



OUTPATIENT LABORATORY REQUISITION

Please present your Care Card with each Visit

ORDERING PHYSICIAN: ADDRESS, MSP PRACTITIONER NUMBER

Highlighted fields must be completed to avoid delays in specimen collection and patient processing

For tests indicated with a shaded tick box , consult provincial guidelines and protocols (www.BC.Guidelines.ca)

Bill to MSP ICBC WorkSafeBC PATIENT OTHER: _____

PHN NUMBER _____ ICBC/WorkSafeBC/RCMP NUMBER _____ LOCUM FOR PHYSICIAN: _____

SURNAME OF PATIENT _____ FIRST NAME OF PATIENT _____ MSP PRACTITIONER NUMBER: _____

DOB: YYYY MM DD SEX: M F Pregnant? YES NO Fasting? _____ h pc If this is a STAT order please provide contact telephone number: _____

TELEPHONE NUMBER OF PATIENT _____ CHART NUMBER _____ Copy to Physician/MSP Practitioner Number: _____

ADDRESS OF PATIENT _____ CITY/TOWN _____ PROVINCE _____

DIAGNOSIS _____ CURRENT MEDICATIONS/DATE AND TIME OF LAST DOSE _____

HEMATOLOGY URINE TESTS CHEMISTRY

- Hematology profile
- PT-INR On warfarin?
- Ferritin (query iron deficiency)
HFE - hemochromatosis (check ONE box only)
- Confirm diagnosis (ferritin first, +/- TS, +/- DNA testing)
- Sibling/parent is C282/C282Y homozygote (DNA testing)

- Urine culture - list current antibiotics:
- Macroscopic → microscopic if dipstick positive
- Macroscopic → urine culture pyuria or nitrite present
- Macroscopic (dipstick) Microscopic
- Special case (if ordered together)
- Pregnancy test

- Glucose - fasting (see reverse for patient instructions)
- Glucose _____ hours post meal
- GTT - gestational diabetes screen (50 g load, 1 hour post-load)
- GTT - gestational diabetes confirmation (75 g load, fasting, 1 hour & 2 hour test)
- Hemoglobin A1c
- Albumin/creatinine ratio (ACR) -Urine

MICROBIOLOGY - label all specimens with patient's first & last name, DOB and/or PHN & site

ROUTINE CULTURE

- List current antibiotics: _____
- Throat Sputum Blood Urine
 - Superficial Deep
 - Wound Site: _____
 - Other: _____

HEPATITIS SEROLOGY

- Acute viral hepatitis undefined etiology
Hepatitis A (anti-HAV IgM)
Hepatitis B (HBsAg, anti-HBs)
Hepatitis C (anti-HCV)
- Chronic viral hepatitis undefined etiology
Hepatitis B (HBsAg; anti-HBc; anti-HBs)
Hepatitis C (anti-HCV)
- Investigation of hepatitis immune status
Hepatitis A (anti-HAV, total)
Hepatitis B (anti-HBs)
- Hepatitis marker(s)
HBsAg
(For other hepatitis markers, please order specific test(s) below)

LIPIDS

- one box only. For other lipid investigations, please order specific tests below and provide diagnosis.
- Baseline cardiovascular risk assessment or follow-up (Lipid profile, Total, HDL & LDL Cholesterol, Triglycerides, fasting)
- Follow-up treated hypercholesterolemia (Total, HDL & non-HDL Cholesterol, fasting not required)
- Follow-up treated hypercholesterolemia (ApoB only, fasting not required)
- Self-pay lipid profile (non-MSP billable, fasting)

VAGINITIS

- Initial (smear for BV & yeast only)
- Chronic/recurrent (smear, culture, trichomonas)
- Trichomonas testing

HIV SEROLOGY

- HIV SEROLOGY (patient has legal right to choose nominal or non-nominal reporting)
- Nominal reporting Non-nominal reporting

THYROID FUNCTION

- Suspected Hypothyroidism (TSH first, +/-FT4)
- Suspected Hyperthyroidism (TSH first, +/-FT4, +/-FT3)
- Monitor thyroid replacement therapy (TSH Only)

GROUP B STREP SCREEN (Pregnancy only)

- Vagino-anorectal swab Penicillin allergy

OTHER CHEMISTRY TESTS

- Sodium Creatinine / eGFR
- Potassium Calcium
- Albumin Creatine kinase (CK)
- Alk phos PSA- MSP billable
- ALT PSA screening (self-pay)
- Bilirubin
- GGT
- T. Protein

CHLAMYDIA (CT) & GONORRHEA (GC)

- CT & GC testing
- Source/site: Urethra Cervix Urine
- GC culture: Throat Rectal
- Other: _____

OTHER TESTS

- Standing order requests - expiry & frequency must be indicated
- ECG Fecal occult blood (age 50-74 asymptomatic q 2y) Copy to Colon Screening Program
- Fecal occult blood (other indications)

STOOL SPECIMENS

- History of bloody stools? Yes
- C. difficile testing
- Stool culture
- Stool ova & parasite exam
- Stool ova & parasite (high risk, 2 samples)

DERMATOPHYTES

- Dermatophyte culture KOH prop (direct exam)
- Specimen: skin Nail Hair
- Site: _____

