

Specimen Collection Guide

April 2023



Order Supplies at
Providers.SonoraQuest.com

Access Detailed Collection Instructions at
SonoraQuest.com/Test-Directory



**Sonora Quest
Laboratories™**

A Subsidiary of Laboratory Sciences of Arizona

Urine Culture

The container will keep bacterial colony counts constant during transport to the lab. It is for urine culture only. **Transport refrigerated.** Stable for 72 hours.

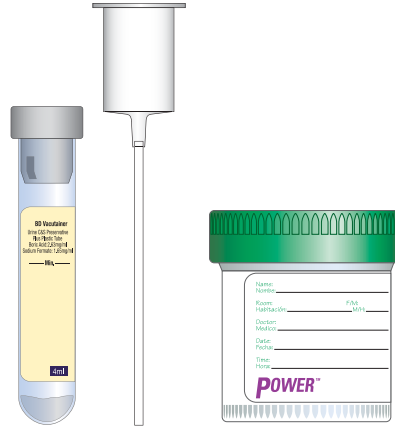
Supply #1838

Culture, Urine Routine

Test # 704705

Culture, Urine Catheterized

Test # 4647



Urine Chemistry & Toxicology/Drug Screen Testing

The 10 mL Round Bottom Urine Tube improves efficiency and quality through our automation capabilities and should be used for urine chemistry and toxicology/drug screen testing. Order in combination with supply #10845 - Urine Transfer Straw. **Transport refrigerated.** If ordering a Urinalysis please see the 'Urinalysis' section.

Supply #23247

Urine Albumin, Random

Test # 9929

Urine Calcium, Random, Normalized

Test # 708342

Urine Creatinine, Random

Test # 2498

Urine Osmolality

Test # 9295

Urine Potassium, Random, Normalized

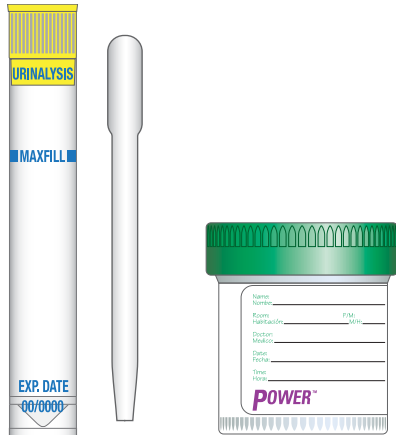
Test # 2497

Urine Protein, Random, Normalized

Test # 2482

Urine Sodium, Random, Normalized

Test # 2495



Urinalysis

Urinalysis Preservative Tubes are stable for 72 hours from collection. **Transport refrigerated.** If ordering a Urogram w/Reflex to Culture, also include a Urine C&S tube (see 'Urine Culture' section above). If ordering urine chemistry or drug screen testing, please see the 'Urine Chemistry & Toxicology/Drug Screen Testing' section.

Supply Numbers:

Urinalysis Preservative Tube #20108

Pipette, Transfer w/Graduations #24196

Urogram

Test # 3305

Urogram w/Reflex to Culture

Test # 23305

Urogram w/Reflex to Culture (OB)

Test # 33305

Urogram w/Reflex to Microscopic

Test # 3300

Urogram w/Reflex to Microscopic and/or Culture

Test # 43305

Urogram w/Reflex to Microscopic and/or Culture (OB)

Test # 53305

Ova & Parasite

The Total-Fix™ transport system is a single vial utilizing zinc sulfate, which provides parasite visualization without the need for two separate collection vials. Submit 5 grams minimum of stool submitted in each Total-Fix vial. Place stool into vial to bring the liquid level up to the black fill-line. Carefully mix the specimen with the spoon attached to the vial cap, tighten the cap and shake vigorously to ensure that the specimen is adequately mixed. Do not overfill. Specimens should be stored at **room temperature** until and during transport to the laboratory.

Supply #41373

Coccidia Exam

Test # 900834

Cyclospora/Cystoisospora

Test # 4644

Giardia Antigen

Test # 15338

Giardia/Cryptosporidium Exam

Test # 900007

Microsporidia Exam

Test # 3880

O&P (X1)

Test # 4792

O&P (X2)

Test # 74028



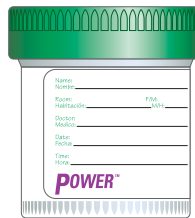
Sterile Containers

Sterile fluids, tissues and sputum for culture, and stool samples for Clostridium difficile toxin assay may be submitted in this container. Nails, skin, scrapings and hair may be submitted for mycology studies. Specimens for mycobacterium (AFB) culture may be sent in these containers. Please refrigerate and bag specimens for AFB culture immediately after collection.

Supply Numbers:

Sterile Urine Cups #1789

Sterile Urine Bags (Pediatric) #938



AFB Culture and Smear

Test # 8173

Body Fluid Culture (Aerobic/Anaerobic)

Test # 4003

Body Fluid Culture (Aerobic Only)

Test # 900016

Clostridium difficile Toxin, EIA

Test # 9171

Dermatophyte (Fungal) Screen

Test # 907206

Parasite ID

Test # 4640

Semen Analysis

Test # 703640

Sputum Culture w/Gram Stain

Test # 4011

Tissue Culture (Aerobic/Anaerobic)

Test # 4180

Tissue Culture (Aerobic Only)

Test # 4178

Prescription Drug Monitoring: Contact your Account Manager for testing options

Stool Culture

This transport media is designed to keep enteric pathogens viable during transport to the lab. Place stool into orange capped Para-Pak vial until red fill-line is reached and mix well to ensure preservation. Yersinia and Vibrio culture must be requested separately. Leave at **room temperature** until lab pick-up. Raw stool sample is unacceptable.

