PROVISION OF LABORATORY SERVICES TO GENERAL PRACTITIONERS BY THE LABMED DIRECTORATE

1. SCOPE 3

2. RESPONSIBILITIES 3

3. REFERENCES 3

4. DEFINITIONS 4

5. DOCUMENTATION 4

6. GENERAL 4

7. PROCEDURE 5

7.1 PROVISION OF EMERGENCY CONTACT DETAILS (MOBILE PHONE) FOR REPORTING OF "CRITICAL" RESULTS OUTSIDE NORMAL PRACTICE HOURS 5

7.2 ORDER COMMUNICATIONS: GP ORDER COMMUNICATIONS SYSTEM – ELECTRONIC TEST ORDERING AND RESULTS REPORTING 7

7.3 UTILISATION OF HEALTHLINK FOR ELECTRONIC LABORATORY TEST ORDERS AND RESULTS 8

7.4 PATIENT IDENTIFICATION 10

7.5 CRITERIA REQUIRED FOR LABELLING PATIENT SPECIMENS 10

7.6 CRITERIA REQUIRED FOR PATIENT REQUEST FORMS 11

7.7 ADDITIONAL REQUEST FORM INFORMATION 12

7.8 PHLEBOTOMY SERVICES AT ST. JAMES'S HOSPITAL 13

7.9 CHRONIC DISEASE MANAGEMENT 13

7.10 ENSURING SAFE DISPOSAL OF ALL MATERIALS USED IN SPECIMEN COLLECTION 14

7.11 SPECIMEN TRANSPORT 14

7.12 COMMUNICATION 15

8 TRAINING 15

9 APPENDICES 15

1. SCOPE

The Laboratory Medicine and Molecular Pathology (LabMed) Directorate of St James's Hospital is committed to the provision of a quality laboratory service to General Practitioners (GPs) and to their adult patients, whose practice is operating and residing, primarily, within the St. James's Hospital constituency area. Specimens are processed from adults aged 16 years or older. Specimens collected from Children will not be processed from GPs.

This document describes the policy and procedures that are in place within the SJH Centre for Laboratory Medicine and Molecular Pathology with respect to the provision of laboratory services to General practitioners including GPs supporting nursing homes.

This procedure aims to:

- To direct General Practitioners using the laboratory services in the procedures and standards they are required to meet in order for the laboratory to provide a safe and effective quality service.
- To define the laboratory pathology investigations routinely available to General Practitioners.
- To define the approval process and areas within which St James's Hospital Laboratory will provide phlebotomy and laboratory services to General Practitioners.

2. RESPONSIBILITIES

It is the responsibility of:

- The Laboratory Clinical Director, Laboratory Manager, Quality Manager, IT Manager in conjunction with the heads of departments, to ensure that this procedure is adequate.
- General Practitioners and their local teams must adhere to the procedure at all times.

3. REFERENCES

ISO 15189 – Medical Laboratories – Requirements for Quality & Competence (REF-GEN-0254)

HSE Communication of Critical Results for Patients in the Community National Laboratory Handbook (REF-GEN-0199)

The Communication of Critical and Unexpected Pathology Results, Royal College of Pathologists (UK), 2017 (REF-GEN-0173)

4. DEFINITIONS

CPL: Central Pathology Laboratory

DOB: Date of Birth

GP: General Practitioner

MRN: Medical Record Number

5. DOCUMENTATION

LP-GEN-0001: Specimen Collection & Handling

LP-GEN-0003: Specimen Reception

LP-GEN-0007 LabMed User Guide

LP-GEN-0009 Processing GP Laboratory Orders Using Healthlink

LF-GEN-0014 GP Service request Application form

CF-PHL-0009 Phlebotomy Tube Order of Draw

6. GENERAL

The defined timelines for delivery and receipt of patient GP specimens collected by General Practitioner services for testing in the LabMed Directorate is Monday to Friday from 8 am to 5 pm. Please do not deliver specimens after 5pm on weekdays as it places a significant burden on our on-call scientific teams and delays the processing of urgent specimens. There is no routine or on-call weekend testing service available to General Practitioners'. Any samples received after the cut-off time may be rejected and requesting GPs will be notified accordingly.

GPs requiring access to pathology services that are outside the scope of general practice, such as, for the purpose of occupational health screening (e.g. visa applications), vaccinations, fertility testing, specialist clinics etc., are required to enter into a service level agreement with the SJH LabMed Directorate for those services. Please contact the Laboratory Manager to progress service level agreements and arrangements.

