



# LABORATORY REQUISITION

Department of Laboratory Medicine, Pathology & Medical Genetics  
This requisition form when completed constitutes a referral to Island Health laboratory physicians

ORDERING PRACTITIONER: ADDRESS, PHONE, MSP PRACTITIONER NUMBER

**Blue Highlighted fields must be completed.**

For tests indicated with a blue tick box , consult provincial guidelines and protocols ([www.BCGuidelines.ca](http://www.BCGuidelines.ca)) <https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines>

Bill to →  MSP  ICBC  WorkSafeBC  PATIENT  OTHER: \_\_\_\_\_

PERSONAL HEALTH NUMBER		ICBC/WorkSafeBC NUMBER		LOCUM FOR PRACTITIONER AND MSP PRACTITIONER NUMBER:	
LAST NAME OF PATIENT		FIRST NAME OF PATIENT		If this is a STAT order please provide contact telephone number:	
DOB	YYYY	MM	DD	SEX	Pregnant? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Fasting? _____ h pc
PRIMARY CONTACT NUMBER OF PATIENT		SECONDARY CONTACT NUMBER OF PATIENT		OTHER CONTACT NUMBER OF PATIENT	
ADDRESS OF PATIENT			CITY/TOWN	PROVINCE	POSTAL CODE

DIAGNOSIS	CURRENT MEDICATIONS/DATE AND TIME OF LAST DOSE
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HEMATOLOGY	URINE TESTS	CHEMISTRY
<input type="checkbox"/> Hematology profile <input type="checkbox"/> INR <input type="checkbox"/> Ferritin (query iron deficiency) HFE - Hemochromatosis (check ONE box only) <input checked="" type="checkbox"/> Confirm diagnosis (ferritin first, ± TS, ± DNA testing) <input checked="" type="checkbox"/> Sibling/parent is C282Y/C282Y homozygote (DNA testing)	<input checked="" type="checkbox"/> Macroscopic → microscopic if dipstick positive <input checked="" type="checkbox"/> Macroscopic → urine culture if pyuria or nitrite present <input checked="" type="checkbox"/> Macroscopic (dipstick) <input checked="" type="checkbox"/> Microscopic * <input checked="" type="checkbox"/> Special case (if ordered together)	<input type="checkbox"/> Glucose - fasting (see reverse for patient instructions) <input type="checkbox"/> Glucose - random <input type="checkbox"/> GTT - gestational diabetes screen (50 g load, 1 hour post-load) <input type="checkbox"/> GTT - gestational diabetes confirmation (75 g load, fasting, 1 hour & 2 hour test) <input type="checkbox"/> GTT - non-gestational diabetes <input type="checkbox"/> Hemoglobin A1c <input type="checkbox"/> Albumin/creatinine ratio (ACR) - Urine

**MICROBIOLOGY – LABEL ALL SPECIMENS WITH PATIENT'S FIRST & LAST NAME, DOB, PHN & SITE**

**ROUTINE CULTURE**  
 On Antibiotics?  Yes  No Specify: \_\_\_\_\_  
 Throat  Sputum  Blood  Urine  
 Superficial Wound, Site: \_\_\_\_\_  
 Deep Wound, Site: \_\_\_\_\_  
 Other: \_\_\_\_\_

**VAGINITIS**  
 Initial (smear for BV & yeast only)  
 Chronic/recurrent (smear, culture, trichomonas)  
 Trichomonas testing

**GROUP B STREP SCREEN (Pregnancy only)**  
 Vagino-anorectal swab  Penicillin allergy

**CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT**  
 Source/site:  Urethra  Cervix  Urine  
 Vagina  Throat  Rectum  
 Other: \_\_\_\_\_

**GONORRHEA (GC) CULTURE**  
 Source/site:  Cervix  Urethra  Throat  Rectum  
 Other: \_\_\_\_\_

**STOOL SPECIMENS**  
 History of bloody stools?  Yes  
 C.difficile testing  Stool culture  Stool ova & parasite exam  
 Stool ova & parasite (high risk, submit 2 samples)