Supply #983

Stool Culture w/Shiga Toxin Evaluation

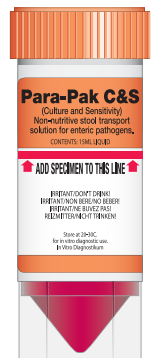
Test # 803107

Vibrio Culture

Test # 4058

Yersinia Culture

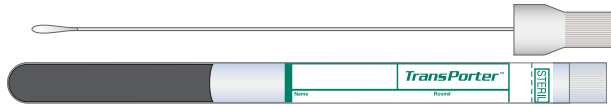
Test # 4660



GC Screen Culture – Charcoal Transport

Supply #4590 Culture Swab (GC Only)

GC Screen Test # 4785 (Transport at room temperature)

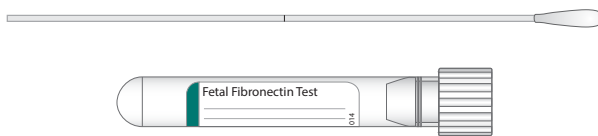


Fetal Fibronectin

Refer to the instructions provided with the kit for collection and handling. **Transport at room temperature.**

Supply #8617

Fetal Fibronectin Test Test # 11986



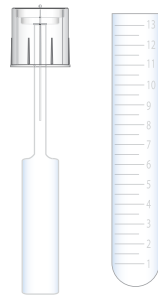
Pinworm

The pinworm paddle or “swube” will capture eggs of *Enterobius Vermicularis* (pinworm) for microscope examination and subsequent identification.

Collect early morning just prior to morning routine. Do not use if package is not intact. Hold the paddle by the cap and remove it from the tube. Separate the buttocks and press the tacky surface against several areas of the perianal region. Replace the paddle in the tube for transport to the laboratory at **room temperature.**

Supply #1816

Pinworm Exam Test # 4620



Wet Prep/Trichomonas Culture

Trichosel Broth - Use Dacron Swab. Transport at **room temperature.**

Supply #10618; Dacron Swab #1848

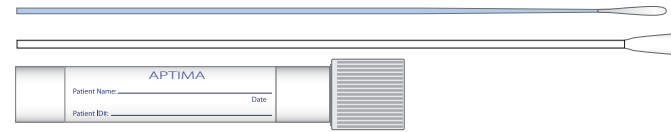
Culture, Trichomonas Test # 5575



Aptima® Specimen Collection Kits (Transport at room temperature)

Combo 2® Unisex Collection Kit (Female Endocervical; Male Urethral)

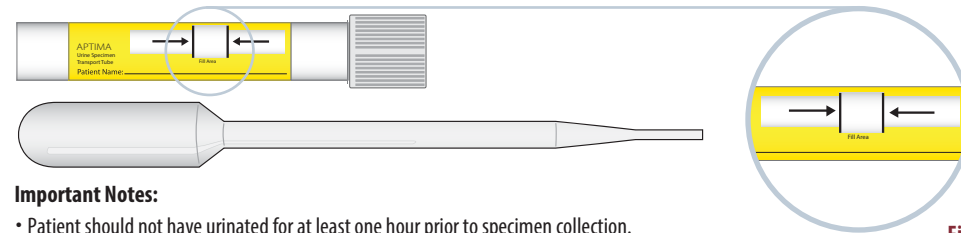
Supply #22127



Important Notes:

- The polyester fiber-tipped swab with the white shaft is for cleaning the cervical os **ONLY. DO NOT** use for collecting the patient specimen.
- The shaft of the blue collection swab **MUST** be broken at the score mark.
- Specimens containing no collection swab, any swab other than the supplied blue collection swab, cleaning swab, or an incorrectly broken shaft cannot be tested.

Urine Collection Kit (comes with pipette) - Supply #20122

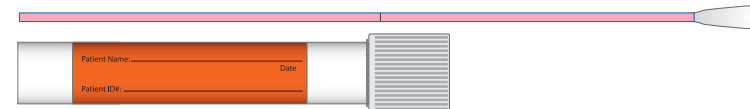


Important Notes:

- Patient should not have urinated for at least one hour prior to specimen collection.
- Direct patient to provide a **FIRST-CATCH** urine (20-30 mL) into a preservative-free collection cup.
- Transfer 2 mL of urine into the transport tube using the pipette provided.

Fill tube between the black lines to prevent sample rejection.

Multitest Swab Collection Kit - Supply #34893



Important Note:

- The shaft of the pink collection swab **MUST** be broken at the score mark.

Test Name	Test Code	Unisex (White Label)	Multitest (Orange Label)	Urine (Yellow Label)
Bacterial Vaginosis (BV), CT/NG, TMA	Test # 804207	No	Yes	No
Bacterial Vaginosis (BV), TMA	Test # 904765	No	Yes	No
Candida Vaginitis (CV), TMA	Test # 904766	No	Yes	No
Candida Vaginitis (CV)/Trichomonas vaginalis (TV), TMA	Test # 907303	No	Yes	No
Chlamydia trachomatis/N. gonorrhoeae, Aptima Device	Test # 904767	Yes	Yes	Yes
H. Simplex Virus, Type 1/2 mRNA TMA	Test # 905434	No	Yes	No
Mycoplasma genitalium (M-Gen), TMA	Test # 907271	Yes	Yes	Yes
STI Cervicitis Panel, TMA (CT/NG,TV, M-Gen)	Test # 804206	Yes	Yes	Yes
STI Male Urethritis, TMA (CT/NG,TV, M-Gen)	Test # 804205	Yes	Yes	Yes
STI Pelvic Inflammatory Disease, TMA (CT/NG,TV, M-Gen)	Test # 804203	Yes	Yes	Yes
Trichomonas vaginalis (TV), TMA	Test # 904768	Yes	Yes	Yes
Vaginosis/Vaginitis Plus, TMA (BV,CV,TV,CT/NG)	Test # 704763	No	Yes	No
Vaginosis/Vaginitis, TMA (BV,CV,TV)	Test # 803083	No	Yes	No

InSure®, Fecal Immunochemical Test

Refer to the instructions provided with the collections kit for sample collection and handling. **Transport at room temperature.** A Sonora Quest Laboratories requisition must be included when submitting samples to the lab.