SIGNATURE OF PHYSICIAN _____ DATE SIGNED _____

MYCOLOGY

- Yeast Fungus Site: _____

DATE OF COLLECTION _____ TIME OF COLLECTION _____ PHLEBOTOMIST _____ TELEPHONE REQUISITION RECEIVED BY: (employee/date/time)

INSTRUCTIONS TO PATIENTS (See reverse)

Other Instructions:

The personal information collected on this form is collected under the authority of the Personal Information Protection Act. The personal information is used to provide medical services requested on this requisition. The information collected is used for quality assurance management and disclosed to healthcare practitioners involved in providing care or when required by law. Personal information is protected from unauthorized use and disclosure in accordance with the Personal Information Protection Act and when applicable the Freedom of Information and Protection of Privacy Act and may be used and disclosed only as provided by those Acts.

This requisition form, when completed for tests performed by FHA Laboratories, is a medical referral to the Laboratory Physicians of FHA.

LOCATION

PHONE

HOURS OF OPERATION

ABBOTSFORD

Abbotsford Regional Hospital & Cancer Centre,
32900 Marshal Road
Gateway Medical Lab, 2051 McCallum Rd

604-851-4700
Ext. 644851
604-870-7555

Please refer to:

<http://www.fraserhealth.ca>

- Find us
- Find a service
- Type Outpatient Laboratory
- Select location

BURNABY

Burnaby Hospital, 3935 Kincaid Ave

604-412-6245

Or

<http://www.fraserhealth.ca/find-us/services/our-services?program-ed=8859>

CHILLIWACK

Chilliwack General Hospital, 45600 Menholm Rd

Sardis Outpatient Lab, #5 - 6014 Vedder Rd

604-795-4141
Ext. 614108
604-824-9627

<http://www.fraserhealth.ca/find-us/services/our-services?program-ed=8859>

DELTA

Delta Hospital, 5800 Mountainview Blvd

604-940-3431

For our most up to date Outpatient hours

HOPE

Fraser Canyon Hospital, 1275 - 7th Ave

604-860-7702

LANGLEY

Langley Memorial Hospital, 22051 Fraser Hwy

604-533-6403

MAPLE RIDGE

Ridge Meadows Hospital, 11666 Laity St

604-463-1802

MISSION

Mission Memorial Hospital, 7324 Hurd St

604-814-5115

NEW WESTMINSTER

Royal Columbian Hospital, 330 E. Columbia St

604-520-4300

PORT MOODY

Eagle Ridge Hospital, 475 Guildford Way

604-469-3143

SURREY

Surrey Memorial Hospital, 13750 - 96 th Ave
Jim Pattison Outpatient Care and Surgery Centre
9750 140th Street

604-588-3324
604-582-4555

WHITE ROCK / SOUTH SURREY

Peace Arch Hospital, 15521 Russell Ave

604-535-4500
Ext 757623

Ocean Park Lab, 1673 - 128 th St

604-536-0699

INSTRUCTIONS FOR PATIENTS

FASTING TESTS INCLUDE: Fasting glucose, Glucose/Lactose Tolerance testing, Amino Acids, preferred for iron - No food or drink for 8 hours before test except for sips of water.

Triglycerides, Homocysteine

No food or drink for 10 hours before test except of sips of water.

For all tests regular medication may be taken.

Cortisol: You are required to rest in lab for 30 minutes before collection of your blood for Cortisol levels. AM (morning) Cortisol must be collected before 10:30 am and PM (afternoon) Cortisol are collected between 3 pm and 6 pm - lab staff will advise you of the time to return for your PM Cortisol. Both tests should be performed on the same day.

THERAPEUTIC DRUG MONITORING: Blood is usually taken just prior to the next dose. Information about time and amount of the last dose and dosing frequency is required for interpretation.

TESTS THAT MAY REQUIRE AN APPOINTMENT, A SPECIFIC TIME OF COLLECTION OR MAY BE DONE ONLY AT CERTAIN LABS::

Please call the Lab you plan to go to for instructions and details.
Glucose/Lactose Tolerance Tests, H. Pylori Breath Test,
Testosterone (collected 7:00 am to 10:00 am only),
Special Coagulation Testing, Special Endocrine Stimulation Tests,
Sweat Tests, and Bone Marrows & Needle Aspirates.

TESTS REQUIRING SPECIAL CONTAINERS:

"Take specimens to the Laboratory as soon as possible."

24 hr Urine collections	FIT Kits
Urine organic acids	72 hr Fecal Fat
Urine for Chlamydia	Ova & Parasites
Midstream Urine for C & S / TB	Stool for C & S
Sputum for Acid Fast Bacilli or C & S	

ELECTROCARDIOGRAMS (ECG) & HOLTER MONITORING:

ECGs are available at most FHA laboratory collection sites and do not require an appointment. Holter monitoring is available at most FHA Cardiology departments and do require an appointment.

Exceptions: No ECGs - Surrey Memorial Hospital, Royal Columbian Hospital, Sardis, Sunset, Ocean Park & Gateway laboratory Collection Sites

ECG requires appointment - Eagle Ridge Hospital

No Holter Monitoring - Mission Memorial Hospital

Holter Monitoring performed by laboratory - Fraser Canyon Hospital