMA	1 EDTA	5 WORKING DAYS	-
MYCOPLASMA AB	SERUM	1 SST	4 HOURS	-
MYCOPLASMA IGM	SERUM	1 SST	1 HOUR	-
MYCOPLASMA PCR	NASAL ASPIRATE / NASAL SWAB / BAL / SPUTUM	1 SWAB IN VTM / 1 STERILE CONTAINER	1 WORKING DAY	-
MYELIN ASSOCIATED GLYCOPROTEIN (MAG) ANTIBODY	SERUM	1 SST	22 WORKING DAYS	-
MYELOPEROXIDASE (MPO)	SERUM	1 SST	3 WORKING DAYS	-
MYOGLOBIN	URINE	1 STERILE URINE CONTAINER	10 WORKING DAYS	-
MYOSITIS PROFILE	SERUM	1 SST	4 WORKING DAYS	BACTH RUN: WEDNESDAY & SATURDAY
NEUROMYELITIS OPTICA AUTOIMMUNE PROFILE	SERUM	1 SST	4 WORKING DAYS	<b>BACTH RUN</b> WEDNESDAY
NGS COMPREHENSIVE CANCER PANEL (161 GENES)	FFPE BLOCK / TISSUE	N/A	15 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
NGS COMPREHENSIVE CANCER PANEL (161 GENES) PLUS PDL1 AND MSI	FFPE BLOCK / TISSUE	N/A	15 WORKING DAYS	-
NGS EXPRESS - COLON PANEL (PLASMA)	FFPE BLOCK / TISSUE	N/A	5 WORKING DAYS	-
NGS EXPRESS - COLON PANEL (TUMOR)	FFPE BLOCK / TISSUE	N/A	5 WORKING DAYS	-
NGS EXPRESS - LUNG PANEL (PLASMA)	FFPE BLOCK / TISSUE	N/A	5 WORKING DAYS	-
NGS EXPRESS - LUNG PANEL (TUMOR)	FFPE BLOCK / TISSUE	N/A	5 WORKING DAYS	-
NGS PRECISION COLORECTAL CANCER PANEL (SMC)	FFPE BLOCK / SLIDE	N/A	7 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide: 15 - 20 unstained slides with ≥30% tumor content
NGS PRECISION COLORECTAL CANCER PANEL WITH MSI (SMC)	FFPE BLOCK / SLIDE	N/A	7 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide: 15 - 20 unstained slides with ≥30% tumor content
NGS PRECISION LUNG CANCER PANEL (SMC)	FFPE BLOCK / SLIDE	N/A	7 WORKING DAYS	SPECIMEN REQUIREMENT:  • Slide: 15 - 20 unstained slides with ≥30% tumor content
NICC BASIC (DNA LAB)	WHOLE BLOOD	1 STRECK TUBE	5 WORKING DAYS	-
NICC COMPREHENSIVE (DNA LAB)	WHOLE BLOOD	1 STRECK TUBE	10 WORKING DAYS	-
NIPAH VIRUS AB	SERUM / CSF	1 SST / 1 BIJOU BOTTLE	10 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
NIPT BASIC (PANORAMA USA)	WHOLE BLOOD	1 STRECK TUBE	10 WORKING DAYS	-
NIPT BASIC (STEMLIFE)	WHOLE BLOOD	1 STRECK TUBE	14 WORKING DAYS	-
NIPT COMPREHENSIVE (PANORAMA USA)	WHOLE BLOOD	1 STRECK TUBE	20 WORKING DAYS	-
NIPT COMPREHENSIVE (STEMLIFE)	WHOLE BLOOD	1 STRECK TUBE	14 WORKING DAYS	-
NIPT VISTARA (PANORAMA USA)	WHOLE BLOOD	2 STRECK TUBES	15 WORKING DAYS	PATIENT REQUIREMENT:  • ≥ 9 weeks pregnancy
NMDAR (ANTI N METHYL D ASPARATE RECEPTOR) CSF	CSF	1 BIJOU BOTTLE	3 WORKING DAYS	-
NMDAR (ANTI N METHYL D ASPARATE RECEPTOR) SERUM	SERUM	1 SST	3 WORKING DAYS	-
NON-KETOTIC HYPERGLYCINEMIA (NKH)	PLASMA & CSF	1 LITHIUM HEPARIN & 1 BIJOU BOTTLE	15 WORKING DAYS	-
NPM1 MUTATION	BONE MARROW ASPIRATE / WHOLE BLOOD	1 EDTA	30 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
NRAS	BLOCK/SLIDE	BLOCK/SLIDE	15 WORKING DAYS	ACTION REQUIRED:  • Call the laboratory before order
NSE	SERUM	1 SST	1 DAY	-
NT-PRO BNP	SERUM	1 SST	1.5 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
OLIGOCLONAL BANDS	PLASMA & CSF	1 LITHIUM HEPARIN & 1 BIJOU BOTTLE	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY THRUSDAY
ONCODECIPHER BREAST TISSUE100 NGS PANEL	FFPE BLOCK / 10 UNSTAINED SLIDES & 1 H&E SLIDE	SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:     HPE report need to be provided
ONCODECIPHER COLON TISSUE100 NGS PANEL	FFPE BLOCK / 10 UNSTAINED SLIDES & 1 H&E SLIDE	SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:     HPE report need to be provided
ONCODECIPHER LIQUID100 NGS PANEL	WHOLE BLOOD	2 STRECK TUBE	15 WORKING DAYS	-
ONCODECIPHER PANCREATIC TISSUE100 NGS PANEL	FFPE BLOCK / 10 UNSTAINED SLIDES & 1 H&E SLIDE	SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:  • HPE report need to be provided
ONCODECIPHER RARE & OTHER CANCER BRAF PCR	FFPE BLOCK / 5 UNSTAINED SLIDE & 1 H&E SLIDE	SLIDE CONTAINER & 2 EDTA	10 WORKING DAYS	DOCUMENT REQUIRED:     HPE report need to be provided
ONCODECIPHER RARE & OTHER CANCER MSI PCR	FFPE BLOCK / 5 UNSTAINED SLIDE & WHOLE BLOOD & 1 H&E SLIDE	SLIDE CONTAINER & 2 EDTA	10 WORKING DAYS	DOCUMENT REQUIRED:  • HPE report need to be provided
ONCODECIPHER TISSUE PREMIUM	FFPE BLOCK / 15 UNSTAINED SLIDES & 1 H&E SLIDE	SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:  • HPE report need to be provided