Supply #18067

InSure® Fecal Globin by Immunochemistry Test # 11290

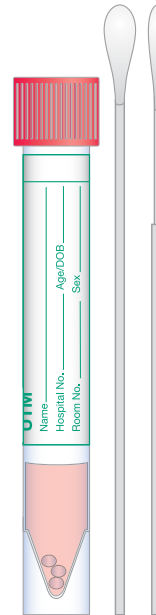


Virus Culture (Including Herpes & Chlamydia)

This multipurpose transport medium is designed to maintain viability of viruses and chlamydia for culture. Please submit separate tubes for each test code ordered. When submitting for chlamydia culture, do not use swabs with wooden shafts, use a rayon / dacron swab. **Refrigerate** after specimen collection. Cannot be used for bacterial, fungal, AFB, or HPV cultures.

Supply Numbers:
Viro Pak - Lesion, Genital, Throat (large swab) #20011
Viro Pak - Nasopharyngeal (small swab) #20012

Herpes Culture w/Reflex Typing	Test # 8181
Herpes Culture without Typing	Test # 7158
Influenza A & B, Rapid Screen	Test # 903345
Influenza A/B & RSV, Qual., Real-Time RT-PCR	Test # 906336
Mycoplasma/Ureaplasma Culture	Test # 15409
RSV Direct Stain (DFA)	Test # 10384
RSV, Rapid Screen	Test # 903346
Virus Culture, Varicella zoster/HSV & DFA	Test # 8158



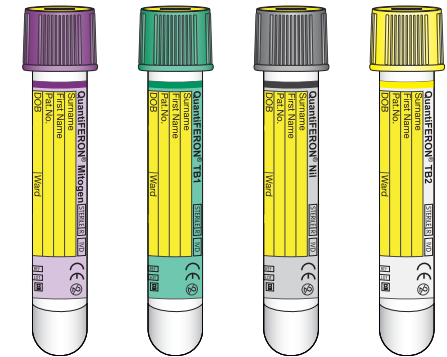
QuantiFERON® TB Gold Plus

Supply #40013
If > 3350 ft. elevation order supply #38934 - High Elevation Tubes
Test # 906935

Tubes must be collected in the order indicated below. Each tube must contain 0.8 - 1.2 mL of blood. Shake tubes up and down ten (10) times just firmly enough to ensure the entire inner surface of the tube is coated with blood. Submit to lab ASAP for incubation and specimen processing.

Samples must be received within 12 hours of collection and incubated within 16 hours of collection. **DO NOT CENTRIFUGE. Transport at room temperature.**

Statewide: Do not collect on Sundays
If in rural area, only collect Monday - Friday after 11 a.m.



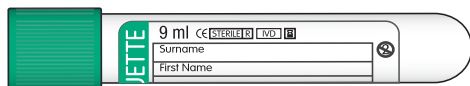
T-SPOT®.TB

One **room temperature** 9 mL lithium heparin green-top tube. Pediatric sample volumes: <2 years - 2 mL; 2-10 years - 4 mL; ≥ 10 years - 6 mL. **Collect Monday - Friday ONLY. Do not collect on holidays or weekends.**

Do not spin or centrifuge samples. Do not refrigerate or freeze. Place sample in separate bag and apply the neon green T-SPOT label provided with your tubes to the outside of the specimen transport bag or tube. Lockbox use is not recommended, however, if necessary, configure the ice packs in an a-frame or lean-to formation.

Supply #38235

T-SPOT®.TB Test # 906927



Source must be indicated on the requisition

H. pylori Breath Test (≥3 years)

Refer to the instructions provided with the kit for patient preparation and collection. Note this test is not available for patients under 3 years of age. **Transport at room temperature.**

Supply #54537
H. pylori Breath ID Kit Test # 902147

Stool testing also available.
Supply #19222
H. pylori Stool Collection Kit Test # 11939



Anaerobic Cultures and Deep Wound Cultures

Transport medium for tissue, pus, aspirates, and deep wound cultures for anaerobes. Tissues, fluids and swabs for aerobic culture may also be transported in this transport medium. A gram stain is included. **Transport at room temperature.**

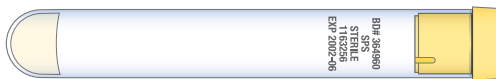
- Supply #1806
- Wound Culture Anaerobic/Aerobic Test # 4763
- Tissue Culture Anaerobic/Aerobic Test #4180
- Body Fluid Culture Anaerobic/Aerobic Test # 4003
- Source must be indicated on the requisition



SPS Vacutainer (Blood Culture Tubes)

Allow tubes to fill completely. Submit 2 tubes per culture. **Transport at room temperature.**

- Supply #2827 (8.3 mL tube)
- Culture, Blood (X1) Test # 4040
- Culture, Blood (X2) Test # 800006
- Culture, Blood (X3) Test # 800007



Bordetella Culture

(Includes B. pertussis and B. parapertussis)

Submit 1 nasopharyngeal swab in Regan-Lowe Charcoal media. **Refrigerate** before and after specimen collection.