GPs requiring access to pathology services for the purpose of treating adult patients should reside within the designated St James's Hospital HSE Hub areas and require an application to be made to the directorate. GPs should use the Hospital laboratories covering their own natural constituency area.

The current test repertoire available to General Practitioners is determined by the laboratory consultants, based on best practice guidelines, including the requirements of national programmes. Medical scientists may assess the suitability of any laboratory tests ordered and reject requests based on laboratory procedures, technical/scientific competency and patient history. General Practitioners can access laboratory information from the LabMed User Guide (LP-GEN-0007) on the St James's website (https://www.stjames.ie/services/laboratorymedicinelabmed). See the routine list of tests available to GPs in Appendix 1 of this policy. Laboratory tests not listed in Appendix 1 are not routinely available and requests may be rejected based on inadequate clinical information provided.

7. PROCEDURE

7.1 Provision of Emergency Contact Details (Mobile Phone) for Reporting of "Critical" Results Outside Normal Practice Hours

(Reference: HSE Communication of Critical Results for Patients in the Community National Laboratory Handbook)

7.1.1 All GP practitioners are responsible for developing a system whereby test results returned from the SJH medical testing laboratories are examined and appropriate actions taken in a timely manner.

7.1.2 It is recognised that occasionally, unexpected critically abnormal results are found on analysis, such that laboratory staff become aware of a potential emergency before the treating GP practitioners. In these circumstances, laboratory staff must follow procedures to contact the requesting GP to relay the result.

7.1.3 All GP practitioners must have a system in place whereby appropriately trained staff receive patient results, and communicate same within the timeframe indicated. Most laboratories within SJH operate a normal service between 8am and 8pm with

additional on-call services 24/7 restricted to the Biochemistry, Haematology, Blood Transfusion and Microbiology laboratories. GP patient specimens requesting community tests are frequently analysed outside routine hours. GP Practitioner systems must be operational at all times and GP Practitioners must update this 24/7 contact information with the SJH laboratories in the event of any changes.

7.1.4 SJH Medical testing laboratories require a register of General Practitioners (GPs) and all health care professionals and services who send specimens to the laboratory, including details of the appropriate contact number for transmission of critical results, during working hours, and out of hours. This phone number must be answerable by the GP (not just an answer service). Additionally, GPs are given the option of supplying their personal mobile phone number or other contact details for emergency use only directly to SJH. There is no laboratory requirement to include a 24-hour phone number on a patients request form.

7.1.5 All GP practitioners requiring laboratory medicine services must provide 24-hour contact details for reporting of "critical" patient results outside normal practice hours. This is a mandatory requirement for access to the Hospital's laboratory services. Failure to put a robust 24/7 service in place for critical results may result in termination of laboratory services to this practice due to the significant risk to patient care.

7.1.6 New General Practitioners within our constituency area requesting access to the Laboratory services in St. James's Hospital must complete an application form (form available from LabMedIT@stjames.ie). Sections of the form require GPs to give the emergency contact number and must commit to using Healthlink for test requesting and receiving electronic reports. Applications are reviewed on a case-by-case basis.

7.1.7 Existing GPs must also provide this emergency mobile number as a mandatory part of retaining the contract for services. Where a proxy agency e.g. "DubDoc" or "LukeDoc" is used by a GP Service, arrangements must be made between the relevant parties to ensure that markedly abnormal results can be telephoned directly to the agency, without complication, and that follow up action will occur. DubDoc will not manage critical patient results but will provide contact details for a GP service where available. This is a critical clinical risk management issue for all parties concerned. In the event that a proxy agency or the requesting GP is non contactable, then the Consultant Pathologist, based on the laboratory results, the

patient's history and any other relevant clinical information, may contact the patient or next-of-kin directly, if deemed appropriate in the circumstances. The recording of the patient's phone number on the request form will assist this process, in the unlikely event that it becomes necessary. This approach is not ideal but is a patient safety issue in the event the patient's doctor is not contactable. When a patient has no means of transport to ED, and the result indicates imminent danger, the result should be referred to the laboratory medicine consultant on call. If considered appropriate the laboratory medicine consultant should contact the National Emergency Operations Centre (NEOC) on 0818 308000 and select option 1. Identify yourself and indicate that this is an emergency laboratory call to the NEOC operator.