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ONCODECIPHER TISSUE100 NGS PANEL	FFPE BLOCK / 10 UNSTAINED SLIDES & 1 H&E SLIDE	SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:  • HPE report need to be provided
ONCODEDUCE ABL1 KINASE DOMAIN MUTATION	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ONCODEDUCE AML COMBO PLUS [MUTATION & FUSION] NGS PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	10 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ONCODEDUCE AML FUSION FOCUS NGS PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	10 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ONCODEDUCE BRAF V600E QUALITATIVE PCR PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD / *FFPE BLOCK / 10 **UNSTAINED SLIDES & 1 H&E SLIDE	2 EDTA / BLOCK CONTAINER / SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:     Unstained slides & H&E slide: HPE report need to be provided
ONCODEDUCE EOSINOPHILIA NGS PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ONCODEDUCE FLT3 [ITD-TKD] & NPM1 QUALITATIVE PCR PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	10 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ONCODEDUCE FUSION 87-GENE NGS PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
ONCODEDUCE MUTATION 37-GENE NGS PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD / BONE MARROW ASPIRATE SLIDE	2 EDTA / SLIDE CONTAINER	15 WORKING DAYS	-
ONCODEDUCE MYD88 L265P QUALITATIVE PCR PANEL	BONE MARROW ASPIRATE / WHOLE BLOOD / *FFPE BLOCK / 10 **UNSTAINED SLIDES & 1 H&E SLIDE	2 EDTA / BLOCK CONTAINER / SLIDE CONTAINER	15 WORKING DAYS	DOCUMENT REQUIRED:     Unstained slides & H&E slide: HPE report need to be provided
ONCODEDUCE PCR DUO GENES	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	-
ONCODEDUCE PCR PANEL [3 GENES - JAK2 CALR MPL]	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	-
ONCODEDUCE PCR SINGLE GENE	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	15 WORKING DAYS	-
OPIATE (MORPHINE)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
OSMOLALITY	SERUM	1 SST	1.5 HOURS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
OSMOTIC FRAGILITY	WHOLE BLOOD	STERILE GLASS WITHN 500 UNITS HEPARIN	7 WORKING DAYS	PATIENT REQUIREMENT:  Patient must have no transfusion history within 3 months  ACTION REQUIRED:  Call the laboratory before procedure to make appointment  Call the laboratory 1 working day to get container
P. CARINII STAIN	SPUTUM / BAL	1 STERILE CONTAINER	7 WORKING DAYS	-
PANEL REACTIVE ANTIBODIES	SERUM	1 SST	7 WORKING DAYS	BATCH RUN: THURSDAY
PANEL STI	URINE / GENITAL SWAB / LBC	1 STERILE CONTAINER / 1 SWAB IN VTM	7 WORKING DAYS	-
PANEL STI-14	URINE / GENITAL SWAB	1 STERILE CONTAINER / DRY SWAB	2 WORKING DAYS	-
PANEL ZIKA DENGUE CHIKUNGUNYA	SERUM	1 SST	3 WORKING DAYS	-
PARANEOPLASTIC ANTIGEN AUTOIMMUNE PROFILE 6	SERUM	1 SST	3 WORKING DAYS	-
PARAQUAT	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
PARATHYROID HORMONE (iPTH)	PLASMA	1 EDTA	2 HOURS	-
PARIETAL CELL ANTIBODY	SERUM	1 SST	1 WORKING DAYS	BATCH RUN: TUESDAY
PAROXYSMAL NOCTURNAL HEMOGLOBINURIA (PNH)	WHOLE BLOOD	2 EDTA	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory before order
PARVOVIRUS B19 IGG	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
PARVOVIRUS B19 IGM	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
PBF (PERIPHERAL BLOOD FILM)	WHOLE BLOOD	1 EDTA	3 WORKING DAYS	-
PHENCYCLIDINE	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
PHENOBARBITONE	SERUM	1 SST	1 WORKING DAY	-
PHENYLKETONURIA (PKU)	DRIED BLOOD SPOT	FILTER PAPER	5 WORKING DAYS	-
PHENYTOIN (DILANTIN)	SERUM	1 SST	1 WORKING DAY	-
PHOSPHATE INORGANIC	SERUM	1 SST	1 HOUR	-
PHOSPHOLIPID ANTIBODY	SERUM PLASMA	1 SST 3 CITRATES	7 WORKING DAYS	CARDIOLIPIN AB BATCH RUN: TUESDAY LUPUS ANTICOAGULANT BATCH RUN: THURSDAY
PIK3CA (BLOOD)	WHOLE BLOOD	1 STRECK TUBE	7 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
PIK3CA MUTATION TEST (TISSUE)	TISSUE	FFPE / PARAFILM BLOCK	7 WORKING DAYS	-
PLACENTA GROWTH FACTOR	SERUM	1 SST	1 WORKING DAY	-
PLASMA METANEPHRINE	PLASMA	3 EDTA	14 WORKING DAYS	PATIENT REQUIREMENT:     Use of an epi-pen within the 7 days prior to test may produce inaccurate results  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
PLATELET CONCENTRATE	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
PLATELET CONCENTRATE [IRRADIATED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
PLATELET CONCENTRATE [LEUCODEPLETED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
PLEURAL FLUID FEME	PLEURAL FLUID	1 STERILE CONTAINER	2 HOURS	-
PML-RARA	BONE MARROW ASPIRATE / WHOLE BLOOD	2 EDTA	21 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
PNEUMONIA PANEL	SPUTUM / BAL	1 STERILE CONTAINER	1 WORKING DAY	-
PORPHOBILINOGEN	URINE	1 STERILE URINE CONTAINER	5 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be avoided from light