- Supply Numbers:
- Regan-Lowe Agar - Pertussis #27039
- Nasopharyngeal Swab #44049
- Bordetella Culture Test # 4274

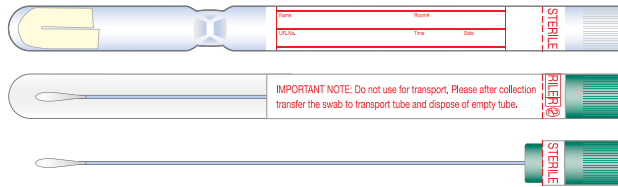


Bordetella DNA, Qualitative, PCR

(Includes B. pertussis and B. parapertussis)

Mini-tip Swab with Liquid Amies. **Transport refrigerated.** Supply #19221

- B. pertussis/parapertussis DNA Test # 901552



Rapid Strep

2-swab collection device with Liquid Amies. **Transport at room temperature.**

- Supply #10499
- Rapid Strep w/ Culture Reflex Test # 74119
- Source must be indicated on the requisition

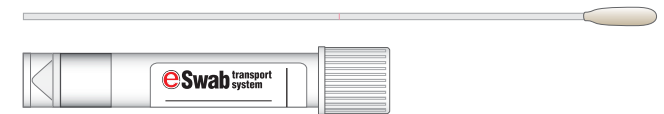


eSwab - White-Cap Routine Culture Swab

These culture swabs are designed for routine bacterial cultures and provide a greater recovery of organisms for culture than previously supplied swabs. Specify SOURCE on requisition and keep at **room temperature** after collection. If submitting urine, discard swab and pour urine into eSwab tube. Rapid Strep cannot be tested from these culture swabs.

Note that the preferred sample for any culture is tissue, fluid, or pus. Large/moderate amounts of tissue and adequate volumes of pus or fluid should be submitted in a sterile container. Small pieces of tissue and low volumes of sterile body fluids should be submitted in supply #1806 - Anaerobic Transport Tube.

- Supply #25784
- Ear Culture Test # 4639
- Eye Culture (Conjunctiva) Test # 4642
- Fungus Culture (Misc) Test # 907205
- GI Panel (TEM-PCR™) Test # 906706
- Genital Culture Test # 704713
- Gram Stain Test # 4000
- Group A Strep Culture Test # 4704
- Group B Strep Culture Test # 4615
- Health Panel (TEM-PCR™) Test # 906142
- MRSA Screen Culture Test # 901617
- Viral Resp. Panel (TEM-PCR™) Test # 906704
- Wound Culture (Aerobic) Test # 4188
- Yeast Culture Test # 907203



eSwab - Blue-Cap Mini-Tip Culture Swab

These culture swabs provide a greater recovery of organisms for culture than previously supplied swabs. Specify SOURCE on requisition and keep at **room temperature** after collection.

- Supply #25785
- Culture, Nasopharyngeal Test # 4618
- Culture, Genital (Urethral) Test # 704713



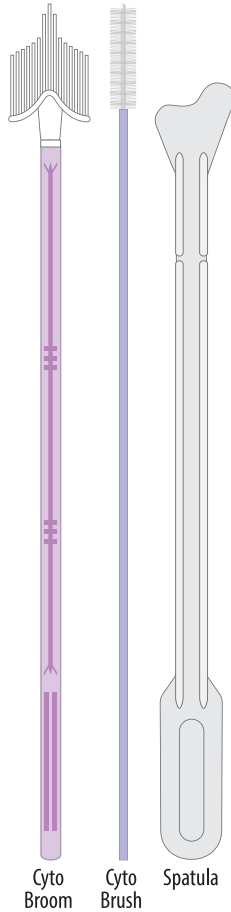
ThinPrep®

Refer to the instructions provided with the collection kit for sample collection and handling. **Transport at room temperature.**

Supply Numbers:

ThinPrep® Vials w/Brushes/Spatulas (Kit of 25) #25777

ThinPrep Vials® w/Brooms (Kit of 25) #25778



Tests Available:

Age Based Screening

Pap, ThinPrep

HPV mRNA

HPV Genotypes 16, 18/45

Chlamydia trachomatis, ThinPrep® Vial

N. gonorrhoeae, ThinPrep® Vial

Chlamydia trachomatis/N. gonorrhoeae, ThinPrep® Vial

T. vaginalis, ThinPrep® Vial

A wide variety of reflex testing is available off the ThinPrep® vial. Please contact your Account Manager or visit SonoraQuest.com for a comprehensive listing.

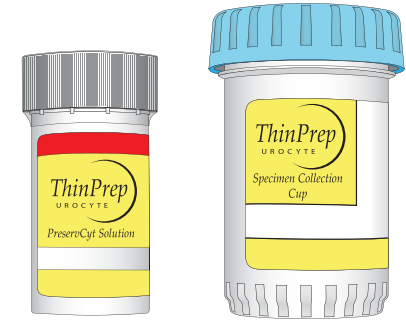
UroCyte (UroVysion) Collection Kit

Preserves urine specimens for cytological examination to determine bladder cancer recurrence.