7.1.8 If the patient or requesting GP/clinician cannot be contacted, and the patient is in imminent danger (Category A result) the result will be discussed by laboratory staff with the laboratory medicine consultant. When clinically indicated the laboratory medicine consultant will consider contacting Gardaí for assistance, and giving guidance on the level of urgency of treatment.

7.2 Order Communications: GP Order Communications System – Electronic Test Ordering and Results Reporting

7.2.1 All GPs accessing the St. James's Hospital laboratory service **must** be registered with Healthlink (www.Healthlink.ie) for both ordering laboratory tests and receiving laboratory reports, electronically. Healthlink will be part of the new national MedLIS system and when implemented, there will be a new methodology of ordering tests for laboratories that have implemented the new system.

7.2.2 Each GP is allocated a unique code for electronic ordering and results. Under no circumstances may a GP use a Healthlink or SJH code that is not assigned to them. Such fraudulent activities may result in termination of laboratory service to the practice due to the serious risk to patient care.

7.2.3 The laboratory does not offer a referral service for tests not performed at St James's hospital (except in exceptional circumstances based on Consultant pre-approval).

7.2.4 The laboratory team does not report results to multiple requestors. Only the GP named on the request form with the unique SJH GP code will receive results reports.

7.2.5 Certain STI tests (listed on Healthlink) are restricted to specific General practitioners / clinics and will be triaged locally by the laboratory teams before progressing requests.

7.2.6 Blood transfusion tests (not listed on Healthlink) are highly specialised and are not routinely offered to GPs under any circumstance due to the nature of this discipline. However, GPs may be requested to assist with patient management by the laboratory and/or haematology team at SJH on a case-by-case basis.

7.2.7 GPs using the Healthlink system must at a minimum provide the first line of the patient's address to avail of the Healthlink messaging system, without which, the order cannot be transmitted. Patient address information must be kept up to date by practitioners.

7.2.8 GPs, currently using the laboratory services are required to adopt Healthlink for electronic ordering and receiving reports electronically.

Note: From a patient safety perspective Healthlink is the preferred mode as it eliminates potential errors associated with the manual system (5% error rate reported internationally) thus ensuring the correct results are reported on the correct patient in a timely manner. In addition, it mitigates against potential patient data breaches under the new General Data Protection Regulations, which came into force in May 2018. Such data breaches are a higher risk with manual paper-based systems.

7.3 Utilisation of Healthlink for Electronic Laboratory Test Orders and Results

The Healthlink system is designed to process electronic laboratory ordering of test results and the real-time reporting of laboratory results to General Practitioners.

Best Practices for using the Healthlink system include the following:

7.3.1 Please do not over order laboratory tests: tests are expensive and time consuming for medical scientists, and excessive ordering of laboratory tests will delay results for all patients, will negatively impact our inpatients at SJH and will generate huge expense for the laboratory (monies that should otherwise be spent on new test development).

7.3.2 All laboratory tests routinely available to General Practitioners can be ordered on Healthlink, by ticking each individual test request box on the electronic order form.

Please take a moment to check that all required tests have been ticked prior to confirming the Healthlink order.

7.3.3 SJH has adopted the National Centre for Pathology Program (NCPP) laboratory testing guidelines and reserves the right to restrict specialised tests to GPs. GPs may handwrite additional tests at the bottom of the Healthlink request form after printing based on specific clinical need for individual patients. The laboratory team will review these additional tests and determine suitability for processing. Some tests may be rejected based on scientific or clinical review.

7.3.4 The Healthlink system will indicate the specimen type(s) required for collection (e.g. EDTA, Serum etc.) and the number of specimens required for the requested laboratory tests.

7.3.5 The current test repertoire available to General Practitioners on Healthlink is determined by the laboratory consultants, based on best practice guidelines, including the requirements of national programmes.

7.3.6 Any laboratory tests that are not listed on Healthlink **are not** routinely available to General Practitioners.

7.3.7 Any laboratory test requests not found on Healthlink can be submitted by handwriting the test at the bottom of the Healthlink request form once printed.

7.3.8 Each special test request will be assessed individually by clinical and/or laboratory personnel to determine its suitability for the patient based on the clinical details provided. Actions may include rejection of the test request.