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
POSACONAZOLE	SERUM	1 RED PLAIN TUBE	14 WORKING DAYS	ACTION REQUIRED:  • Specimen shall be SEND TO LAB IMMEDIATELY  SEND TO OVERSEAS REFERRAL LABORATORY  EVERY TUESDAY
POTASSIUM	SERUM	1 SST	1 HOUR	-
PRADER WILLI/ANGELMAN SYNDROME (SNRPN 15Q11.2)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
PREALBUMIN	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
PRE-ECLAMPSIA RISK ASSESSMENT TEST (SFLT-1/PIGF RATIO)	SERUM	1 SST	1 WORKING DAY	-
PRO GRP	SERUM	1 SST	1 WORKING DAY	-
PROCALCITONIN	SERUM	1 SST	2 HOURS	-
PROGESTERONE	SERUM	1 SST	2 HOURS	-
PROLACTIN	SERUM	1 SST	2 HOURS	-
PROLACTIN DILUTION STUDY	SERUM	1 SST	2 HOURS	-
PROPOXYPHENE	URINE	1 STERILE URINE CONTAINER	5 WORKING DAYS	-
PROTEIN C	PLASMA	1 SODIUM CITRATE	5 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
PROTEIN ELECTROPHORESIS	SERUM	1 SST	10 WOKING DAYS	-
PROTEIN S	PLASMA	1 SODIUM CITRATE	5 WORKING DAYS	-
PROTEIN TOTAL	SERUM	1 SST	1 HOUR	-
PROTEINASE 3 (PR-3)	SERUM	1 SST	3 WORKING DAYS	-
PROTHROMBIN TIME (PT) & INR	PLASMA	1 SODIUM CITRATE	1 HOUR	-
PSA (FREE & TOTAL)	SERUM	1 SST	1 WORKING DAY	-
PSA TOTAL	SERUM	1 SST	2 HOURS	-
PYRUVIC ACID (E)	WHOLE BLOOD / CSF	SPECIAL TUBE / 1 BIJOU BOTTLE	5 WORKING DAYS	ACTION REQUIRED:     Call the laboratory 1 working day before procedure to get container

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
QF PCR SCREENING	• FETUS:  20ML AMNIOTIC FLUID / 30MG CVS /  1ML FETAL BLOOD / 30 MG POC WITHOUT FIX  • INDIVIDUAL: 3 ML BLOOD  • NEWBORN: 1 ML BLOOD	FETUS: 1 CONICAL TUBE / 1 STERILE CONTAINER / EDTA  INDIVIDUAL: EDTA  NEWBORN: EDTA	3 WORKING DAYS	PATIENT REQUIREMENT:  Gestation age (CVS): 10 - 12 weeks  Minimum gestation age (Amniotic fluid): 15 weeks  DOCUMENT REQUIRED:  Consent form  SPECIMEN REQUIREMENT:  Fetal Specimen: Send with 3mL maternal EDTA blood
QUANTIFERON TB	WHOLE BLOOD	SPECIAL TUBES	4 WORKING DAYS	• Call the laboratory to get container  BATCH RUN:  MONDAY & THURSDAY
RENIN	PLASMA	2 EDTA	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
REPTILASE TEST	PLASMA	1 SODIUM CITRATE	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
RESPIRATORY FULL PANEL ASSAY	NASOPHARYNGEAL & OSOPHARYNGEAL SWAB	1 SWAB FOR EACH SPECIMEN SOURCE; IN VTM	3 HOURS	-
RESPIRATORY VIRUSES ANTIGEN SCREEN (RVAS)	NASOPHARYNGEAL SWAB	1 DRY SWAB	30 MINUTES	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
RETICULOCYTE COUNT	WHOLE BLOOD	1 EDTA	1 HOUR	-
RETT SYNDROME	WHOLE BLOOD	2 EDTA	15 WORKING DAYS	-
RH (D) VARIANT GENOTYPING	WHOLE BLOOD & SERUM	3 EDTA & 1 SST	22 WORKING DAYS	-
RHEUMATOID ARTHRITIS (RF)	SERUM	1 SST	1 HOUR	-
ROTAVIRUS ANTIGEN	STOOL	1 STERILE STOOL CONTAINER	1 HOUR	-
RP 16 (RESPIRATORY VIRUSES)	NASOPHARYNGEAL ASPIRATE / NASOPHARYNGEAL SWAB / SPUTUM / BAL / TRACHEAL ASPIRATE / RESPIRATORY TISSUE BIOPSY	1 STERILE CONTAINER	1 WORKING DAY	-
RP 36 (RESPIRATORY PANEL)	THROAT SWAB / NASAL SWAB / SPUTUM / BAL / TRACHEAL ASPIRATE	1 SWAB IN UTM / 1 STERILE CONTAINER	1 WORKING DAY	-
RPR	SERUM	1 SST	1 HOUR	-
RSV RAPID TEST	NASAL SWAB	1 DRY SWAB	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
RUBELLA IGG	SERUM	1 SST	2 HOURS	-
RUBELLA IGM	SERUM	1 SST	4 WORKING DAYS	BATCH RUN: TUESDAY & FRIDAY
S. PNEUMONIAE RAPID TEST	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
SCC ANTIGEN	SERUM	1 SST	1 WORKING DAY	-
SECOND TRIMESTER TEST	SERUM	1 SST	3 WORKING DAYS	ONLY APPLICABLE FOR SINGLETON & TWIN PREGNANCY  PATIENT REQUIREMENT:  Gestation age: 14W0D -19W6D  No fasting required  INFORMATION REQUIRED:  Date of birth, ethnicity, weight, blood collection date & scan date  Smoker (yes/no)  Number of fetus (singleton or twin)  Previous pregnancy history of t13, t18 or t21)  Assisted pregnancy details, (method, egg-freezing date, donor egg birth date,  Conception date & transfer date) if any  Biparietal diameter (bpd)