**DERMATOPHYTES**  
 Dermatophyte culture  KOH prep (direct exam)  
 Specimen:  Skin  Nail  Hair  
 Site: \_\_\_\_\_

**MYCOLOGY**  
 Yeast  Fungus Site: \_\_\_\_\_

**HEPATITIS SEROLOGY**  
 **Acute viral hepatitis undefined etiology**  
 Hepatitis A (anti-HAV IgM)  
 Hepatitis B (HBsAg ± anti-HBc)  
 Hepatitis C (anti-HCV)  
 **Chronic viral hepatitis undefined etiology**  
 Hepatitis B (HBsAg; anti-HBc; anti-HBs)  
 Hepatitis C (anti-HCV)

**Investigation of hepatitis immune status**  
 Hepatitis A (anti-HAV, total)  
 Hepatitis B (anti-HBs)

**Hepatitis marker(s)**  
 HBsAg  
 (For other hepatitis markers, please order specific test(s) below)  
 HIV Serology  
 (patient has the legal right to choose not to have their name and address reported to public health = non-nominal reporting)  
 Non-nominal reporting

**OTHER TESTS – Standing Orders Include expiry & frequency**

ECG  
 FIT (Age 50-74 asymptomatic q2y) Copy to Colon Screening Program  
 FIT No copy to Colon Screening Program

**LIPIDS**  
 one box only  
 Note: Fasting is not required for any of the panels but clinician may specifically instruct patient to fast for 10 hours in select circumstances [e.g. history of triglycerides > 4.5 mmol/L], independent of laboratory requirements.  
 Full Lipid Profile - Total, HDL, non-HDL, LDL cholesterol, & triglycerides (Baseline or Follow-up of complex dyslipidemia)  
 Follow-up Lipid Profile - Total, HDL & non-HDL cholesterol only  
 Apo B (not available with lipid profiles unless diagnosis of complex dyslipidemia is indicated)

**THYROID FUNCTION**  
 For other thyroid investigations, please order specific tests below and provide diagnosis.  
 Monitor thyroid replacement therapy (TSH Only)  
 Suspected Hypothyroidism (TSH first, fT4 if indicated)  
 Suspected Hyperthyroidism (TSH first, fT4 & fT3 if indicated)

**OTHER CHEMISTRY TESTS**  
 Sodium  Creatinine / eGFR  
 Potassium  Calcium  
 Albumin  Creatine kinase (CK)  
 Alk phos  PSA - Known or suspected prostate cancer (MSP billable)  
 ALT  PSA screening (self-pay)  
 B12  Bilirubin  Pregnancy test  
 GGT  β-HCG – quantitative  
 T. Protein

SIGNATURE OF PRACTITIONER			DATE SIGNED
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DATE OF COLLECTION	TIME OF COLLECTION	COLLECTOR	TELEPHONE REQUISITION RECEIVED BY: (employee/date/time)
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**INSTRUCTIONS TO PATIENTS (See reverse)**  
Other Instructions:

The personal information collected on this form is collected under the authority of the *Personal Information Protection Act*. The personal information is used to provide medical services requested on this requisition. The information collected is used for quality assurance management and disclosed to healthcare practitioners involved in providing care or when required by law. Personal information is protected from unauthorized use and disclosure in accordance with the *Personal Information Protection Act* and when applicable the *Freedom of Information and Protection of Privacy Act* and may be used and disclosed only as provided by those Acts.