7.3.9 The Healthlink system is only as accurate as the patient data entered into the system by practice staff. Please ensure that all patient data, including patient name, address and DOB, are accurate in both the Practice Management System and the local Healthlink database during the patient visit. The majority of errors relate to out of date addresses for patients on the local Health link database. The Healthlink support team can assist in updating patient demographics in the local Healthlink database to ensure they match what is in the Practice Management System. Maintaining accurate records minimises the risk of non-compliance with our Laboratory Specimen and Request Form Acceptance criteria due to incorrect or mismatched patient details.

7.3.10 Please include clinical details with all laboratory requests. This will assist in the interpretation of laboratory results and guide the requirement for any additional or follow-on testing that may be indicated, especially by abnormal results.

7.4 Patient Identification

The practice phlebotomy/nursing staff must have in place a system to positively identify the patient before taking specimens and labelling them. Responsibility to ensure that pre-collection requirements have been met (e.g. fasting) also lies with practice phlebotomy/nursing staff. Persons who request the laboratory examination of the specimen have the responsibility of ensuring that the patient is correctly identified, the request form (electronic or hardcopy) is correctly completed and the specimen is correctly labelled before transporting to the laboratory for processing.

To avoid patient upset, please ensure that all patient details (Specimen and request forms) are correct and verified with no discrepancies before transporting to the laboratory.

It is the responsibility of the LabMed Clinical and Scientific teams to assess the suitability of the request received (test requested, request form information, specimen type and specimen quality) and the relevant clinical details provided by the requestor to support the laboratory request for testing. The LabMed team reserves the right to reject any requests that do not comply with laboratory policies/procedures and ISO 15189 requirements. See our Policy on Specimen Collection and Handling procedures (LP-GEN-0001) on the LabMed user guide.
LP-GEN-0001 Specimen Collection & Handling

7.5 Criteria required for Labelling Patient Specimens

7.5.1 The use of printed labels produced by the GP practice management system that are suited to the sample container size are the preferred labelling method as it improves the transfer of accurate and legible information.

7.5.2 Addressograph/patient labels must clearly distinguish between patient Surname and patient Forename.

7.5.3 Refer to LP-GEN-0001 for Specimen Collection and Handling details including mandatory and desirable criteria for specimens.

7.5.4 We note the following for information purposes:

- In certain cases, information relating to the timing of specimens is required, for example, in dynamic function testing, to identify peak and trough or pre- and post-treatment specimens or where diurnal variation and circadian rhythms are important for interpreting the result
- The sex of patient is particularly important where requested investigations have sex-related reference ranges such as hormone testing. No sex specific reference ranges will be reported if sex is not provided.
- It is a mandatory requirement that Histopathology specimens are identified with the specimen type / site specimen (as appropriate); and it is highly recommended that all non-blood specimens e.g. sputum, MSU, ear swab, etc. are also labelled to identify the sample type/site. To note: This information is a mandatory requirement on the associated request form.
- It is best practice to record the signature of the person taking the specimen

7.5.5 Specimens that fail to meet minimum criteria will be rejected for analysis and will not be processed. There is no process in place for laboratory personnel to retrospectively change patient details for specimens after they are received into the laboratory and rejection processes will proceed.

7.6 Criteria Required for Patient <u>Request Forms</u>

Note: Incomplete request forms are not acceptable and will result in specimen rejection. A repeat sample will be required which inconveniences your patients and delays the availability of test results.

7.6.1 The Request Form accompanying the sample/specimen must be legibly written. The legibility of the manual request form is vital to ensure all patient details are accurate. A clearly <u>typed or printed (i.e. use of block capitals)</u> request form must be sent to reduce the risk of errors in patient identification, test selection or location.

7.6.2 Patient's Clinical details and relevant history (including any drug, anticoagulant therapy or antibiotic therapy) will help in interpretation of results.

7.6.3 Refer to LP-GEN-0001 for Specimen Collection and Handling details including mandatory and desirable criteria for Request Forms.

7.6.4 Request forms that fail to meet minimum criteria will be rejected for analysis and will not be processed.

7.7 Additional Request Form Information

Please note:

7.7.1 Additional information that might assist with the analysis and reporting should also be included.

7.7.2 Where requests are being sent on one or both of a pair of twins, please highlight this on the request form(s). There is an increased risk of data entry errors where the surname, date of birth, sex and address are identical for both twins. Highlighting this will ensure extra checking by laboratory staff when entering these requests.