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
SELENIUM	SERUM	1 ROYAL BLUE	14 WORKING DAYS	PATIENT REQUIREMENT:  Patient should proceed test at least 96 hours after administration of gadolinium-, iodine and barium-containing contrast medicine  SEND TO OVERSEAS REFERRAL LABORATORY E VERY TUESDAY
SERUM FREE LIGHT CHAIN	SERUM	1 SST	22 WORKING DAYS	CLINICAL INFORMATION MUST BE PROVIDED
SEX HORMONE BINDING GLOBULIN	SERUM	1 SST	1 WORKING DAY	-
SINGLE DONOR PLATELET	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
SINGLE DONOR PLATELET [IRRADIATED]	PLASMA & PACKED CELL	1 EDTA	UPON REQUEST	-
SIROLIMUS	WHOLE BLOOD	2 EDTA	5 WORKING DAYS	-
SMITH MAGENIS SYNDROME (SMCR 11P11.2)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:     Specimen shall be collected on working hours only

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
SNP MICROARRAY ANALYSIS 750K [CMA 750K]	PRENATAL: AMNIOTIC FLUID  POST-NATAL: FETAL WHOLE BLOOD  PARENTAL:	PRENATAL: 1 CONICAL TUBE  POST-NATAL: 1 EDTA  PARENTAL:	14 WORKING DAYS	-
SNP MICROARRAY ANALYSIS HD [CMA HD]	WHOLE BLOOD FROM EACH PARENT	1 EDTA FROM EACH PARENT	14 WORKING DAYS	-
SODIUM	SERUM	1 SST	1 HOUR	-
SPERM ANTIBODY	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
SPINAL MUSCULAR ATROPHY (SMN1, SMN2)	WHOLE BLOOD	2 EDTA	90 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
SPINOCEREBELLAR ATAXIA (SCA) SCREEN	WHOLE BLOOD	3 EDTA	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
SPOT-MAS 10 MULTICANCER EARLY DETECTION	WHOLE BLOOD	1 STRECK TUBE	25 WORKING DAYS	-
SPOT-MAS LUNG	WHOLE BLOOD	1 STRECK TUBE	25 WORKING DAYS	-
SPOT-MAS CRC (COLORECTAL)	WHOLE BLOOD	1 STRECK TUBE	25 WORKING DAYS	-
STONE ANALYSIS	STONE	1 STERILE CONTAINER	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
STRONGYLOIDIASIS IGG	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
SULFONYL UREA	WHOLE BLOOD	1 LITHIUM HEPARIN	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
SYNOVIAL FLUID FEME	SYNOVIAL FLUID	1 STERILE CONTAINER	2 HOURS	•
SYPHILIS	SERUM	1 SST	2 HOURS	-
TACROLIMUS	WHOLE BLOOD	1 EDTA	1 WORKING DAY	-
TB ANTIBODY	SERUM	1 SST	1 WORKING DAY	-
TB CULTURE	RESPIRATORY SPECIMEN / WHOLE BLOOD / URINE / CSF	1 STERILE CONTAINER / 1 LITHIUM HEPARIN / 1 BIJOU BOTTLE	60 WORKING DAYS	PRELIMINARY REPORT: 14 WORKING DAYS
TB CULTURE (NTM)	RESPIRATORY SPECIMEN / WHOLE BLOOD / URINE / CSF	1 STERILE CONTAINER / 1 LITHIUM HEPARIN / 1 BIJOU BOTTLE	60 WORKING DAYS	PRELIMINARY REPORT: 14 WORKING DAYS
TB CULTURE (NTM)	RESPIRATORY SPECIMEN / WHOLE BLOOD / URINE / CSF	1 STERILE CONTAINER / 1 LITHIUM HEPARIN / 1 BIJOU BOTTLE	60 WORKING DAYS	PRELIMINARY REPORT: 14 WORKING DAYS

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
TB PCR (MTB/NTM)	RESPIRATORY SPECIMEN / URINE / WHOLE BLOOD / CSF	1 STERILE CONTAINER / 1 LITHIUM HEPARIN / 1 BIJOU BOTTLE	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
TCRB GENE REARRANGEMENT	WHOLE BLOOD / BONE MARROW ASPIRATE	2 EDTA	30 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
TESTOSTERONE	SERUM	1 SST	2 HOURS	-
THEOPHYLLINE (AMINOPHYLLINE)	SERUM	1 SST	1 WORKING DAY	-
THERAPEUTIC VENESECTION	WHOLE BLOOD	PLEASE CALL THE LABORATORY TO GET REQUIRED APPARATUS	N/A	INFORMATION REQUIRED:  Time Start  Time End  Volume  BP  Site of needle insertion  Assisted by  Ordering Dr

