

| Test Name | Laboratory | Specimen Type | Test Schedule | Reference Range | Effective Date | Comments |
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D-ALA (see Porphyrin Precursors, 24-Hour Urine, Porphyrin Precursors, Random Urine)

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| D-Dimer | Core | 2.7 mL Blue (3.2% Sodium Citrate) top Vacutainer Pediatric: 1.8 mL Blue (3.2% Sodium Citrate) *In cases where access is difficult, a 0.9 mL Blue top tube is acceptable GENERAL LABORATORY REQUISITION | As required | See Interpretive Comments on report | 2010-06-02 | <p>Inpatient D-Dimer requests will not be performed routinely. These requests must be authorized by a Hematologist.</p> <p>During regular working hours 0900-1700 contact Dr. M. Kovacs (pager 15182). After 1700 contact the on call Hematologist (pager 12222).</p> <p>All other D-Dimer requests will be processed including Emergency departments, Outpatient Clinics, private Physician's Office and referring Institutions.</p> <p><u>Caution:</u></p> <p>D-Dimer: when used in patients with a low clinical probab (more...)</p> |

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| D-Lactate, Serum Lactate-D | Toxicology/Special Chemistry | 5 mL Gold top Vacutainer tube or 6 mL Red top Vacutainer tube GENERAL LABORATORY REQUISITION | Weekly | <0.31 mmol/L | 2009-02-06 | |
| DAT (see <u>Direct Antiglobulin Test</u>) | | | | | | |
| Deceased Donor HLA Typing and Deceased Donor Crossmatch (see <u>HLA Workup Deceased Donor</u>) | | | | | | |
| Dehydroepiandrosterone Sulfate (see <u>DHEA Sulfate, Plasma/Serum</u>) | | | | | | |
| Delta-aminolevulinic acid (see <u>Porphyrin Precursors, 24-Hour Urine, Porphyrin Precursors, Random Urine</u>) | | | | | | |
| Demethylhydrazine (see <u>Diphenhydramine, Urine Qualitative</u>) | | | | | | |
| Dengue Fever (see <u>Arbovirus Flavivirus Serology/PCR</u>) | | | | | | |
| Depakene (see <u>Valproic Acid, Serum/Plasma-Total, Valproic Acid-Free, Serum</u>) | | | | | | |
| Desethylamiodarone (see entry for Amiodarone) | Toxicology/Special Chemistry | See Amiodarone entry GENERAL LABORATORY REQUISITION | Monday - Friday 0800-1600 | 2.3-3.9 umol/L | | |
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| Desipramine, Serum/Plasma Norpramine Pertofone | Core | 5 mL Gold top Vacutainer or 4 mL Lavender EDTA top Vacutainer tube Pediatric: 0-2 years: Red 0.5 Microtainer 2-10 years: 2 mL Red top GENERAL LABORATORY REQUISITION | Referred out Monday-Thursday | 0 - 1140 nmol/L | 2007-03-05 | Toxic: Greater than 1800 nmol/L Desipramine is also the metabolite of Imipramine, and is measured routinely when Imipramine is prescribed. |
| Desmethylclomipramine (metabolite) (see <u>Clomipramine and Metabolite, Serum</u>) | | | | | | |
| Desyrel (see <u>Trazodone</u>) | | | | | | |
| Dextroamphetamine (see <u>Amphetamine Screen, Urine</u>) | | | | | | |

