

**Benefits of providing COMPLETE and LEGIBLE information:**

- Reduces turn around time when processing patient samples
- Promotes patient safety through reduced transcription errors

**Patient Identification MUST include:**

- ✓ First and last name
- ✓ PHN or unique identifier
- ✓ Date of Birth
- ✓ MUST INDICATE WARD PATIENT IS LOCATED

**LABORATORY MEDICINE  
PHLEBOTOMY REQUISITION**

Clinical Diagnosis: \_\_\_\_\_  
 Requesting Physician: \_\_\_\_\_  
 Additional Copies of Report to: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
 Collection (date & time): \_\_\_\_\_  
**Priority:**  ROUTINE  URGENT  STAT  TIMED (specify): \_\_\_\_\_

**Check off Test Required**

CBC  CBC  
 PT  PT (INR)  
 APTT  PTT (APTT)  
 FIB  Fibrinogen Level  
 DDIM  D-Dimer

**\*These Test Require a 10 hr. Fast**

CK  CK – Total only  
 CORT  Cortisol  
 CREAT  Creatinine  
 LYTE4  Electrolytes  
 (Na, K, Cl, CO<sub>2</sub>)  
 FER  Ferritin  
 GGT  Gamma GT  
 GLUFA  Glucose – Fasting\*  
 GLUCR  Glucose – Random  
 HMA1C  HbA1C  
 IRONB  Iron and TIBC\*  
 LITH  Lithium  
 MG  Magnesium  
 OSMO  Osmolality  
 PHOS  Phosphate  
 TP  Protein – Total  
 PES  Protein Electrophoresis  
 RHF  Rheumatoid Factor  
 WASER  Syphilis Testing  
 TRIG  Triglyceride\*  
 THYSA  TSH  
 TNTHS  Troponin T HS  
 UREA  Urea  
 URIC  Uric Acid

**Collection/ Patient Information sections MUST be FULLY completed**

Date of last dose: \_\_\_\_\_  
 Time of last dose: \_\_\_\_\_  
 Dosage administered: \_\_\_\_\_

CARBZ  Carbamazepine (Tegretol)  
 CYCL  Cyclosporin (Pre)  
 CY2  Cyclosporin (Post)  
 DIGI  Digoxin  
 GENTC  Gentamicin  
 PHENB  Phenobarbital  
 PTNY  Phenytoin (Dilantin)  
 SIRO  Sirolimus  
 TACR  Tacrolimus  
 TOBRM  Tobromycin  
 VALPR  Valproic Acid (Epival)  
 VANMC  Vancomycin

✓ one box only. For other Hepatitis markers, please order the 'other tests' section. New reactive results will trigger additional tests.

HEPPA  Acute viral hepatitis undefined etiology  
 (Hep A IgM, Hep B S Ag, Hep Bc IgM Ab, Hep C Ab)

**Chronic Viral Hepatitis:**  
 HPCHR  Hepatitis B  
 (Hep B S Ab, Hep B S Ag, Hep Bc Tot Ab)  
 HCAB  Hepatitis C (Hep C Ab)

**Hepatitis Immune Status:**  
 HAABT  Hepatitis A (Hep A Total Ab)  
 HBABS  Hepatitis B (Hep B S Ab)

CMVA  Acute CMV (CMV IgM)  
 CMVI  Chronic or Past Exposure to CMV (CMV IgG)

**Failure to supply required information will lead to delays in service**

Print first and last name

Collection/ Patient Information sections MUST be FULLY completed

Other Tests (specify): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_