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
THIAMINE (VITAMIN B1)	WHOLE BLOOD	1 LITHIUM HEPARIN	14 WORKING DAYS	PATIENT REQUIREMENT:  Patient should fast overnight (12-14 hours)  infants should have specimen collected just before next feeding. Water can be taken as needed.  For 12 hours before specimen collection, patient should not take vitamin supplements.  SEND TO OVERSEAS REFERRAL LABORATORY ON EVERY TUESDAY
THIOPURINE METHYLTRANSFERASE (TPMT)	WHOLE BLOOD	2 EDTA	12 WORKING DAYS	PATIENT REQUIREMENT:  Patients should abstain from the following drugs for at least 48 hours prior to testing:  Naproxen (Aleve), Ibuprofen (Advil, Motrin), Ketoprofen (Orudis), Furosemide (Lasix), Sulfasalazine (Azulfidine), Mesalamine (Asacol), Olsalazine (Dipentum), Mefenamic Acid (Ponstel), Trimethoprim (Proloprim), Methotrexate, Thiazide Diuretics, Benzoic Acid Inhibitors.
THROMBIN TIME TEST [TT]	PLASMA	1 SODIUM CITRATE	1 WORKING DAY	-
THROMBOPHILIA SCREEN	PLASMA	3 SODIUM CITRATES	10 WORKING DAYS	RUN EVERY 2 <sup>ND</sup> & 4 <sup>TH</sup> THURSDAY OF THE MONTH
THYROGLOBULIN	SERUM	1 SST	1 WORKING DAY	-
THYROGLOBULIN AB	SERUM	1 SST	1 WORKING DAY	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
THYROID AUTO ANTIBODY	SERUM	1 SST	1 WORKING DAY	-
THYROID MICROSOMAL AB (ANTI- TPO)	SERUM	1 SST	1 WORKING DAY	-
TISSUE TRANSGLUTAMINASE ANTIBODY (TTG)	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
TORCH SCREEN	SERUM	1 SST	3 WORKING DAYS	-
TOTAL IRON BINDING CAPACITY (TIBC)	SERUM	1 SST	1 HOUR	-
TOTAL T4	SERUM	1 SST	1 WORKING DAY	-
TOXOCARA SEROLOGY	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
TOXOPLASMA IGG	SERUM	1 SST	3 WORKING DAYS	-
TOXOPLASMA IGM	SERUM	1 SST	3 WORKING DAYS	-
TPPA (TREPONEMA PALLIDUM PA)	SERUM	1 SST	3 HOURS	-
TRANSFUSION REACTION INVESTIGATION	WHOLE BLOOD & SERUM & URINE	3 EDTA & 1 SST & 1 STERILE URINE CONTAINER	10 WORKING DAYS	ACTION REQUIRED:     Return all related blood component to lab
TRIGLYCERIDES	SERUM	1 SST	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
TROPONIN T	WHOLE BLOOD	1 LITHIUM HEPARIN	1 HOUR	-
TRYPTASE	SERUM	1 SST	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
TSH	SERUM	1 SST	2 HOURS	-
TSH RECEPTOR ANTIBODY	SERUM	1 SST	1 WORKING DAY	-
TYPHOID IGM/IGG	SERUM	1 SST	1 HOUR	-
TYPHUS IP	SERUM	1 SST	5 WORKING DAYS	-
UNCROSSMATCHED O POSITIVE PACKED CELL	N/A	PLEASE CALL LAB	15 MINS	-
UREA	SERUM	1 SST	1 HOUR	-
URIC ACID	SERUM	1 SST	1 HOUR	-
URINE BETA - MICROGLOBULIN	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
URINE BILIRUBIN	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE CALCIUM (RANDOM)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE CALCIUM 24 HOURS	24 HOURS URINE	24 HOURS URINE CONTAINER	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
URINE CHLORIDE	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE CHROMIUM	URINE	1 STERILE URINE CONTAINER	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
URINE COPPER	24 HOURS URINE	24 HOURS URINE CONTAINER	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
URINE COPROPORPHYRIN	URINE	1 STERILE URINE CONTAINER	15 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be avoided from light
URINE COTININE (NICOTINE METABOLITE)	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	-
URINE CREATININE (RANDOM)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE CYSTINE	URINE	1 STERILE URINE CONTAINER	14 WORKING DAYS	-
URINE ELECTROLYTES (RANDOM)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE FEME	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE FREE CORTISOL	24 HOURS URINE	24 HOURS URINE CONTAINER	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
URINE GLUCOSE (QUALITATIVE)	URINE	1 STERILE URINE CONTAINER	30 MINUTES	-
URINE KETONE	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE LEAD	24 HOURS URINE	24 HOURS URINE CONTAINER	12 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
URINE MERCURY	URINE	1 STERILE URINE CONTAINER	10 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY MONDAY & WEDNESDAY
URINE METANEPHRINE	24 HOURS URINE	24 HOURS URINE CONTAINER	14 WORKING DAYS	PATIENT REQUIREMENT:  Tricyclic antidepressants, labetalol, and sotalol medications may elevate levels of metanephrines producing results that cannot be interpreted.  If clinically feasible, it is optimal to discontinue these medications at least 1 week before collection  SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
URINE MICROALBUMIN	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE ORGANIC ACID	URINE	1 STERILE URINE CONTAINER	7 WORKING DAYS	-
URINE OSMOLALITY	URINE	1 STERILE URINE CONTAINER	1.5 HOURS	-
URINE OXALATE 24 HOURS	24 HOURS URINE	24 HOURS URINE CONTAINER	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
URINE PHASE CONTRAST	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE PHOSPHATE INORGANIC	24 HOURS URINE	24 HOURS URINE CONTAINER	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
URINE POTASSIUM	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE PREGNANCY TEST	URINE	1 STERILE URINE CONTAINER	30 MINUTES	-
URINE PROTEIN (QUALITATIVE)	URINE	1 STERILE URINE CONTAINER	30 MINUTES	-
URINE PROTEIN (RANDOM)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE PROTEIN / CREATININE INDEX	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE PROTEIN 24 HOURS	24 HOURS URINE	24 HOURS URINE CONTAINER	1 HOUR	-
URINE PROTEIN ELECTROPHORESIS	24 HOURS URINE	PLEASE CALL LAB	10 WORKING DAYS	-
URINE PURINE & PYRIMIDINE	URINE	1 STERILE URINE CONTAINER	14 WORKING DAYS	-
URINE RBC	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE REDUCING SUGAR (BENEDICT)	URINE	1 STERILE URINE CONTAINER	5 WORKING DAYS	-
URINE SODIUM	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE SULFOCYSTEINE	URINE	1 STERILE URINE CONTAINER	18 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
URINE SULPHITE (DIPSTICK)	URINE	1 STERILE URINE CONTAINER	1 WORKING DAY	ACTION REQUIRED:     Call the laboratory to make appointment before order
URINE UREA 24 HOURS	24 HOURS URINE	24 HOURS URINE CONTAINER	1 HOUR	-
URINE URIC ACID (RANDOM)	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
URINE URIC ACID 24 HOURS	24 HOURS URINE	24 HOURS URINE CONTAINER	1 HOUR	-
URINE UROBILINOGEN	URINE	1 STERILE URINE CONTAINER	1 HOUR	-
VALPROIC ACID (EPILIM)	SERUM	1 SST	1 WORKING DAY	-
VANCOMYCIN	SERUM	1 SST	1 WORKING DAY	-
VANCOMYCIN MIC TEST (E-TEST)	MICROBIAL ISOLATE	AGAR PLATE	2 WORKING DAYS	-
VANILLYLMANDELIC ACID	24 HOURS / RANDOM URINE	24 HOURS URINE CONTAINER	5 WORKING DAYS	-
VARICELLA ZOSTER IGG	SERUM	1 SST	1 WORKING DAY	BATCH RUN: TUESDAY & FRIDAY
VARICELLA ZOSTER IGM	SERUM	1 SST	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
VARICELLA ZOSTER VIRUS - PCR	WHOLE BLOOD / CSF /SKIN SCRAPING / VESICLE FLUID / AMNIOTIC FLUID / EYE VITROUS FLUID/ SKIN / GENITAL LESION / VESICAL SWAB FROM ORAL	1 EDTA / 1 BIJOU BOTTLE / 1 STERILE CONTAINER / 1 SWAB	2 WORKING DAYS	-
VIABILITY (7-AAD)	WHOLE BLOOD	CRYOPRESERVED PRODUCT	3 HOURS UPON RECEIVE	ACTION REQUIRED: Ordering doctor must fill up test request form
VITAMIN B12	SERUM	1 SST	2 HOURS	-
VITAMIN D	SERUM	1 SST	2 HOURS	-
VITAMIN D1-25 OH HYDROXY	SERUM	1 SST	20 WORKING DAYS	-
VOLTAGE-GATED CALCIUM CHANNEL AB	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
VOLTAGE-GATED POTASSIUM CHANNEL AB	SERUM	1 SST	31 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY SATURDAY
VON WILLEBRANDS FACTOR (APTT, F8, vW Antigen, vW Activity)	PLASMA	2 SODIUM CITRATES	14 WORKING DAYS	-
VORICONAZOLE	SERUM	1 RED PLAIN TUBE	14 WORKING DAYS	SEND TO OVERSEAS REFERRAL LABORATORY EVERY TUESDAY
WEIL FELIX & WIDAL TEST (WWF)	SERUM	1 SST	1 HOUR	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
WEIL FELIX & WIDAL TEST (WWF)	SERUM	1 SST	2 HOURS	-
WET SMEAR FOR TRICHOMONAS	SWAB/URINE	1 CHARCOAL SWAB / STERINE URINE CONTAINER	1 HOUR	-
WHOLE EXOME SEQUENCING (WES)	• FETUS: 20ML AMNIOTIC FLUID / 30MG CVS /	FETUS:	36 WORKING DAYS	PATIENT REQUIREMENT:     Gestation age (CVS): 10 - 12 weeks     Min. Gestation age (Amniotic fluid): 15 weeks
WHOLE EXOME SEQUENCING TRIO (WES TRIO)	1ML FETAL BLOOD / 30 MG POC WITHOUT FIX	1 STERILE CONTAINER / EDTA	48 WORKING DAYS	DOCUMENT REQUIRED:
WHOLE GENOME SEQUENCING (WGS)	INDIVIDUAL:  3 ML BLOOD	INDIVIDUAL: EDTA	36 WORKING DAYS	Consent form
WHOLE GENOME SEQUENCING TRIO (WGS TRIO)	NEWBORN:  1 ML BLOOD	NEWPORM:	48 WORKING DAYS	SPECIMEN REQUIREMENT:     Fetal Specimen: Send with 3mL maternal EDTA blood
WILLIAM SYNDROME (Elastin 7Q11.23)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
WOLF-HIRSCHHORN SYNDROME (WHSCR 4P16.3)	WHOLE BLOOD	1 LITHIUM HEPARIN	28 WORKING DAYS	SPECIMEN REQUIREMENT:  • Specimen shall be collected on working hours only
Y-CHROMOSOME DELETION	WHOLE BLOOD	1 EDTA	10 WORKING DAYS	INFORMATION REQUIRED:  • Clinical indication
ZIKA VIRUS GENOME DETECTION	SERUM	1 SST	3 WORKING DAYS	-