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| DHEA Sulfate, Plasma/Serum Dehydroepiandrosterone Sulfate DHEAS | Core | <p>Adult: 4.5 mL Light Green top (Li-Heparin) Vacutainer tube</p> <p>Pediatric: 0-2 years: 0.5 mL Light Green top (Li-Heparin) Microtainer 2-10 years: 3 mL Light Green top (Li-Heparin) Vacutainer tube</p> <p>Red, Gold, or Lavender (EDTA) top tubes are also acceptable</p> <p>GENERAL LABORATORY REQUISITION</p> | Batched, run on Tuesdays | <p><u>Child:</u> < 1 week: 2.9 16.5 mol/L 1 4 weeks: 0.9 11.7 mol/L 1 12 months: ≤ 3.4 mol/L 1 4 years: ≤ 0.5 mol/L 5 9 years: ≤ 2.3 mol/L</p> <p><u>Male:</u> 10 14 years: 0.7 6.7 mol/L 15 19 years: 1.9 13.4 mol/L 20 24 years: 5.7 13.4 mol/L 25 34 years: 4.3 12.2 mol/L 35 44 years: 2.4 11.6 mol/L 45 54 years: 1.2 9.0 mol/L 55 64 years: 1.4 8.0 mol/L 65 74 years: 0.9 6.8 mol/L ≥ 75 year (more...)</p> | 2018-03-06 | <p>Biotin may interfere with this test. Samples should not be taken from patients receiving high biotin doses (i.e. > 5 mg/day) until at least 8 hours after the last biotin administration.</p> <p>Rheumatoid factor > 80 IU/mL may cause interference with this assay.</p> |

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| DHEAS (see <u>DHEA Sulfate, Plasma/Serum</u>) | | | | | | |
| DHT (see <u>Dihydrotestosterone, Serum</u>) | | | | | | |
| Dibucaine Number (see <u>Cholinesterase Phenotype (includes Cholinesterase, Total Activity)</u>) | | | | | | |
| DIC Screen (see <u>Disseminated Intravascular Coagulation Screen</u>) | | | | | | |
| Differential Bone Marrow (see <u>Bone Marrow Aspirate Examination</u>) | | | | | | |
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| Differential Leukocyte Count (Peripheral Blood) White Blood Cell Differential Lymphocytes Monocytes Neutrophils Bands Eosinophils Basophils | Core | <p>Adult: 4 mL K₂ EDTA (Lavender) Vacutainer tube</p> <p>Pediatric Venous: 2 mL Paeds K2 EDTA (Lavender) Vacutainer</p> <p>Pediatric (Capillary): 0.5 mL MAP K₂ EDTA (Lavender) Microtube 0.5 mL K₂ EDTA (Lavender) Microtube GENERAL LABORATORY REQUISITION</p> | As required | <p>Lymphocytes: 18 yrs.: 1.0-4.0 x 10⁹/L 10-17 yrs.: 1.5-4.0 x 10⁹/L 2-9 yrs.: 2.0-8.0 x 10⁹/L 1-23 months: 4.0-10.5 x 10⁹/L Newborn-30 days: 2.0-17.0 x 10⁹/L</p> <p>Monocytes: >18 yrs.: 0.2-0.8 x 10⁹/L 10-17 yrs.: 0.2-0.8 x 10⁹/L 2-9 yrs.: 0.2-0.8 x 10⁹/L 1-23 months: 0.2-1.5 x 10⁹/L Newborn-30 days: 0.2-3.1 x 10⁹/L</p> <p>Neutrophils: >18 years: (more..)</p> | 2007-07-18 | |

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| Digoxin Lanoxin | Core UH & VH | <p>4.5 mL Green (Lithium Heparin) top Vacutainer tube</p> <p>Plasma from a 5 mL Gold top or 6 mL Red top Vacutainer tube is also acceptable.</p> <p>Pediatric: 0-2 years: 0.5 mL Green Microtainer 2-10 years: 2 mL Green top tube GENERAL LABORATORY REQUISITION</p> | As required | <p>Therapeutic range: 1.0 to 2.6 nmol/L</p> <p>Congestive heart failure: 0.6 to 1.0 nmol/L</p> | 2008-11-15 | <p>CRITICAL VALUE to be phoned to Nurse or Physician immediately:</p> <p>Toxic: Serum/Plasma >3.0 nmol/L Therapeutic digoxin concentrations vary significantly, depending upon the individual. The lower limit for one patient may be ineffective in another, while the upper limit may prove toxic in a third. The physician should determine the appropriate reference interval for each patient.</p> |

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| Dihydropteridine Reductase, Dried Blood Spot PKU-DHPR Deficient | Biochemical Genetics | Filter Paper with 6 mL Green (Sodium Heparinized) top Vacutainer BIOCHEMICAL GENETICS LAB REQUISITION | As required | 7-22 U/g Hb | 2008-06-10 | |