Refer to the "Instructions For Use" included with the collection kit for specimen collection. **Transport refrigerated.**

Supply #19343

FISH: Vysis® UroVysion, Bladder Test # 3462



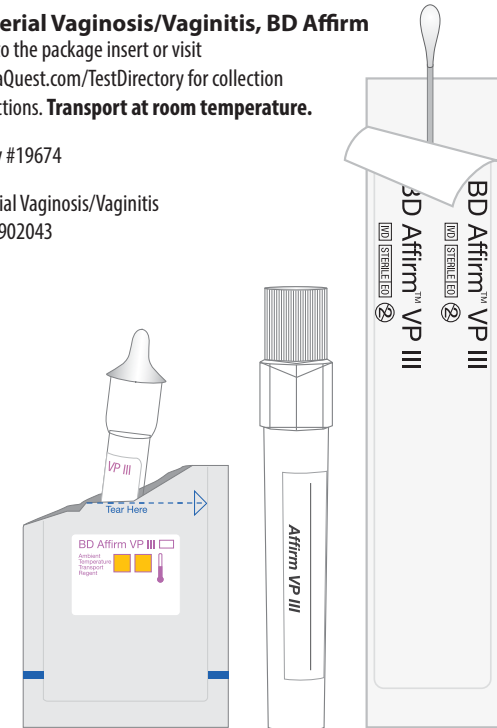
Bacterial Vaginosis/Vaginitis, BD Affirm

Refer to the package insert or visit SonoraQuest.com/TestDirectory for collection instructions. **Transport at room temperature.**

Supply #19674

Bacterial Vaginosis/Vaginitis

Test # 902043

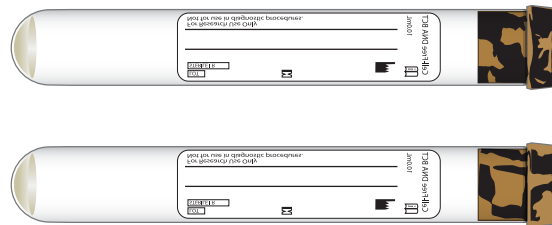


QNatal Black/Tan-Top Streck Cell Free Tubes (2 per pack)

For use with QNatal Advanced Non-Invasive Prenatal testing ONLY. **Transport at room temperature.**

Supply #27859










QNatal™ Advanced Noninvasive Prenatal Screening (NIPS) Test # 906553

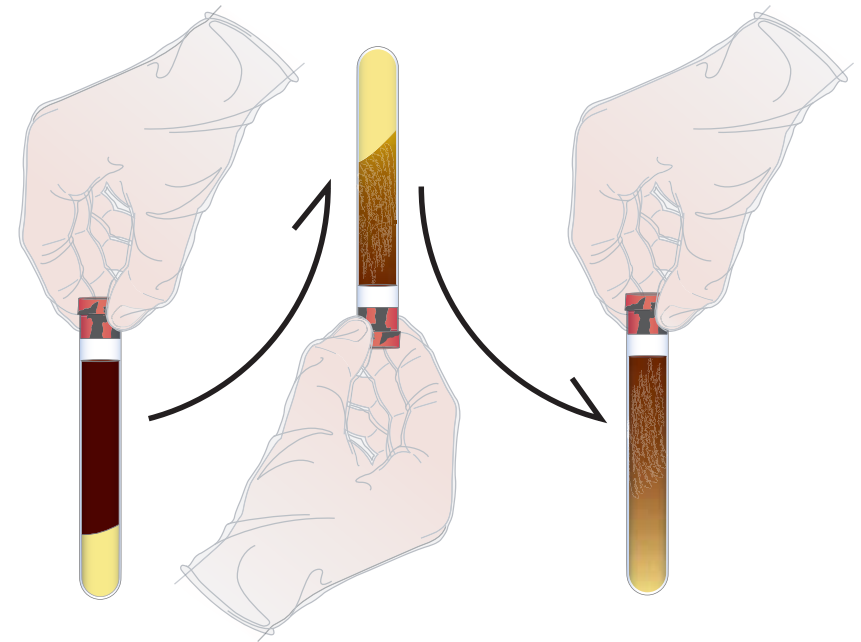


Processing Tubes

The vacuum blood collection tube does not fill completely to the stopper, but only to the required level. Proper dilution of the blood and additive in the tube is critical. Be sure that each tube is allowed to fill until the blood flow stops. If unsure, wait an additional 1-2 seconds before removing the tube from the holder and withdrawing the needle from the arm. Improperly filled tubes will be rejected by the laboratory, and the sample must be redrawn to ensure accurate results.

REMEMBER: Always check the expiration date on tubes prior to collection. Expired tubes will NOT be processed by the laboratory, and the sample must be redrawn to ensure accurate results.

ORDER OF DRAW	MIX BY INVERTING	ADDITIVE	EFFECTS OF UNDER-FILLING
	8 to 10 TIMES	• Sodium Polyanethol Sulfonate (SPS) <i>(Use for Blood Cultures)</i>	Reduces the recovery of microorganisms that could potentially be lethal to the patient
	3 to 4 TIMES	• 0.105M Sodium Citrate (3.2%)	Coagulation results are erroneously prolonged. (A completely filled tube is required.)
	5 TIMES	• None	Quantity not sufficient to perform testing.
	8 to 10 TIMES	• Gel Barrier Tube	Poor barrier formation; insufficient sample.
	8 to 10 TIMES	• Sodium Heparin • Lithium Heparin	Erroneous results due to excessive heparin.
	8 to 10 TIMES	• Liquid K ₃ EDTA • Spray-dried K ₂ EDTA (Plus)	Erroneously low blood cell counts and hematocrits; morphologic changes to RBCs; staining alterations.
	8 to 10 TIMES	• Spray-dried EDTA K ₂ (PPT)	Quantity not sufficient to perform testing.
	8 to 10 TIMES	• Sodium Fluoride	Clotting of specimen.
	8 to 10 TIMES	• Acid Citrate Dextrose (ACD) <i>(Do Not Use For Blood Cultures)</i>	Erroneous results due to changes in cell morphology.



WHY?

- Most tubes contain an **ADDITIVE** or **CLOT ACTIVATOR** that needs to be mixed with the blood sample.
- Tubes with anticoagulants such as EDTA need to be mixed to ensure the specimen does not clot.

HOW?

- Holding tube upright, gently invert 180° and back.
- Repeat movement as prescribed for each tube.