SINGLE TEST	SPECIMEN	CONTAINER	EXPECTED TAT	REMARKS
ZINC	WHOLE BLOOD	1 ROYAL BLUE	12 WORKING DAYS	-

## Remarks

- Cut-off day is 1 day before shipment and batch run
- If public holiday falls on batch run, the test will be proceeded in the subsequent working day

CYTOPATHOLOGY	SPECIMEN TYPE	SPECIMEN SPECIMEN	TURNAROUND TIME
ASCITES CYTOLOGY	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
BLADDER WASH	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
BREAST CYST FLUID - LEFT/RIGHT	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
BRONCHIAL BRUSH CYTOLOGY	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRONCHOALVEOLAR LAVAGE (BAL) CYTOLOGY	BAL	STERILE CONTAINER	3 - 5 WORKING DAYS
BRUSHING BLADDER	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRUSHING COMMON BILE DUCT	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
BRUSHING LUNG - LEFT/RIGHT	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRUSHING RENAL PELVIS - LEFT/RIGHT	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRUSHING URETER - LEFT/RIGHT	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRUSHING URETHRA	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
BRUSHING (OTHERS)	BRUSHING	STERILE CONTAINER, BRUSH	3 - 5 WORKING DAYS
CELL BLOCK	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
CSF CYTOLOGY	FLUID	BIJOU BOTTLES	3 - 5 WORKING DAYS
CYTOLOGY (OTHERS)	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
CYTOLOGY URINE	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS

CYTOPATHOLOGY	SPECIMEN TYPE	SPECIMEN SPECIMEN	TURNAROUND TIME
FINE NEEDLE ASPIRATION (FNAC) BREAST - LEFT/RIGHT	ASPIRATION FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) LIVER	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) LYMPH NODE	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) PANCREAS - BODY/HEAD/TAIL	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) SALIVARY GLAND (PAROTID) - LEFT/RIGHT	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) SALIVARY GLAND (SUBMANDIBULAR) - LEFT/RIGHT	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) SPECIMEN - OTHER	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FINE NEEDLE ASPIRATION (FNAC) THYROID - LEFT/ RIGHT	ASPIRATION FLUID	STERILE CONTAINER, SLIDES	3 - 5 WORKING DAYS
FLUIDS (OTHERS)	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
HPV DNA	PAP SMEAR / GENITAL SWAB	DRY SWAB / STERILE CONTAINER	7 - 9 WORKING DAYS
HYDROCELE FLUID	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
NIPPLE DISCHARGE - LEFT/RIGHT (FLUID)	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
OVARIAN CYST FLUID - LEFT/RIGHT (FLUID)	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
PAP SMEAR (CONVENTIONAL)	SLIDE	SLIDE	3 - 5 WORKING DAYS

