Your Pathology

Labtests — Orange Fields Compulsory

Phone: 09 574 7399
www.labtests.co.nz

NHI: HFV2793	Surname: ASHBY	Given Names: CANDICE	
DOB: 25/01/91	Sex: F	Address: 23 GARRATT ROAD.	NZMC No.
Phone No.		Address: WAIHEKE ISLAND	Doctor Code: SISE3
Doctor: SELINA SINGH			Copy to:
Doctor Address: NATUROPATH			

Urgent (underline tests that are urgent)
☐ YES **Email Address:**
☐ NO **Phone:**

☐ Phone

Patient is ELIGIBLE for health benefit funding ☐ YES ☐ NO

Collection Centre Code:	Collector:	Date:	Time:

BIOCHEMISTRY

GENERAL CHEMISTRY

○	Electrolytes Na/K	ELE
○	Creatinine	CRE
○	Ca	CA
○	PO4	PO4
○	ALT	ALT
○	ALP	ALP
○	LFT	LFT
○	Urate	UA

LIPIDS

○	Lipid Profile	LIP

DIABETES

○	HbA1c	GLY
○	Urine Alb/Creat	MAL
○	Glucose	GLU

OTHER

○	CRP	CRP
○	PSA	PSA
○	Troponin I	TNI
○	Ferritin	FER
○	Electrophoresis	EPP

ENDOCRINOLOGY

THYROID

○	TSH	TSH

HAEMATOLOGY

○	CBC	CBC
○	INR (prothrombin)	PR
○	Coagulation Screen	COA

ANTENATAL

○	1st Antenatal	= ANT 1
○	Further Antenatal	= ANT 2
○	Glucose Challenge	PGL
○	HIV	AHI
○	Syphilis	

MICROBIOLOGY

URINE

○	Micro & culture	UMC

FAECES

○	Culture	FMC

THERAPEUTIC DRUGS

Specify Drug(s):

Date last dose:

Time last dose:

SWABS

○	Throat	THS
○	Skin*	WSC
○	Wound*	WSC
○	Cervical	GSC
○	Vaginal	GSC
○	Chlamydia*	CHA
○	Other*	

SPUTUM

○	Culture (non Tb-routine)	RSC
○	**MYCOLOGY***	

***Site:**

USE Collection

FASTING Y / N

SAMPLES

○	SST
○	EDTA
○	Citrate
○	Flox
○	Urine
○	Other

Other tests

FASTING HOMOCYSTEINE

(12 HOUR OVERNIGHT FASTING - ONLY WATER)

Clinical details/Reason for testing

PATIENT TO PAY

○ Mark here to opt out of TestSafe	○ Pregnant	○ Fasting

Doctor's Signature:

Date: 17.06.24

December 2020