WHEN?

- Immediately after drawing.

CONSEQUENCES IF NOT MIXED —

- Tubes with anticoagulants will clot.
- SST tubes may not clot completely.
- Specimen will often need to be redrawn.

Labeling Specimens

Acct. No. 12345 321/578
John, Doe, MD
4567 Good Neighbor Way, Suite 2
Phoenix, AZ 85001
602-555-5555 A123450987

777771751 ID:
777771751 ID:
777771751 ID:

Sonora Quest Laboratories
A Member of Laboratory Services of Arizona
Phone: 602-495-6000 • 1-800-798-6721
Tucson: 520-896-8101 • 1-800-285-0161

DATE COLLECTED 10 / 30 / 02
SEX M F COLL TIME 8:00
EYE OF BIRTH 6 / 05 / 83
STAY FAX (only if)

PLEASE PRINT CLEARLY ALL INFORMATION MUST BE PROVIDED OR ACCOUNT WILL BE BILLED. USE BLACK OR BLUE INK ONLY
PATIENT'S LAST NAME FIRST MI
Jones Mary W
DATE OF BIRTH 6 / 05 / 83
PAT # FAX (only if)

Comments will print on report
Yes No
8

ORDERED PHYSICIAN FIRST & LAST NAME DRUGS/DOSES
John Doe, MD 000.000 000.000

BILL: ACCOUNT COMPLETE YELLOW PATIENT COMPLETE YELLOW & GREY AREAS PAID AT PSC (RECEIPT ATTACHED) INSURANCE (USE CURRENT) COMPLETE YELLOW ORP
Medicare

LABORATORY SERVICES LIST:

1000	Cholesterol	05	1010	Phosphorus	05
1001	Cholesterol - Fasting	05	1011	Phosphorus - Random	05
1002	Cholesterol - HDL	05	1012	Phosphorus - Urinary	05
1003	Cholesterol - LDL	05	1013	Phosphorus - Urinary - Creatinine Ratio	05
1004	Cholesterol - Total	05	1014	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1005	Cholesterol - HDL - Fasting	05	1015	Phosphorus - Urinary - Creatinine Ratio - Random	05
1006	Cholesterol - LDL - Fasting	05	1016	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1007	Cholesterol - Total - Fasting	05	1017	Phosphorus - Urinary - Creatinine Ratio - Random	05
1008	Cholesterol - HDL - Random	05	1018	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1009	Cholesterol - LDL - Random	05	1019	Phosphorus - Urinary - Creatinine Ratio - Random	05
1010	Cholesterol - Total - Random	05	1020	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1011	Cholesterol - HDL - Fasting	05	1021	Phosphorus - Urinary - Creatinine Ratio - Random	05
1012	Cholesterol - LDL - Fasting	05	1022	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1013	Cholesterol - Total - Fasting	05	1023	Phosphorus - Urinary - Creatinine Ratio - Random	05
1014	Cholesterol - HDL - Random	05	1024	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1015	Cholesterol - LDL - Random	05	1025	Phosphorus - Urinary - Creatinine Ratio - Random	05
1016	Cholesterol - Total - Random	05	1026	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1017	Cholesterol - HDL - Fasting	05	1027	Phosphorus - Urinary - Creatinine Ratio - Random	05
1018	Cholesterol - LDL - Fasting	05	1028	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1019	Cholesterol - Total - Fasting	05	1029	Phosphorus - Urinary - Creatinine Ratio - Random	05
1020	Cholesterol - HDL - Random	05	1030	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1021	Cholesterol - LDL - Random	05	1031	Phosphorus - Urinary - Creatinine Ratio - Random	05
1022	Cholesterol - Total - Random	05	1032	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1023	Cholesterol - HDL - Fasting	05	1033	Phosphorus - Urinary - Creatinine Ratio - Random	05
1024	Cholesterol - LDL - Fasting	05	1034	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1025	Cholesterol - Total - Fasting	05	1035	Phosphorus - Urinary - Creatinine Ratio - Random	05
1026	Cholesterol - HDL - Random	05	1036	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1027	Cholesterol - LDL - Random	05	1037	Phosphorus - Urinary - Creatinine Ratio - Random	05
1028	Cholesterol - Total - Random	05	1038	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1029	Cholesterol - HDL - Fasting	05	1039	Phosphorus - Urinary - Creatinine Ratio - Random	05
1030	Cholesterol - LDL - Fasting	05	1040	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1031	Cholesterol - Total - Fasting	05	1041	Phosphorus - Urinary - Creatinine Ratio - Random	05
1032	Cholesterol - HDL - Random	05	1042	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1033	Cholesterol - LDL - Random	05	1043	Phosphorus - Urinary - Creatinine Ratio - Random	05
1034	Cholesterol - Total - Random	05	1044	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1035	Cholesterol - HDL - Fasting	05	1045	Phosphorus - Urinary - Creatinine Ratio - Random	05
1036	Cholesterol - LDL - Fasting	05	1046	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1037	Cholesterol - Total - Fasting	05	1047	Phosphorus - Urinary - Creatinine Ratio - Random	05
1038	Cholesterol - HDL - Random	05	1048	Phosphorus - Urinary - Creatinine Ratio - Fasting	05
1039	Cholesterol - LDL - Random	05	1049	Phosphorus - Urinary - Creatinine Ratio - Random	05
1040	Cholesterol - Total - Random	05	1050	Phosphorus - Urinary - Creatinine Ratio - Fasting	05

DRAW FEE CAPILLARY DRAW FEE MEDICAL NECESSITY LAB COPY

Important reminder: 2 identifiers needed on all specimen tubes and containers, including liquid based PAP Vials and Biopsy Bottles.

