**COMMUNITY LAB REQUISITION**

Requesting physician: ____________________________

Additional copies of report to: ____________________

Collection date: ___________ Time: ___________

Other tests (print clearly):

<table>
<thead>
<tr>
<th>Test</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC</td>
<td>CBC (diff)</td>
</tr>
<tr>
<td>ARETC</td>
<td>Reticulocyte Count</td>
</tr>
<tr>
<td>DDIM</td>
<td>D-Dimer</td>
</tr>
<tr>
<td>FIB</td>
<td>Fibrinogen Level</td>
</tr>
<tr>
<td>PT</td>
<td>PT (INR)</td>
</tr>
<tr>
<td>APTT</td>
<td>APTT (APTT)</td>
</tr>
<tr>
<td>TRIG</td>
<td>Triglyceride</td>
</tr>
<tr>
<td>CHOL</td>
<td>Cholesterol – Total</td>
</tr>
<tr>
<td>LIPNF</td>
<td>Chol, Trig, HDL, LDL, non-HDL</td>
</tr>
<tr>
<td>GES1H</td>
<td>Gestational Challenge (50g) – Non Fasting</td>
</tr>
<tr>
<td>GES2H</td>
<td>Gestational Tolerance (75g) – FASTING</td>
</tr>
<tr>
<td>GTT2H</td>
<td>Glucose Tolerance (75g) – FASTING</td>
</tr>
<tr>
<td>ALB</td>
<td>Albumin</td>
</tr>
<tr>
<td>CA</td>
<td>Calcium</td>
</tr>
<tr>
<td>PHOS</td>
<td>Phosphate</td>
</tr>
<tr>
<td>MG</td>
<td>Magnesium</td>
</tr>
<tr>
<td>URIC</td>
<td>Uric Acid</td>
</tr>
<tr>
<td>ALP</td>
<td>Alkaline Phosphatase</td>
</tr>
<tr>
<td>ALT</td>
<td>Alanine Aminotransferase</td>
</tr>
<tr>
<td>AST</td>
<td>Aspartate Aminotransferase</td>
</tr>
<tr>
<td>CK</td>
<td>CK - Total</td>
</tr>
<tr>
<td>LD</td>
<td>Lactate Dehydrogenase</td>
</tr>
<tr>
<td>LIP</td>
<td>Lipase</td>
</tr>
<tr>
<td>GGT</td>
<td>Gamma Glutamyltransferase</td>
</tr>
<tr>
<td>BILIT</td>
<td>Bilirubin - Total</td>
</tr>
<tr>
<td>BILFR</td>
<td>Bilirubin – Fractionation</td>
</tr>
<tr>
<td>BHCG</td>
<td>BHCG (Quantitative – Level)</td>
</tr>
<tr>
<td><strong>IRONB</strong></td>
<td>Iron and Total Iron Binding Capacity</td>
</tr>
<tr>
<td>FER</td>
<td>Ferritin</td>
</tr>
<tr>
<td>PSA</td>
<td>Prostate Specific Antigen</td>
</tr>
<tr>
<td>THYSA</td>
<td>Thyroid Stimulating Hormone</td>
</tr>
<tr>
<td>FRT4</td>
<td>Free T4 (Free Thyroxine)</td>
</tr>
<tr>
<td>ATPA</td>
<td>Thyroid Peroxidase Antibody</td>
</tr>
<tr>
<td>FSHLH</td>
<td>Follicle Stimulating Hormone/Luteinizing Hormone</td>
</tr>
<tr>
<td>EDIOL</td>
<td>Estradiol</td>
</tr>
<tr>
<td>PRGE</td>
<td>Progesterone</td>
</tr>
<tr>
<td>PRL</td>
<td>Prolactin</td>
</tr>
<tr>
<td>WASER</td>
<td>Syphilis</td>
</tr>
<tr>
<td>HIV</td>
<td>HIV</td>
</tr>
<tr>
<td>CRPH</td>
<td>C-Reactive Protein-HS</td>
</tr>
<tr>
<td>RHF</td>
<td>Rheumatoid Factor</td>
</tr>
<tr>
<td>TTHS</td>
<td>Troponin T HS</td>
</tr>
<tr>
<td>TP</td>
<td>Total Protein</td>
</tr>
<tr>
<td>PES</td>
<td>Serum Protein Electrophoresis</td>
</tr>
<tr>
<td>FIT</td>
<td>Stool for Fecal Immunochemical Test (Occult Blood)</td>
</tr>
</tbody>
</table>

Form #101064  (Saskatoon Area)  11/2019  Category: Requisitions
Booking online is quick and easy. Simply choose the date, time, and location that works for you! Visit [https://booking.lifelabs.com/LLBooking/default.aspx/](https://booking.lifelabs.com/LLBooking/default.aspx/) to book now!

