

SPECIAL HEMATOLOGY LABORATORY

CONTACT PERSON: KRISTEN HAMMOCK, EXT. 31237; SONYA WAITES/AMY MCCUNE-BURFORD, EXT. 31236

HOURS OF OPERATION: 8:00 AM – 4:30 PM, MONDAY THROUGH FRIDAY

AFTER HOURS, CONTACT THE ON-CALL HEME/ONC FELLOW

Dept. Order Info	Test Description	Specimen Type	Tube Type	Special Instructions or Information	Patient Preparation
By Name	Complete Blood Count with Differential (SHL)	Blood	Light Lavender 2ML (K ₂ EDTA) or Lavender 4ML (K ₂ EDTA)	Test ordered through Epic. Specimen to be delivered to FWC Room B-278 or tubed to 511. Test includes WBC, RBC, HGB, HCT, MCV, MCH, MCHC, RDW, PLT, MPV. Test performed on adult and pediatric FWC patients only.	None
By Name	Reticulocyte (SHL)	Blood	Light Lavender 2ML (K ₂ EDTA) or Lavender 4ML (K ₂ EDTA)	Test ordered through Epic. Specimen to be delivered to FWC Room B-278 or tubed to 511. Test includes automated reticulocyte count only. Test performed on adult and pediatric FWC patients only.	None
By Name	Bleeding Time (SHL)	N/A	N/A	Test ordered through Net Access. Contact technologists at extension 3-1236 to schedule. Patient must be in exam room prior to testing. Test performed on adult and pediatric FWC patients only.	No ingestion of aspirin products within past 7-10 days
Note	Peripheral Smear	Blood	Light Lavender 2ML (K ₂ EDTA) or Lavender 4ML (K ₂ EDTA)	Contact technologists in FWC Room B-278 or at extension 3-1236 to order. Peripheral smears are performed on specimens of Hematology Outpatient Clinic patients only. All smears are to be returned to the lab after review.	None
Note	Serum Viscosity	Blood	Red 5ML (no anticoagulant/ no gel)	Order as a miscellaneous test in Epic. Contact technologists at extension 3-1236 to order. Test is to be drawn between hours of 0800 and 1400 M-F. Please send full red top tube to FWC Room B-278 or tube to 511. Please include the following information: draw date, draw time, and nurse or physician contact information.	None

Dept. Order Info	Test Description	Specimen Type	Tube Type	Special Instructions or Information	Patient Preparation
Note	Leukocyte Alkaline Phosphatase	Blood	Green: 4 ML Sodium Heparin NH (no gel/wrapped in paper or foil)	Order as a miscellaneous test in Epic. Contact technologists at extension 3-1236 to order. Test is to be drawn between hours of 0800 and 1400 M-F. Please send full green top tube to FWC Room B-278 or tube to 511. Please include the following information: draw date, draw time, and nurse or physician contact info.	None
Note	Bone Marrow Biopsy Procedure	Bone Marrow	N/A	Procedure performed by Hematology/Oncology Fellows M-F 0800 to 1400. Contact on-call Fellow or lab at extension 3-1236 to schedule appointment. Physician to order 10-20ML 2% Lidocaine without epinephrine prior to scheduled appointment time.	None
Note	Special Stains (Ferric Iron, Periodic Acid Schiff, Alpha-Naphthol Butyrate Esterase, Tartrate Resistant Acid Phosphatase, Myeloperoxidase, Combined Esterase, Sudan Black B)	Bone marrow Blood	Green 4 ML Sodium Heparin NH, or Sodium Heparin filled Syringe. Lavender 4 ML (Peripheral Blood)	Technologist will collect specimen at time of bone marrow. Special Stains routinely performed on all newly diagnosed acute leukemia patients.	None

Note 1): These tests are not ordered through HIS. Please contact the Special Hematology Laboratory at extension 3-1236 for complete test collection and process information.

Note 2): Fill Evacuated Tubes to the indicated fill mark and/or Micro Container Tubes to the indicated volume markings.