Per College of American Pathologist (CAP) regulations ANP.11460, CYP. 03300 and Gen.40491, all primary specimen containers (the innermost container submitted to Sonora Quest Laboratories that contains the specimen to be tested) MUST be labeled with two patient identifiers.

Patient identifiers include (in order of preference) but are not limited to:

- Patient Name (First and Last)
- Requisition Number or Bar Code Label
- Patient Date of Birth
- Unique Patient Identifier

Patient identifiers on the specimen container and the laboratory order form must match in order for the specimen to be processed. Please make sure to include the date and time of draw directly on the specimens for timed testing. Patient identifiers on specimen bags do not satisfy CAP requirements and cannot be used by Sonora Quest Laboratories.

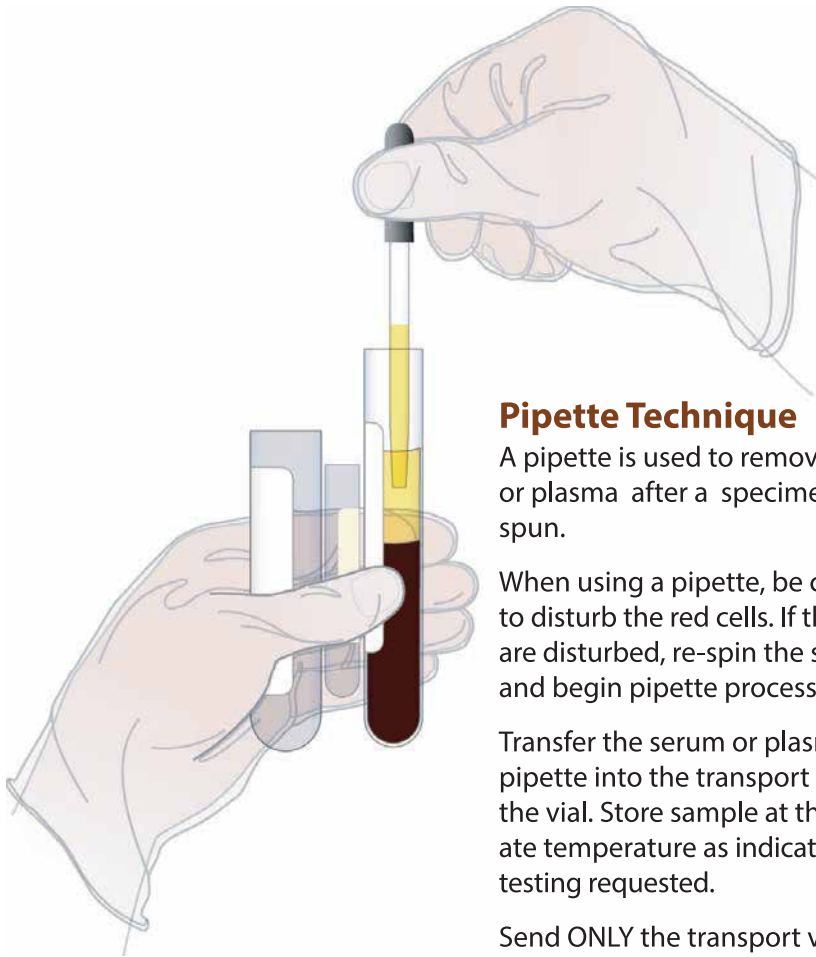
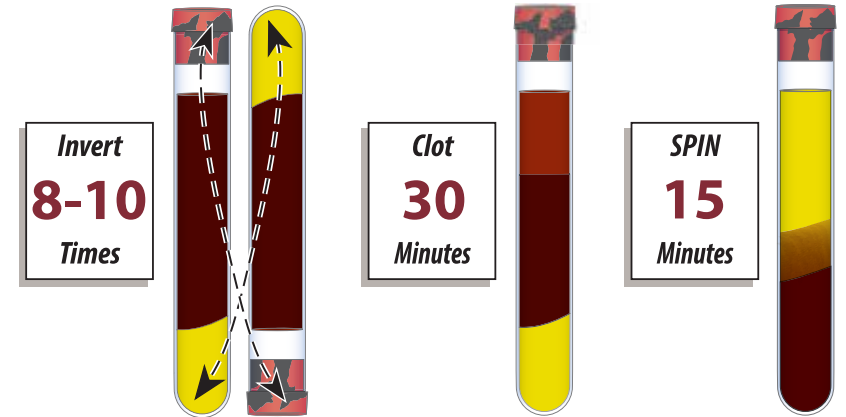
Thank you for your assistance in ensuring that CAP requirements are being met.

Specimen Integrity

An unspun or poorly spun specimen allows the cells to come into contact with the serum or plasma. Metabolic changes occur until the specimen is properly spun. Delay in processing changes the composition of the specimen and could cause erroneous values.

Centrifuge Operation

3000 RPM is the common speed under most circumstances. The majority of samples require 10 – 15 minutes of centrifugation.