Location	Hours of Operation	Fax/Phone
<b>South Island Laboratories</b>		
Admiral's Walk 108-1505 Admirals Road, Victoria	Mon-Fri 7:30 am - 12:00 pm (noon)	Fax 250-480-7875
Brentwood Satellite Laboratory 1-7120 West Saanich Road, Brentwood Bay	Mon-Fri 7:30 am - 12:00 pm (noon)	Fax 250-652-7054
Galiano Island Health Unit 908 Burrill Street, Galiano Island	Thurs 7:00 am - 10:30 am Call for appointment	Phone 250-539-3230 Fax 250-539-3238
Keating Cross Road Laboratory 2140A Keating Cross Road, Victoria	Mon-Fri 7:30 am - 12:00 pm (noon)	Fax 250-544-8253
Lady Minto Hospital 135 Crofton Road, Saltspring Island	Mon-Fri 7:30 am - 1:45 pm	Phone 250-538-4812 Fax 250-538-4817
Mayne Island Health Clinic 100-466 Felix-Jack Road, Mayne Island	Wednesdays 7:30 am - 10:30 am	Phone 250-539-2312 Fax 250-539-3215
Pender Island Health Unit 5715 Canal Road, North Pender	Call for appointment	Phone 250-629-3233
Royal Jubilee Hospital 1952 Bay Street, Victoria	Mon-Fri 7:00 am - 5:00 pm Sat 7:30 am - 12:00 pm Sun 9:00 am - 1:00 pm	Fax 250-370-8482
Saanich Peninsula Hospital 2166 Mt. Newton Cross Road, Saanichton	Mon-Fri 8:00 am - 5:00 pm Sat 9:00 am - 1:00 pm	Fax 250-652-7589
Saanich Road Laboratory 201-3491 Saanich Road, Victoria	Mon - Fri 8:00 am - 4:00 pm Closed 12:00 pm (noon) - 12:30 pm	Fax 250-381-8079
Sidney Satellite Laboratory 2357 James White Blvd, Sidney	Mon - Fri 7:00 am - 6:00 pm Sat - 7:00 am - 2:30 pm	Fax 250-655-0783
Victoria General Hospital 1 Hospital Way, Victoria	Mon - Fri 7:00 am - 5:00 pm	Fax 250-727-4371
<b>Centre Island Laboratories</b>		
Chemainus Health Care Centre 9909 Esplanade Street, Chemainus	Mon-Fri 7:30 am - 3:30 pm	Phone 250-737-2040 ext 42238 Fax 250-737-2058
Cowichan District Hospital 3045 Gibbins Road, Duncan	Mon - Fri 7:00 am - 5:00 pm Sat - 8:00 am - 12:00 pm	Phone 250-737-2030 ext 44268 Fax 250-709-3004
Ladysmith Community Health Centre 1111 - 4th Ave, Ladysmith	Mon - Fri 7:30 am - 3:30 pm Sat - 8:00 am - 11:00 am	Phone 250-739-5786 Fax 250-740-2699
Nanaimo Regional Hospital 1200 Dufferin Cres, Nanaimo	Mon - Fri 8:00 am - 4:00 pm Sat - Sun call for appointment	Phone 250-755-7607 Fax 250-755-7625
Nanaimo Regional Hospital Sat Lab details: #2 - 1599 Dufferin Cres, Nanaimo	Mon - Fri 7:15 am - 5:00 pm Sat - 7:15 am - 1:30 pm closed at lunch 10:30 - 11:00 am	Phone 250-755-7623 Fax 250-755-6216
Tofino General Hospital 261 Neil Street, Tofino	Mon & Fri 12:30 pm - 2:30 pm Tues, Wed, Thurs 8:30 - 11:30 am	Phone 250-725-4006 Fax 250-725-4015
Ucluelet 1566 Peninsula Ave, Ucluelet	Tues & Thurs 7:30 am - 11:30 am	Phone 250-726-2296 Fax 250-726-7333
West Coast General Hospital 3949 Port Alberni Hwy, Port Alberni	Mon - Fri 7:00 am - 3:30 pm Sat - Sun call for appointment	Phone 250-724-8808 Fax 250-724-8831
<b>North Island Laboratories</b>		
Campbell River General Hospital 375 Second Ave., Campbell River	Mon - Fri 6:30 am - 5:00 pm Sat - 6:30 am - 2:00 pm	Phone 250-286-7100 ext 67447 Fax 250-286-7127
Cormorant Island Health Centre 49 School Road, Alert Bay	Mon - Fri 9:30 am - 11:30 am Mon - Thurs 1 pm - 2 pm	Phone 250-974-5585 ext 66343 Fax 250-974-5422
Courtenay Laboratory 307-14th St., Courtenay	Mon - Fri 8:00 am - 3:30 pm	Phone 250-331-8508 Fax 250-331-8514
Comox Valley Hospital Laboratory 101 Lerwick Ave., Courtenay	Mon - Fri 6:30 am - 5:00 pm Sat - 9:00 am - 1:00 pm	Phone 250-331-5950 Fax 250-331-5933
Cumberland Health Centre 2696 Windermere Ave, Cumberland	Mon - Fri 7:30 am - 11:00 am	Phone 250-331-8577 Fax 250-331-8578
Port Alice Health Centre 1090 Marine Dr, Port Alice	Call for Appointment	Phone 250-284-3555 Fax 250-284-6163
Port Hardy Hospital 9120 Granville St, Port Hardy	Mon - Fri 8:30 am - 2:00 pm  Sat - Sun 8:30 am - 9:30 am and 1:00 pm - 2:00 pm	Phone 250-902-6015 Fax 250-902-6031
Port McNeill Hospital 2750 Kingcome Place, Port McNeill	Mon - Sun 8:30 am-9:30 am and 1:00 pm - 2:00 pm	Phone 250-956-4461 ext 66228 Fax 250-956-4423
Quadra Medical Clinic Laboratory Quathiaski Cove, Quadra Island	Wed & Fri 7:00 am - 10:00 am	Phone 250-850-2654
St. Joseph's Laboratory 2137 Comox Ave, Comox	Mon - Fri 7:00 am - 3:00 pm	Phone 250-331-8634 Fax 250-331-8635