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| Dihydrotestosterone, Serum DHT | Endocrinology | <p>Adult: 5 mL Gold top Vacutainer</p> <p>Pediatric: 0-2 years: 2 x 0.5 mL Red or Gold top Microtainers 2-10 years: 3 mL Red top Vacutainer tube</p> <p>Light Green top (Li-Heparin) or Lavender top (EDTA) tubes are NOT acceptable</p> <p>GENERAL LABORATORY REQUISITION</p> | Monday - Friday 0800-1600 | <p><u>Male:</u> < 8 years: ≤ 632 pmol/L 8 18 years: ≤ 3367 pmol/L adult: 860 3406 pmol/L</p> <p><u>Female:</u> < 8 years: ≤ 632 pmol/L 8 18 years: ≤ 1916 pmol/L premenopausal adult: 83 1266 pmol/L postmenopausal: 34 623 pmol/L</p> | 2009-02-12 | Decreased in 5alpha-reductase deficiency. |

Dilantin (see Phenytoin, Serum/Plasma-Total)

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| Diphenhydramine, Urine Qualitative Demehydrinate Gravol Benadryl | Toxicology/Special Chemistry | Minimum 10 mL random urine collected in a sterile container GENERAL LABORATORY REQUISITION | Monday-Friday: 0800-1600 | | 2011-06-14 | |
| Direct (see <u>Bilirubin- Direct</u>) | | | | | | |
| Direct Antiglobulin Test DAT Coombs' Test | Blood Transfusion | 6 mL Pink (EDTA) top Vacutainer tube BLOOD TRANSFUSION REQUISITION or Electronic order | Daily | See report | | |
| Direct Renin (see <u>Renin, Plasma</u>) | | | | | | |
| Disseminated Intravascular Coagulation Screen DIC Screen | Core | 4 mL Lavender (K ₃ EDTA) and 2.7 mL Blue (3.2% Sodium Citrate) Vacutainer tubes GENERAL LABORATORY REQUISITION | As required | See individual ranges and values for INR, PTT, Platelet Count and Fibrinogen. | | |
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| DNA/RNA Banking Banking | Molecular Diagnostics | Whole blood-2 x 4 mL Lavender EDTA top Vacutainer tube MOLECULAR DIAGNOSTIC REQUISITION | As Required Monday - Friday 0800 - 1600 h | See report | | <p>For more information click on: Molecular Diagnostic Laboratory. N/A The DNA/RNA will be extracted and stored in a manner suited to long-term storage (banking). Any referrals at a later date to this sample should be based on the name given above and the sample number to facilitate an efficient recovery of the sample from storage. This service is provided for clinical indications only. Please consult with the director before requesting the banking of samples. DNA is routinely stored in Low TE and frozen at minus 80 degrees Celsius.</p> <p>RNA is routine (more...)</p> |

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| Donath-Landsteiner Hemolysin Test (see <u>PCH Donath-Landsteiner Test</u>) | | | | | | |
| Donor Screen (see <u>Hepatitis Donor Transplant Screen</u>) | | | | | | |
| Dopamine (see <u>Catecholamines, Plasma (Norepinephrine, Epinephrine, Dopamine), Catecholamines, Urine</u>) | | | | | | |
| Doriden (see <u>Glutethimide, Serum</u>) | | | | | | |
| Down Syndrome Screen (see <u>Maternal Serum Screen (for Open Neural Tube Defect and Down Syndrome Risks)</u>) | | | | | | |
| Doxepin + Desmethyldoxepin, Serum/Plasma Sinequan | Core | 2 x 6 mL Gold top Vacutainer or 2 x 4 mL Lavender top EDTA Vacutainer tube Avoid gel-separator tubes GENERAL LABORATORY REQUISITION | Referred out Monday-Thursday | Doxepin + Desmethyldoxepin: 350-1100 nmol/L | 2005-07-01 | |
| Duodenal Brush/Wash (see <u>Gastrointestinal/Hepatobiliary Specimens for Cytology</u>) | | | | | | |