7.7.3 Where available a patient addressograph label and the GP practice stamp must be used on all sheets of the request form as it improves the transfer of accurate clear information.

7.7.4 Where GP specimens are being referred to another hospital prior to arrival at the LabMed Directorate, the results will only be reported back to the referring hospital, not the GP.

7.7.5 SJH Request forms (manual request) are available on our website (https://www.stjames.ie/LabMedInformation/gpexternalrequestforms).

7.7.6 Certain investigations may require additional information on the specimen or request form. For example, this process has been introduced for Vitamin D requests in Biochemistry and Vitamin B12/Folate requests in Haematology. These request forms should be completed and included with the Healthlink form when sending to the laboratory for processing (one bag for all specimens and all forms per patient). All additional request forms are available at the link:

GP & External Request Forms | St James's Hospital

https://www.stjames.ie/services/laboratorymedicinelabmed/policiesandguidelines/gpexternalrequestforms/

or by clicking on this link **Lab User Manual**

7.7.7 Add-on Requests: Time limits for requesting additional tests/examinations are detailed the individual department sections of the Online User Guide (LP-GEN-0007) as these may be department/specimen/test specific. Add-on requests are processed by **scientific staff** in the relevant department. Add on testing is only completed if a suitable sample is available (i.e. if analyte/sample stability allows).

7.8 Phlebotomy Services at St. James's Hospital

St. James's Hospital has traditionally provided a limited phlebotomy service for GP referred patients. Access to this SwiftQueue service is by appointment only. Patients need to make a booking online or the GP can make the booking on their behalf by accessing the website GP Blood Test appointment. They can also log onto to www.stjames.ie and select ***Patients*** from top bar and then select ***GP Blood Test.***

A booking can also be made via Freephone number, which is **(01) 291 4516**. The appointment line will be open Mon-Fri from 2pm-4pm.

Outside these hours you will be directed to call 1517 345 333

[1517 is a premium rate service charged at €2.03 per call incl VAT. Calls from mobiles will be higher]

The SJH Phlebotomy Tube Order of Draw instructions are available on the LabMed User guide (https://www.stjames.ie/media/CFPHL0009.pdf).

7.9 Chronic Disease Management

Please be cognisant of the national referral criteria for the GP direct access to the Chronic Disease Management program including our NTproBNP service. Please ensure that you only refer tests fulfilling the criteria below to the laboratory, to ensure that this service can be continued.

- One NTproBNP test will be facilitated for the first GP Structured Chronic Disease Management registration visit for each patient who has a diagnosis of type 2 diabetes, ischemic heart disease or atrial fibrillation. This is in line with the GP Agreement 2019. An allowance may also be made for individuals who have a pre-existing clinical diagnosis of one of the above chronic diseases and who are already registered on the Structured Chronic Disease Management Programme but who still require an NTproBNP test to establish a baseline for their condition;
- Outside of these criteria, an NTproBNP may be ordered in the following circumstances, where the GP feels it's clinically indicated;
    1. For investigation of a patient who has one of the above diagnoses and presents with deterioration in symptoms; consistent with heart failure; and
    2. As part of the investigative work up of a patient who presents with symptoms consistent with heart failure.

7.10 Ensuring Safe Disposal of All Materials Used in Specimen Collection

7.10.1 Dispose of all materials used in the collection and phlebotomy of patient specimens in a safe and secure manner in line with local regulations.

7.11 Specimen Transport

7.11.1 It is the responsibility of the requestor to ensure that all specimens are delivered safely and securely to the LabMed Specimen Reception area; in a manner that does not pose a threat to the health and safety of anyone coming in contact with the sample and is in compliance with regulations. Leaking / damaged specimens will not be accepted.

7.11.2 The packaging used for specimens for transport to the laboratory must be in accordance with current "Agrement Dangereux Routier" (ADR 2019) Safety Legislation and in accordance with SJH laboratory policy available from https://www.stjames.ie/services/laboratorymedicinelabmed/PoliciesandGuidelines/ Advice should be sought from the Laboratory if required.

7.11.3 The main safety principle of packing and labelling all specimens in such a manner so that they present no threat to those sending, transporting or receiving them must be observed. The specimen transport bag prevents the contamination of other containers, request forms, the hands of the specimen receptionist and the immediate environment. The specimen is preserved and stabilised during transport or storage.