CYTOPATHOLOGY	SPECIMEN TYPE	SPECIMEN SPECIMEN	TURNAROUND TIME
PAP SMEAR (LIQUID BASED CYTOLOGY)	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
PAP SMEAR (LIQUID BASED CYTOLOGY) & HPV DNA	FLUID	STERILE CONTAINER	7 - 9 WORKING DAYS
PERICARDIAL FLUID	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
PLEURAL EFFUSION - LEFT/RIGHT	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
SPUTUM CYTOLOGY	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
SYNOVIAL FLUID CYTOLOGY	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
URINE CYTOLOGY CATHETER	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
URINE CYTOLOGY CONDUIT	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS
URINE CYTOLOGY ILEAL	FLUID	STERILE CONTAINER	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
ADENOIDS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
ANTRAL BIOPSY/ POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
APPENDIX	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
ASCENDING COLON POLYP/ BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
BARTHOLIN'S CYST	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
BASAL CELL CARCINOMA (SKIN) IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
BIOPSY SPECIMEN	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
BLADDER BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
BLADDER TUMOUR	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
BONE MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
BRAIN SPECIMEN	SMALL	CONTAINER, BIOPSY	4 - 5 WORKING DAYS
BREAST - LEFT/RIGHT	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
BREAST IHC PANEL (ER, PR, HER2)	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
BREAST LUMP (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
BREAST LUMP (SMALL)	SMALL (WITHOUT SUTURE)	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
BREAST WITH HOOKWIRE	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
CAECAL POLYP/ BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
CARBUNCLE	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
CERVICAL BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
CERVICAL POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
COLON AND RECTUM RESECTION	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
COLON BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
COLON POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
COLON RESECTION	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
COMPLEX SPECIMEN-MULTIPLE	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
CONE BIOPSY	ALL SIZE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
CONE BIOPSY CERVIX	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
CONE/LLETZ/LOOP OF CERVIX IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
CORE BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
CORN	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
CYST	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
CYST WALL MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
CYST WALL SMALL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
DERMOID CYST	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
DESCENDING COLON POLYP/ BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
DOUGHNUT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
DUODENAL BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
EAR BX/LESION	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
EBER (EBV-ISH)	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
ELECTION MICROSCOPY	N/A	SPECIAL CONTAINER	30 WORKING DAYS
ECTOPIC PREGNANCY	MEDIUM	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
ENDOBRONCHIAL LUNG BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
ENDOMETRIAL CURRETTINGS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
ESOPHAGUS/GASTRECTOMY IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
EXCISED TUMOR LARGE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
EXCISED TUMOR MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
EXCISED TUMOR SMALL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
EYE LID BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
FALLOPIAN TUBES	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
FALLOPIAN TUBE, LEFT/RIGHT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
FIBROID (LARGE)	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
FIBROID (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
FIBROID (SMALL)	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
FISTULA TRACT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
FORESKIN	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
FORESKIN BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
FROZEN SECTION (PLEASE CALL LABORATORY)	FRESH SAMPLE	CONTAINER, BIOPSY	WITHIN 30 MINUTES
FUNDAL BODY BIOPSY/ POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
GALLBLADDER	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
GANGLION	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
GASTRECTOMY SPECIMEN	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
GASTRIC BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
GASTRIC POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
HAEMRRHOIDS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
HEMICOLECTOMY	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
HEMITHYROID	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
HEPATIC FLEXURE BIOPSY/POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
HER2 DDISH	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
HISTOPATHOLOGY SECOND OPINION (COMPLEX)	UPON REQUEST	BLOCK/SLIDE	6 - 8 WORKING DAYS
HISTOPATHOLOGY SECOND OPINION (INTERMEDIATE)	UPON REQUEST	BLOCK/SLIDE	3 - 5 WORKING DAYS
HISTOPATHOLOGY SECOND OPINION (SIMPLE)	UPON REQUEST	BLOCK/SLIDE	2 WORKING DAYS
HISTOPATHOLOGY SPECIAL STAIN	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
IHC Stain - Antibody Range I	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
IHC Stain - Antibody Range II	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
KI-67 (IHC)	BLOCK/SLIDE	CONTAINER, BIOPSY	4 - 5 WORKING DAYS
KIDNEY	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LARGE SURGICAL SPECIMEN	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LARYNX (LARGE)	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LARYNX (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
LESION	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
LIPOMA (LARGE)	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LIPOMA (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
LIVER BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
LIVER LARGE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LIVER MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
LUMP SMALL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
LUNG BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
LUNG IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
LUNG LOBE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
LYMPH NODE IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
LYMPH NODES (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
LYMPH NODES (SMALL)	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
MASTECTOMY SPECIMEN	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
MASTECTOMY WITH AXILLARY CLEARANCE	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
MEDIUM SIZE SPECIMEN	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
MELANOMA (SKIN) IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
MMA RADICAL SPECIMENS	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
MOLE	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
MSI (IHC)	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
MUSCLE/NERVE BIOPSY (PLEASE CALL LAB ONE WORKING DAY BEFORE)	UPON REQUEST	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
NAEVUS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
NASAL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
NEUROENDOCRINE IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
OESOPHAGUS BIOPSY/ POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
OG JUNCTION MUCOSA	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
OMENTUM	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
OTHER BIOPSY SPECIMEN	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
OVARIAN CYST (LARGE)	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
OVARIAN CYST (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
OVARIAN CYST (SMALL)	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
p63 (IHC)	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
PANCREAS	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
PARATUBAL CYST	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PAROTID GLAND	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
PD-L1 IHC (22C3 CLONE)	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
PILES	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PILONIDAL ABSCESS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PIPELLE	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PITUITARY TUMOUR	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
PLACENTA	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
PLANTAR WART	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PNS BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
POLYP TISSUE	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PRODUCT OF CONCEPTION (POC)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
PROSTATE BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PROSTATE BIOPSY, LEFT/RIGHT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PROSTATE/CORE BIOPSY IHC PANEL	BLOCK/SLIDE	BLOCK/SLIDE	4 - 5 WORKING DAYS
PROSTATIC CHIPS	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
PROXIMAL JEJUNAL MUCOSA	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
PUNCH BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
RADICAL NECK DISSECTION	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
RADICAL PROSTATECTOMY	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
RADICAL SPECIMENS WITH NODES	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
RECTAL BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
RECTAL POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
RENAL BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
RENAL BIOPSY & IMMUNOFLUORESCENCE	SMALL	CONTAINER, BIOPSY & MICHEL'S MEDIUM BOTTLE	3 - 5 WORKING DAYS
RENAL BIOPSY FOR RENAL TRANSPLANT	SMALL	BLOCK/SLIDE	3 - 5 WORKING DAYS
RECTOSIGMOID BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SCALP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SEBACEOUS CYST (MEDIUM)	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
SEBACEOUS CYST (SMALL)	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SEBORRHEIC KERATOSIS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SESSILE POLYP/ BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SHAVE SKIN BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SIGMOID POLYP/ BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
SINUS MUCOSA	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SINUS TRACT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SKIN BIOPSY MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
SKIN BIOPSY SMALL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SKIN IMMUNOFLUORESCENCE	SMALL / FRESH TISSUE	CONTAINER, BIOPSY / STERILE CONTAINER WITH SALINE	3 - 5 WORKING DAYS
SKIN TAG	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SKIN TUMOUR WITH MARGIN	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
SLIDES (H&E / UNSTAINED)	BLOCK/SLIDE	BLOCK/SLIDE	3-4 WORKING DAYS
SMALL INTESTINE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
SMALL SURGICAL SPECIMEN	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SOFT TISSUE	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SPLEEN	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
SPLENIC FLEXURE POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
STOMACH MUCOSA/ POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
SUBMANDIBULAR GLAND	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
SUBTOTAL THYROIDECTOMY	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
TAHBSO	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TAHLSO	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TAHRSO	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TEMPORAL LOBE	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
TERMINAL ILLEUM BIOPSY	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TESTICULAR SPECIMEN	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
THYROID LOBE/NODULE	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
TONGUE BX	SMALL	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TONSIL, LEFT/RIGHT	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TONSILS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TOTAL THYROIDECTOMY	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TRANSVERSE COLON POLYP	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TREPHINE PROCESSING	TREPHINE	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TUMOR LARGE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
TUMOUR MEDIUM	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
TUMOUR SMALL	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
TURBINATES	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS

HISTOPATHOLOGY	SPECIMEN SIZE	SPECIMEN CONTAINER	TURNAROUND TIME
TURP	MEDIUM	CONTAINER, BIOPSY	4 - 6 WORKING DAYS
UTERUS ALONE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
UTERUS W. APPENDAGES	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
UTERUS/TAH	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
VAS DEFERENS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
VOCAL CORD	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
WARTS	SMALL	CONTAINER, BIOPSY	3 - 5 WORKING DAYS
WHIPPLE'S	COMPLEX	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
WHOLE CONE	LARGE	CONTAINER, BIOPSY	6 - 8 WORKING DAYS
BRAF	BLOCK/SLIDE	BLOCK/SLIDE	4 - 6 WORKING DAYS
EGFR LUNG PANEL (EGFR, ALK, ROS1)	BLOCK/SLIDE	BLOCK/SLIDE	7 - 9 WORKING DAYS
KRAS	BLOCK/SLIDE	BLOCK/SLIDE	2 - 3 WEEKS
KRAS/NRAS	BLOCK/SLIDE	BLOCK/SLIDE	2 - 3 WEEKS
NRAS	BLOCK/SLIDE	BLOCK/SLIDE	2 - 3 WEEKS



## **APPENDIX 4**

LIST OF ABBREVIATIONS



## **Appendix 4 - Abbreviations**

ACD : Acid Citrate Dextrose
ADD-ON : Additional Order

A&E : Accident and Emergency
BMA : Bone Marrow Aspirate

BOFF : Business Office

CPG : Clinical Practice Guidelines

CSF : Cerebrospinal Fluid
C&S : Culture and Sensitivity
DNA : Deoxyribonucleic Acid

DOB : Date of Birth

EDTA : Ethylenediaminetetraacetic Acid

EMR : Electronic Medical Record

FEME : Full Examination of the Microscopic Examination

FNAC : Fine Needle Aspiration Cytology

g : grams

GSH : Group, Screen, and Hold GXM : Group and Crossmatch

HCI : Hydrochloric Acid

HDU : High Dependency Unit

HIS : Hospital Information System
HIV : Human Immunodeficiency Virus
HPE : Histopathological Examination

IC No. : Identity Card Number ICU : Intensive Care Unit

LIS : Laboratory Information System
MLS : Medical Laboratory Scientist
MRD : Medical Reports Department
MRN : Medical registration number

MRSA : Methicillin-Resistant Staphylococcus Aureus

NICU : Neonatal Intensive Care Unit
NPA : Nasopharyngeal Aspirates
OPD : Outpatient Department
OT : Operating Theatre

PAP : Papanicolaou

PBF : Peripheral Blood Film

PCR : Polymerase Chain Reaction

POC : Product of Conception

QR : Quick Response

RFP : Respiratory Full Panel

ROSE : Rapid On-Site Cytological Evaluation

SMCV : Sunway Medical Centre Velocity

SST : Serum Separator Tube SRN : State Registered Nurse STI Sexually Transmitted Infection

Turnaround Time TAT ТВ Tuberculosis

VTM