

STANDARD OUT-PATIENT LABORATORY REQUISITION FOR PHARMACISTS

| ORDERING PRACTITIONER: NAME, | MSP NUMBER, | ADDRESS | and PHONE | |
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HLTH 1946 2024/07/25 Yellow highlighted fields must be completed. For tests indicated with an asterisk (*), consult provincial guidelines and protocols (www.BCGuidelines.ca) https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-quidelines PERSONAL HEALTH NUMBER LAST NAME OF PATIENT FIRST NAME OF PATIENT ORDERING PRACTITIONER FAX NUMBER: ○ M ○ F ○ X ○ UNK Pregnant? ○ YES ○ NO ☐ Fasting? h pc PRIMARY CONTACT NUMBER OF PATIENT SECONDARY CONTACT NUMBER OF PATIENT OTHER CONTACT INFORMATION OF PATIENT Provide secondary/alternate phone number for CRITICAL RESULTS: ADDRESS OF PATIENT If this is a STAT order please provide contact telephone number: Copy to PRACTITIONER/Practitioner MSP Number & Clinic Name/Address: CITY/TOWN PROVINCE POSTAL CODE DIAGNOSIS / RELEVANT MEDICAL CONDITION Copy to PRACTITIONER/Practitioner MSP Number & Clinic Name/Address: CURRENT MEDICATIONS / ANTIBIOTICS / DATE AND TIME OF LAST DOSE LABEL ALL SPECIMENS WITH PATIENT'S FIRST & LAST NAME, DOB, & PHN HEMATOLOGY **URINE TESTS** THERAPEUTIC DRUGS ☐ Hematology profile ☐ Albumin / Creatinine ratio (ACR) Clozapine ☐ Phenytoin ☐ Prothrombin time / INR Digoxin Primidone ☐ Creatinine Clearance / 24-hour Urine Creatinine On Anticoagulant? Yes No Lithium ☐ Valproic Acid ☐ Macroscopic → Microscopic if dipstick positive Specify: _ **ANEMIA MARKERS** LIPIDS **DRUG SCREENING** * □ B12 ☐ Amphetamines Note: Fasting is not required for any of the panels but clinician may * Ferritin (query iron deficiency) ■ Benzodiazepines specifically instruct patient to fast for 10 hours in select circumstances ☐ Cocaine / Cocaine metabolite * Iron [e.g. history of triglycerides > 4.5 mmol/L], independent of laboratory ☐ Fentanyl * Transferrin ☐ Methadone CHEMISTRY Full Lipid Profile - Total, HDL, non-HDL, LDL cholesterol, ☐ Methadone metabolite & triglycerides (Baseline or Follow-up of complex dyslipidemia) Sodium Albumin ☐ Opiates * O Follow-up Lipid Profile - Total, HDL & non-HDL cholesterol only ☐ Potassium T. Protein ☐ Oxycodone * O Apo B (not available with lipid profiles unless diagnosis of ☐ Chloride ☐ Bilirubin – direct complex dyslipidemia is indicated) Calcium ☐ Bilirubin – total ☐ Magnesium Alk phos Phosphorus ☐ ALT ☐ Urea ☐ AST Creatinine kinase (CK) ☐ Creatinine / eGFR * Glucose – fasting ☐ GGT (fasting a minimum 8 hours) Lactate dehydrogenase (LD) ☐ Glucose – random ☐ TSH ☐ Hemoglobin A1c SIGNATURE OF PRACTITIONER DATE OF COLLECTION TIME OF COLLECTION COLLECTOR NAME INSTRUCTIONS TO PATIENTS

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