7.11.4 Specimens should be sent to the laboratory as quickly as possible after they are obtained in order to avoid sample deterioration which can cause subsequent inaccurate and possibly misleading results. Of particular risk is falsely elevated potassium.

7.11.5 Certain investigations may require that the specimen is transported under specific conditions or within a specific time interval. These are detailed in each department's section of the LabMed User Guide at www.stjames.ie (click on the Lab Services tab) or by clicking on this link **Lab User Manual**

7.12 Communication

7.12.1 Communication and collaboration between St. James' Hospital and GPs will be through the GP Liaison Committee.

7.12.2 Additional communication is facilitated through the SJH website and by direct contact with the laboratory.

7.12.3 In the event an urgent report is required, the User must alert the laboratory by telephone to clearly state the nature of the urgency and must ensure it is clearly indicated on the Request Form.

7.12.4 The laboratory administration team is not resourced to issue routine laboratory results by phone except in emergency situations. Results are issued electronically to over 99% of our GPs and electronic systems should be consulted before contacting the laboratory team.

7.12.5 The Laboratory Manager, Mrs Fiona Kearney, can be contacted at **fikearney@stjames.ie** for information

7.12.6 The laboratory administration teams can be contacted at the following email addresses: **histologyrequests@stjames.ie** **or** **bsladmin@stjames.ie** **or** **microbiology@stjames.ie**

7.12.7 Phoning the laboratory for results: Please contact the Blood Sciences office at 01 416 2051, the Microbiology office at 01 416 2966 and the Histology office at 01 416 2992.

8 TRAINING

Training on this procedure should be performed at local practices who are approved to access laboratory services at St James's hospital.

9 APPENDICES

Appendix 1: List of Laboratory Tests routinely available to GPs via Healthlink

Appendix 2: List of Laboratory tests never available to GPs under any circumstance

Appendix 1: List of Laboratory Tests Routinely Available to GPs on Healthlink

Specimen types vary according to test requirements. This information is detailed on Healthlink.

Biochemistry (n=41)		Haematology	Immunology	Microbiology
Thyroid Function (Free T4/TSH)	Urate	Vitamin B12/Folate (Fasting sample)	Anti-CCP	Culture & Sensitivity
LH & FSH	Amylase		Rheumatoid Factor	Fungal Culture
Cortisol* (time must be stated)	Magnesium	Infectious Mononucleosis screen	Thyroid microsomal antibodies (TPO)	Mycobacterial investigation
PSA (Supply Clinical details)	Creatine Kinase	Coagulation screen	Tissue Transglutaminase antibody (tTg)	Stool investigation
Oestrodial	Iron studies	INR (Warfarin)	IgG/A/M Protein Electrophoresis	Ova & Parasites (based on clinical details)
Progesterone	Digoxin	FBC	Connective Tissue Disease (CTD) Screen	Chlamydia / Gonorrhoea
Prolactin	Carbenamazapine	ESR	Only 3 Allergy tests permitted: • Animal Disorders (allergy) • House dust mite (allergy) • Peanut Allergy • Mixed Grass pollen (allergy)	Herpes Simplex Virus
SHBG	Phenobarbitone	Ferritin		Varicella Zoster Virus (VZV) IgG (Immune status) **
Testosterone	Phenytoin	Malaria screen (must contact lab)		STI screen (syphilis, HIV, HBsAg)
Lithium	HCG	G6PD		Measles/Mumps/Rubella IgG screen
CA 125	Theophylline	Sickle cell/ Thalassaemia		Viral Hepatitis B & C screen (HBsAg + anti-HCV)
Glucose (2hr PP)	Valproate			Hepatitis B Infection status (HBsAg, anti-HBc)
Haemoglobin A1c	C Reactive Protein (CRP)			Hepatitis A IgG (HAV IgG)
Pregnancy test	Lactate Dehydrogenase			Hepatitis B surface Antigen (HBsAg)
Faecal Occult Blood (FOB)	NT Pro-BNP			Hepatitis B surface Antibody (Post vaccination)
Androstenedione	Renal Profile			Hepatitis C Antibody (anti-HCV core IgG)
Lipid Profile (fasting)	Bone Profile			Hepatitis C PCR (HCV RNA; current infection)
Liver Profile	Microalbumin			Syphilis serology
Glucose (random)	Protein/Creatinine Ratio			HIV Ag/An Combo assay
Glucose (fasting)				Individual serology screens (HIV, Hep B, Hep C, Hep A)
				Individual Molecular screens (HSV PCR)

* For Cortisol, if the request relates to a Dexamethasone suppression test, this information must be clearly stated in the patient clinical details on the request form.