Booking at St Paul's Hospital and Royal University Hospital is currently unavailable.

LifeLabs Administrative Office 306-655-4020

<table>
<thead>
<tr>
<th>LOCATION</th>
<th>DAYS AND HOURS OF OPERATION</th>
</tr>
</thead>
</table>
| EAST 134 – 2325 Preston Avenue Market Mall 306-655-4031 | Monday to Friday 7:00 a.m.-6:00 p.m.  
Saturday 7:00 a.m.-3:00 p.m.  
Sunday Closed          |
| NORTH EAST #4 – 419 Ludlow Street 306-655-4034 306-655-4043 | Monday to Friday 7:30 a.m.-4:30 p.m.  
Saturday Closed  
Sunday Closed          |
| DOWNTOWN #5 – 39 23rd Street Midtown Medical Center 306-655-4030 | Monday to Friday 7:30 a.m.-4:30 p.m.  
Saturday Closed  
Sunday Closed          |
| WEST #59 – 300 Confederation Drive Confederation Park Mall  
(Laurier Drive access) 306-655-4032 | Monday to Friday 7:00 a.m.-5:00 p.m.  
Saturday 8:00 a.m.-2:00 p.m.  
(Closed Saturdays in July and August)  
Sunday Closed  
Statutory Holidays Closed |
| NORTH A29 – 134 Primrose Drive Lawson Heights Mall 306-655-4033 | Monday to Friday 7:00 a.m.-6:00 p.m.  
Saturday and Sunday 9:00 a.m.-3:00 p.m.  
Statutory Holidays 9:00 a.m.-3:00 p.m. |
| WEST St. Paul’s Hospital  
Selective Test Center (access via front door) 306-655-5970 | Monday to Friday 08:00-14:30  
Friday hours vary, please call |
| EAST Royal University Hospital  
Selective Test Center  
(access via Mall area) | Monday to Friday 8:00 a.m.-4:30 p.m.  
NOTE: Closed every 3rd Friday.  
Call 306-655-1005 to ensure department is open. |
| EAST Jim Pattison Children’s Hospital  
Register at the Pediatric Outpatient Department  
(access on main floor) | Monday to Friday 8:00 a.m.-4:30 p.m.  
NOTE: Closed every 3rd Friday.  
Call 306-655-1005 to ensure department is open. |

Laboratory Test Results: Most results are complete and back to the physician’s office in 24-72 hours. Critical results will be phoned to clinician directly involved with patient care. Completed laboratory test results are reviewed and followed up by the physician. Lab staff is not permitted to release test results to a patient.

**FASTING - means you should not have anything to eat or drink for a minimum of 10 hours before you go to the laboratory.**

**LACTOSE AND D-XYLOSE TOLERANCES – Call Midtown location at 306-655-4030 to book an appointment.**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>May I drink water?</td>
<td>Yes, small amounts.</td>
</tr>
<tr>
<td>Should I take my medications?</td>
<td>Yes, unless your doctor tells you not to.</td>
</tr>
<tr>
<td>May I drink juice?</td>
<td>No.</td>
</tr>
<tr>
<td>May I drink coffee or tea?</td>
<td>No, not even black without sugar.</td>
</tr>
<tr>
<td>May I chew gum?</td>
<td>No, sorry, not even sugarless.</td>
</tr>
<tr>
<td>During a tolerance test, may I smoke or exercise?</td>
<td>No, smoking or exercising can influence the tolerance test results.</td>
</tr>
<tr>
<td>May I take vitamins or biotin supplements on testing day?</td>
<td>No, vitamins, supplements, and biotin preparations interfere with common lab tests. Consult your physician prior to stopping 48 hours prior to phlebotomy.</td>
</tr>
<tr>
<td>May I brush my teeth?</td>
<td>Yes, brushing your teeth is permitted unless otherwise indicated by your physician, assuming you do not use large amounts of toothpaste and swallow the lather.</td>
</tr>
</tbody>
</table>