## ALL SITES ARE WHEEL CHAIR ACCESSIBLE

Hours of operation are subject to change.  
For the most current information, visit our website at  
[http://www.viha.ca/laboratory\\_medicine/](http://www.viha.ca/laboratory_medicine/)

## YOU WILL BE ASKED TO PRESENT YOUR CARE CARD AT EACH VISIT

## FOR TEST RESULTS AND GENERAL INFORMATION

Call the Laboratory Call Center  
Phone (250) 370-8355 Toll Free 1-866-370-8355  
Hours : Monday to Friday: 7:00 am to 6:00 pm  
Saturday and Stat Holidays: 8:00 am to 4:00 pm  
Closed Sundays

## TESTS REQUIRING APPOINTMENTS

ECG's are available at most sites.  
No appointment necessary -  
EXCEPT Lady Minto Hospital - phone 250-538-4800

## Holder Monitoring and Treadmill Tests

- Appointment required.
- Only available at certain locations.

## Physicians Must Book

- Bone Marrows
- Stimulation/Suppression Tests
- Autologous Blood Donation - Call 250-370-8454

## FOR SAMPLES DROPPED OFF

- Sample label must include full legal name, date of birth, insurer number, and date and time of collection
- Requisition must have the above plus name, MSP # and signature of ordering doctor

## PATIENT INSTRUCTIONS

### Urine for culture, macroscopic, microscopic tests

- If sample cannot be delivered to lab within 2h of collection, refrigerate immediately and deliver as soon as possible.

### Fasting Instructions

- Do not eat or drink (except water as required for thirst) for at least 8h (6h if pregnant) before the test.
- Do not exceed 12h fast (8 h if pregnant).

### Glucose Tolerance Tests (GTT)

- Follow fasting instructions.
- Maintain usual diet for at least three days prior to test

### Therapeutic (Medication) Blood Level

- For most medications the blood sample is optimally collected just prior to the next dose of medication.
- Digoxin - Blood sample is usually collected 8h after the last dose of medication.
- Lithium - Blood sample is usually collected 12h after the last dose of medication.

### Cortisol

- For morning (AM) cortisol levels, please arrive within 3h of awakening and prior to 10:00 am.
- May be required to rest for 30 minutes after arrival at lab.
- For a morning (AM) and afternoon (PM) cortisol, tests should be performed on the same day.