** Please supply a separate sample for referral to the NVRL

Appendix 2: List of Laboratory Tests Never Available to GPs Under Any Circumstance

There are certain highly specialised tests that are never made available to GPs via the laboratory ordering system. These are highly specialised tests for inpatients only under Consultant management. This list includes but not limited to:

Immunology Tests

	Available on Healthlink	Available with clinical details	Not available to GPs
AAT Phenotype	No	No	no direct order
Chlorohexidine C8	No	No	no direct order
Acetylcholine receptor Abs.	No	No	no direct order
ADHM Adhesion Molecules	No	No	no direct order
ADRA Adrenal Abs.	No	No	no direct order
AF10 Sesame Seed (F10)	No	No	no direct order
AF11 Buckwheat (F11)	No	No	no direct order
AF7 Oats (F7)	No	No	no direct order
AIE Autoimmune Encephalitis Serum	No	No	no direct order
AIECSF Autoimmune Encephalitis CSF	No	No	no direct order
ALEX Alex Allergy Test	No	No	no direct order
ALZH Alzheimer's	No	No	no direct order
Amphiphysin Abs.	No	No	no direct order
ANA Antinuclear Abs.	No	reflex test only	no direct order
APS Phospholipid Abs.	No	No	no direct order
AQP4 Aquaporin 4 Abs.	No	No	no direct order
B2M B2 Microglobulin	No	No	no direct order
B2TF Beta-2 Transferrin	No	No	no direct order
BHRT Baso. Histamine Release Test	No	No	no direct order
C1 Penicilloyl G (C1)	No	No	no direct order
C1Q	No	No	no direct order
C1QA Anti C1 Q Abs.	No	No	no direct order
C1R C1r	No	No	no direct order
C1S C1s	No	No	no direct order
C2 Penicilloyl V (C2)	No	No	no direct order
C5	No	No	no direct order
C6	No	No	no direct order
C7	No	No	no direct order
C8	No	No	no direct order
C9	No	No	no direct order
CARD Cardiac Abs.	No	No	no direct order
CD25IM CD25	No	No	no direct order
CD163 Urinary soluble CD163	No	No	no direct order
CEN Centromere	No	No	no direct order

	Available on Healthlink	Available with clinical details	Not available to GPs
CF2 Complement Factor 2	No	No	no direct order
CFB Complement Factor B	No	No	no direct order
CFD Complement Factor D	No	No	no direct order
CFH Complement Factor H	No	No	no direct order
CFI Complement Factor I	No	No	no direct order
CH100 Complement Function	No	No	no direct order
CIF C1 Inhibitor Function	No	No	no direct order
CRYO Cryoglobulins	No	No	no direct order
CYTOK Inflammatory Cytokines - Ella	No	No	no direct order
D70 Storage Mites (D70,71,72,73)	No	No	no direct order
DNAC DNA Crithidia Assay	No	reflex test only	no direct order
DNAE DNA Screen	No	reflex test only	no direct order
DNT Double Negative T-Cells	No	No	no direct order
EMA Endomysial Abs.(EMA)	No	reflex test only	no direct order
EMAG IgG EMA	No	reflex test only	no direct order
ENAID ENA Identity	No	reflex test only	no direct order
EX72 Cage bird Mix (Ex72)	No	No	no direct order
EXAL Referred Allergy	No	No	no direct order
F14 Soya Bean (F14)	No	No	no direct order
F215 rBet v 1 (Birch component)	No	No	no direct order
F25 Tomato (F25)	No	No	no direct order
F33 Orange (F33)	No	No	no direct order
F35 Potato (F35)	No	No	no direct order
F36 Coconut (F36)	No	No	no direct order
F4 Wheat (F4)	No	No	no direct order
F41 Salmon (F41)	No	No	no direct order
F416 Omega-5-Gliadin (F416)	No	No	no direct order
F420 rPrup 3 (Peach component)	No	No	no direct order
F425 rCor a 8 (Hazelnut component)	No	No	no direct order
F428 rCor a 1 (Hazelnut component)	No	No	no direct order
F433 rTri a 14 (Wheat component)	No	No	no direct order
F434 rMal d 1 (F434)	No	No	no direct order
F435 rMal d 3 (F435)	No	No	no direct order
F439 rCor a14 (hazelnut component)	No	No	no direct order
F44 Strawberry (F44)	No	No	no direct order
F440 rCor a 9 (hazelnut component)	No	No	no direct order
F49 Apple (F49)	No	No	no direct order
F6 Barley (F6)	No	No	no direct order
F82 Cheese (Mouldy)(F82)	No	No	no direct order
F84 Kiwi (F84)	No	No	no direct order
F85 Celery (F85)	No	No	no direct order

