

Sodium Citrate		Serum S	Potassium EDTA	Sodium Fluoride		
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Invert 3 to 4 times tube must be filled completely	blood	Inve should clot upright for 30 minutes	Invert 8 to 10 times	Invert 8 to 10 times do not confuse with urine culture tube		
Profiles & AMA Panels	Profiles & AMA Panels	Endocrine	Infectious Disease Continued	Individual Tests	Profiles &	Pregnancy
AWA Panels 1485* Lupus Anticoag Rflx Confirm (6B) 9190* Miscarriage Profile (4B, 2ST & 1L) Hematology/COAG 2092* Fibrinogen 1425 PT (Prothrombin	9325 Acute Hepatitis Panel 142 Basic Metabolic Panel 9179 Comp Metabolic Panel 115 Electrolyte Panel 2118 Iron and IBC 173 Lipid Panel 9190 Miscarriage Profile (4B, 2ST & 1L) 514 Obstetric Panel (2ST & 1L)	2700 FSH (Follicle Stim Hormone) 4304 17-OH Progesterone 2760 Insulin 2776 LH (Luteinizing Hormone) 2790 Progesterone	4677 Hepatitis C Ab Rflx PCR Quant 3540 HIV 1/2 Ab/Ag Combo 4592 HSV 182 IgG 4074 Parvovirus B19 IgM 3500 RPR Rflx Titer 4600 Rubella IgG 3455 Treponema Ab Rflx RPR	4976 CA 19-9 4827 CA 15-3 4824 CA 125 5083 CRP, High Sensitivity 2079 Creatinine Clearance (submit 24-Hr Unine Jug in conjunction with Serum Separator Tube) 2090 Ferritin 2695 Folate 4230 Fructosamine 2760 Insulin	Hematology/COAG	329 GTT, Gest 1 Hr 50 gm, Scrn 2140 GTT, Gest 2 Hr 75 gm, Diag 2111 GTT, Gest 3 Hr 100 gm, Diag Individual Tests 2217 Glucose Fasting
Time) 1430 PTT	Autoimmune 3550 ANA Rflx Titer	2800 Prolactin 4273 T3, Free 2823 T4, Free	4665 Varicella zoster IgG	2233 Uric Acid 2840 Vitamin B12	Individual Tests 3800 ABO/Rh	
* Requires critical frozen citrate plasma	4296 ANA Rflx Nuclear Ab Profile 4278 ANA Rflx Autoimmune Ab Profile 4809 Cardiolipin IgG/IgA/IgM 3545 CRP (C-Reactive Protein) 3505 Rheumatoid Factor	4834 Testosterone, F/T/SHBG 2835 TSH 2834 TSH Rflx Free T4 Infectious Disease 4543 Cytomegalovirus IgG/IgM 2739 Hepatitis Bs Ag 2737 Hepatitis Bs Ab	Pregnancy 2714 HCG, Qualitative 2713 HCG, Quantitativ 2616 1st Trim. Screen 5780 1st Trim. Sequential Scree 4059 2nd Trim. Sequential Scree 5375 2nd Trim. Quad	ve en sm	3810 Antibody Screen 3127 BRCA1 and BRCA2, Comprehensive 4118 Cystic Fibrosis, 39 3124 Cystic Fibrosis, 139 4845 Factor V Leiden 5225 Fragile X with Reflex to Methylation	2705 Glucose 6 Phos Dehydro 2708 Hemoglobin A1c 2720 Hemoglobin Electrophoresis 3521 Sickle Scrn Rflx Elect 5457 SMA (Spinal Muscular Atrophy)
	Thounatour dotor				Methylation	iviuscular Atrop