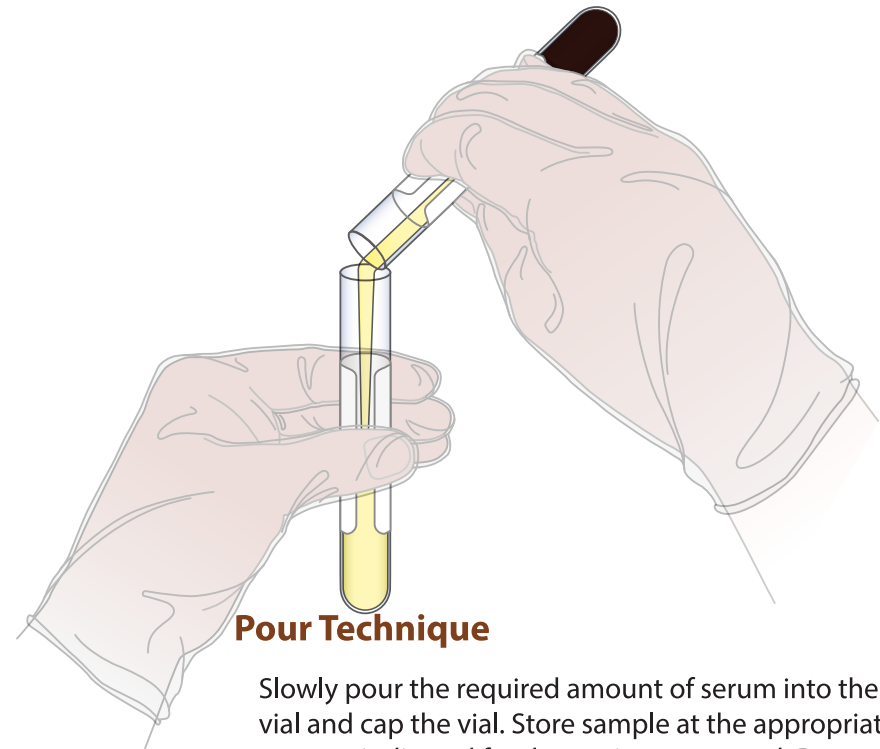
Pipette Technique

A pipette is used to remove the serum or plasma after a specimen has been spun.

When using a pipette, be cautious not to disturb the red cells. If the red cells are disturbed, re-spin the specimen and begin pipette process again.

Transfer the serum or plasma from the pipette into the transport vial and cap the vial. Store sample at the appropriate temperature as indicated for the testing requested.

Send **ONLY** the transport vial to the laboratory for testing. **DO NOT** send the original tube.



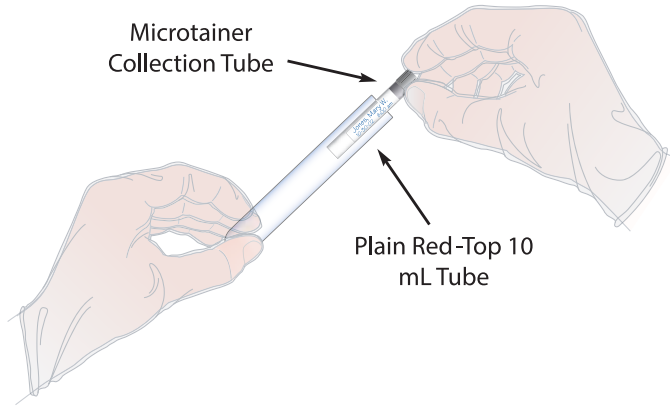
Pour Technique

Slowly pour the required amount of serum into the transport vial and cap the vial. Store sample at the appropriate temperature as indicated for the testing requested. Do not pour a sample without a gel barrier into a specimen transport vial.

Using the pipette technique is the appropriate method to remove serum or plasma from a non-gel barrier tube. Send **ONLY** the transport vial to the laboratory for testing. **DO NOT** send the original tube.

Microtainer Tubes

- Place microtainer collection tube into a plain red-top 10 mL tube.
- Cap the plain red-top 10 mL tube. Make sure the microtainer AND the plain red-top tube are labeled with the patient's name and second identifier.



Frozen Samples

- **DO NOT FREEZE GLASS TUBES!**
- Never leave frozen samples in your lock box unless they are stored in our ConstanTemp Frozen Specimen Totes. Order totes at Providers.SonoraQuest.com or by contacting our Logistics Department at 602.685.5052 or 520.886.8101. However, to ensure specimen stability, it is recommended that frozen samples be stored frozen in your office for pick up on the following business day rather than being left in a lock box.
- Make sure frozen samples are labeled with the patient name and a second identifier, date drawn, sample type (serum, plasma, etc.), and, if timed testing, label each sample with collection times (fasting, 30 minutes, etc.).
- Check specimen requirements to see if serum or plasma needs to be aliquotted into a plastic vial prior to freezing.



**Extra Specimens Cause
Extra Phone Calls**



**Please DO NOT Send
Extra Specimens**

Please ensure that specimens and requisitions are bagged together and prepared for transport prior to requesting courier pick up in order to prevent unnecessary delays. Call Sonora Quest Laboratories Courier Dispatch for pick up.



Phoenix:
602.685.5052

Tucson:
520.296.0205

Flagstaff:
928.774.2837

Submission of Laboratory Orders

All tests submitted under a single order number are required to be collected on the same day, which is considered the date of service by government payors. Order numbers may not be used more than one time. Please use the following guide to assist in the ordering process used by your office:

IF	THEN
All samples are to be collected in your office on the same day	Submit all testing requested under a single order number
Only some of the samples will be collected in your office on the same day, and the patient will have the remainder collected by a Patient Service Center or other facility	Submit using 2 order numbers - 1 for the samples being collected in your office and 1 for the samples to be collected at a later time
None of the samples will be collected in your office - patient is being sent to a Patient Service Center	Submit the testing requested under a single order number; if any samples are unable to be collected (urine, fasting, etc.), they will be assigned to a separate order number by the Patient Service Center staff

Please note that orders received by the laboratory that do not include all necessary samples for the testing requested will be managed using the following process:

IF	THEN
A single order is received and only some of the samples are submitted to the laboratory	The order will be held open until all samples for the day are processed; if all samples are not received, the tests with no samples will be cancelled with the notation of "no sample received"
Samples from the example above are sent to the laboratory after the initial order has reported and the testing was cancelled	A new order will be created using the provided collection date; testing will be performed and reported