	Available on Healthlink	Available with clinical details	Not available to GPs
F89 Mustard (F89)	No	No	no direct order
F92 Banana (F92)	No	No	no direct order
F93 Chocolate (F93)	No	No	no direct order
FX15 Fruit Mix (Fx15)	No	No	no direct order
FX5 Food Mix (Fx5)	No	No	no direct order
FX71 Spice Mix (Fx71)	No	No	no direct order
FX72 Spice Mix (Fx72) No	No	No	no direct order
GAD Abs	No	No	no direct order
GANG Ganglioside Abs.	No	No	no direct order
GBM Glom. Basement Membrane Abs.	No	No	no direct order
GE90 Avian Budgie & Pigeon	No	No	no direct order
GM22 Micropoly. Faeni IgG	No	No	no direct order
GM3 Asp. Fumigatus IgG	No	No	no direct order
HIB Haemophilus-B Abs.	No	No	no direct order
HLAB27	No	No	no direct order
I1 Honey Bee Venom (I1)	No	No	no direct order
I3 Wasp Venom (I3)	No	No	no direct order
ICA Islet Cell Abs	No	No	no direct order
IGAAB Anti-IgA Abs	No	No	no direct order
IgE	No	No	no direct order
IgG4	No	No	no direct order
IGGSS Specific Antibody response to pneumococcus & tetanus	No	No	no direct order
IGGSUB IgG Subclasses (IgG1, IgG2, IgG3)	No	No	no direct order
IL6IMM Interleukin 6	No	No	no direct order
INAB Insulin Abs.	No	No	no direct order
IGRA IFN Gamma Release Assay	No	No	no direct order
LIVB Liver Blot	No	No	no direct order
M3 Aspergillus Fum. (M3)	No	No	no direct order
M5 Candida/Yeast (M5)	No	No	no direct order
MAG Abs.	No	No	no direct order
MBL Mannan Binding Lect.	No	No	no direct order
MBP Myelin Basic Pr. Abs	No	No	no direct order
MITE P.D.H. Abs.	No	reflex test only	no direct order
MOG MOG Abs.	No	No	no direct order
MUSK Muscle Kinase Abs	No	No	no direct order
MX2 Moulds Mix (Mx2)	No	No	no direct order
MYO Myositis Screen	No	No	no direct order
NEUB Neuronal Blot	No	No	no direct order
NEUS Neuronal Screen	No	No	no direct order
NF C3 Nephritic Factor	No	No	no direct order

	Available on Healthlink	Available with clinical details	Not available to GPs
NMB Naïve & CSM B Cells.	No	No	no direct order
NMT Naïve & Eff. T cells	No	No	no direct order
O215 Alpha Gal O215	No	No	no direct order
OA Ovarian Abs.	No	No	no direct order
OBFC Oxidative Burst.	No	No	no direct order
PLA2 Phospholipase A2 Receptor Abs.	No	No	no direct order
PNUTCP Peanut Components	No	No	no direct order
PR3 Anti-Proteinase 3	No	reflex test only	no direct order
SAA Serum Amyloid A	No	No	no direct order
SKIN Skin Biopsy	No	No	no direct order
SKINAB Skin Abs. BP & PV	No	No	no direct order
STM Striated Muscle Abs	No	No	no direct order
TACT Activated T Cells	No	No	no direct order
TB3 Silver Birch (T3)	No	No	no direct order
TCPR T-Cell Proliferation	No	No	no direct order
TF Transferrin	No	No	no direct order
TPMT TPMT	No	No	no direct order
UC Urinary Casts	No	No	no direct order
VGCC Voltage Gated CC Abs.	No	No	no direct order
VGKC Vol. Gated K+ Cab	No	No	no direct order
Oligoclonal Bands CSF & Serum	No	No	no direct order