Collection Containers	Order Code & Test Name	Specimen Requirements			
_	8146 Pap Test, Image Guided 8141 Pap, Age-Based with DNA HPV*	Obtain an adequate sampling from the cervix using spatula, brush, or broom. Insert the central bristles of the broom into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix. For collection with broom: push gently and rotate in a clockwise direction five (5) times. For collection with brush: slowly rotate 1/4 - 1/2 turn in one direction. Rinse the broom into the vial by pushing the broom into the bottom of the vial ten (10) times, forcing the bristles apart. As a final step, swirl the broom vigorously to further dislodge material. Discard the collection device. Do not leave collection device in the vial. Remove immediately. Tighten the cap so that the torque line on the cap passes			
	8142 Pap, Age-Based with mRNA HPV*	the torque line on the vial. Record the patient's name and ID number on the vial. The sample will be returned if it is received without proper labeling. Record the patient name and medical history on the cytology requisition. Submit the sample to the laboratory at room temperature. Medicaid THSTEPS samples must sent to DSHS laboratory.			
	8038 HPV, Non-reflex	ThinPrep Preservcyt solution. Room temperature.			
THE DE	9988 HPV, Rflx, if ASC-US	Indicates request for high-risk HPV if ASCUS ThinPrep result. When reflex criteria are met, code 8038 will be added.			
This Prep	9992 HPV, Rflx, if ASC-US/LSIL	Indicates request for high-risk HPV if ASCUS or LGSIL ThinPrep result. When reflex criteria are met, code 8038 will be added.			
	9911 HPV, Rflx, if Epith Abn	Indicates request for high-risk HPV if any abnormal ThinPrep result. When reflex criteria are met, code 8038 will be added.			
BUTH-SCOOLSHIPT REPORT # FAMOURY Manage Company and	3640 Bacterial Vaginosis	6 mL ThinPrep (Preservcyt) solution. Room temperature or refrigerated.			
ad Naplace - 120 Companions, Authority III (1975)	3645 Candida	6 mL minimep (Preservcyt) solution. Room temperature or reingerated.			
ThinPrep®	4123 CT/NG				
	5403 CT (Chlamydia)	1 mL ThinPrep (Preservcyt) solution. Room temperature.			
	5402 NG (Gonorrhoeae)				
	3915 HSV 1/2	al. This Draw (Draway south and thing Drawy to managed, you are refrigered and			
	3912 Trichomonas	1 mL ThinPrep (Preservcyt) solution. Room temperature or refrigerated.			
	8972 Pap Test, Image Guided	Obtain material with spatula, endocervical brush, or cervical broom. Insert the brush or broom into the endocervical canal. Apply gentle pressure on the cervix until the lateral bristles of the brush bend against the ectocervix. Maintaining gentle pressure, hold the stem between the thumb and forefinger and rotate the broom five (5) turns clockwise OR slowly rotate the brush 1/4 - 1/2 turn in one direction. The entire head of the brush/broom is removed from the handle and placed into a SurePath collection vial. Tightly cap the vial.			
	8143 Pap, Age-Based with DNA HPV*	Record the patient's name and ID number on the vial. The vial must be labeled with patient name or it will be returned. Room temperature. Medicaid THSTEPS samples must sent to DSHS laboratory.			
SUREPATH DESIGNATION	8037 HPV, Non-reflex	SurePath solution. Room temperature.			
SURE PATH	9990 HPV, Rflx, if ASC-US	Indicates request for high-risk HPV if ASCUS SurePath result. When reflex criteria are met, code 8037 will be added.			
III III III	9991 HPV, Rflx, if ASC-US/LSIL	Indicates request for high-risk HPV if ASCUS or LSIL SurePath result. When reflex criteria are met, code 8037 will be added.			
(E) The EED	9912 HPV, Rflx, if Epith Abn	Indicates request for high-risk HPV if any abnormal SurePath result. When reflex criteria are met, code 8037 will be added.			
SurePath™	5404 CT/NG				
	5401 CT (Chlamydia)	1 mL fluid from SurePath vial. Room temperature.			
Suieratti	5400 NG (Gonorrhoeae)				
	3915 HSV 1/2	1 mL SurePath solution. Room temperature or refrigerated.			
	3912 Trichomonas	The outer diffeolution, noon temperature of renigerated.			

*Age-Based Pap and Related Testing ACOG Guidance

21-24 years: Pap Test, Imaged, reflex HPV if ASC-US, Chlamydia/Gonorrhea 25-29 years: Pap Test, Imaged, reflex HPV if ASC-US 30-65 years: Pap Test, Imaged and HPV

For Pap Testing beyond ACOG guidance ranges, analysis is given below:

<21 years: Pap Test, Imaged, Chlamydia/Gonorrhea >65 years: Pap Test, Imaged



Collection Containers	Ord	er Code & Test Name	Specimen Requirements
	3920 3914	Bacterial Vaginosis Candida	Vaginal Swab Specimens: 1) Hold the woven swab with the score line above your hand and insert the swab about 5 cm (2 in) into the vaginal opening. 2) Gently turn the swab for about 30 seconds while rubbing swab against the walls of the vagina. 3) Withdraw the swab carefully. Do not let the swab touch any surface before placing it into the collection tube. 4) Remove cap from collection tube. 5) Lower the swab into the Roche COBAS® tube until the score line is at the tube rim. 6) Leverage the swab shaft against the tube rim to break the shaft at the score line. 7) Tightly recap the collection tube.
Roche COBAS®	3911 3910	Trichomonas (Endocervical) Trichomonas (Vaginal)	Endocervical Swab Specimens: 1) Using the woven swab remove excess mucus from the cervical os and surrounding mucosa. Discard swab after cleaning. 2) To collect the specimen, hold flocked swab with the score line above your hand and insert into the endocervical canal. 3) Gently rotate the swab 5 times in one direction in the endocervical canal. Do not over-rotate. 4) Carefully withdraw the swab, avoiding any contact with the vaginal mucosa. 5) Remove cap from collection tube. 6) Lower the swab into collection tube until the score line is at the tube rim. 7) Leverage the swab shaft at the score line. 8) Tightly recap the collection tube. Submit the sample to the laboratory at room temperature or refrigerated.
Dual-Swab Kit	3915	HSV 1/2	Bacterial culturette swab inoculated with infected material. Room temperature.
	5249	CT/NG (Vaginal, Endocervical, and Male Urethral)	Female endocervical or vaginal swab or male urethral swab in COBAS® transport tube. Room temperature.
	3755	CT/NG (Rectal and Pharyngeal)	This test requires the collection of 2 specimens. Collect 1 rectal and 1 pharyngeal specimen obtained with Roche COBAS® Dual-Swab Collection Kit.
	3770	CT/NG (Rectal or Pharyngeal)	This test requires the collection of 1 specimen. Collect 1 rectal or 1 pharyngeal specimen obtained with Roche COBAS® Dual-Swab Collection Kit.
* 1 - 4	4335	CT/NG	First 20-30 mL voided urine. The patient must not have urinated for the last 1 hour. Transfer 2 mL urine to the Roche COBAS® Urine collection tube within 24 hours of collection. Room temperature. Male or female samples accepted.
Roche COBAS® Urine	3913	Female Trichomonas	Patient must not have urinated for at least 1 hour prior to specimen collection. Direct patient to provide a first-catch urine (approximately 20 to 30 mL of the initial urine stream) into a urine collection cup free of preservatives. Collection of larger volumes of urine may result in dilution that may reduce test sensitivity. Female patients should not cleanse the labelal area prior to providing the specimen. Remove the cap and transfer 2 mL of
	4445	Male Trichomonas	urine into the Roche COBAS® Urine tube using the disposable pipette provided within 24 hours of collection. The correct volume of urine has been added when the fluid level is between the black fill lines on the urine specimen transport tube label. Re-cap the urine specimen transport tube tightly. Submit specimen to the laboratory at room temperature or refrigerated.
BD Affirm™ VPIII	2030	Vaginal Pathogens DNA	Vaginal fluid collected in BD Affirm VPIII ambient temperature transport system. Room temperature. Note: separate swabs should be submitted if other tests are also ordered (e.g., Culture).
	6007	Culture, Routine	Bacterial culturette swab inoculated with infected material. Room temperature.
Swab system	6052	Culture, Genital	Inoculated swab in transport media. Room temperature.
Managered No. Approxime.	6079	Culture, Grp B Strep	
ESwab™	6085	Culture, Grp B, Pen. Aller.	Inoculated swab from vaginal/rectal source in transport media. Room temperature.



Polymedco OC-Auto®	Sterile Collection Container	Urine Culture Tube	24-Hr Urine	Urine Tube	Rapid fFN®	Cell-Free DNA Collection Tube
OC-Anto P	The state of the s	AD Vacutained plan CAS Process John CAS Process			HOLORO CE STORY	STRECK 6
Individual Tests 7008 Occult Blood, Diagnostic 7009 Occult Blood, Screen	Individual Tests 3254 Drug Screen, Rflx Confirm, Urine 4895 Microalbumin/Creat, Random Urine Microbiology 6075 Culture, Fungus, Skin/Hair/Nails	Individual Tests 6051 Urinalysis Rflx Culture (submit Urine Tube in conjunction with Urine Culture Tube) Microbiology 6049 Culture, Urine 6134 Culture, Urine, Pen. Aller.	Pregnancy 2149 Protein, Urine, 24 Hr Individual Tests 2079 Creatinine Clearance (submit Serum Separator Tube in conjunction with 24-Hr Urine Jug)	Individual Tests 1501 Urinalysis Rflx Microscopic 6051 Urinalysis Rflx Culture (submit Urine Culture in conjunction with Urine Tube)	Pregnancy 5570 Fetal Fibronectin With Fetal Sex 3322 NIPS 3323 NIPS w/ Monosomy X 3325 NIPS w/ Sex Chromosome Aneuploidies 3340 NIPS w/ Sex Chromosome Aneuploidies & Microdeletions+ 3341 NIPS w/ Rare Autosomal Aneuploidies+ 3342 NIPS w/ Rare Autosomal Aneuploidies & Microdletions+	Non-Invasive Prenatal Screening (NIPS) Without Fetal Sex 3326 NIPS 3327 NIPS w/ Monosomy X 3329 NIPS w/ Sex Chromosome Aneuploidies 3343 NIPS w/ Microdeletions+ *Screening for other aneuploidies such as trisomy 16, trisomy 22 microdeletion testing, and genome- wide screening for large copy number changes is not recommended by ACOG as testing is not clinically validated and detection rates and false- positive rates are not well established.¹ 1. ACOG Practice Bulletin 226: Screening for Fetal Chromosomal Abnormalities. Obstet Gynecol 2021 Oct. 136(4):e48-e69