

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Olanzapine, Urine Qualitative Zyprexa	Toxicology/Special Chemistry	Minimum 10 mL random urine collected in a sterile container GENERAL LABORATORY REQUISITION	Monday-Friday: 0800-1600		2011-06-14	
Olanzapine, Serum/Plasma	Toxicology/Special Chemistry	6 mL Red top Vacutainer tube or 4.5 mL Green (Lithium Heparin) top Vacutainer tube GENERAL LABORATORY REQUISITION	Once a week	Therapeutic Range for 5 to 20 mg/day dose: 32-256 nmol/L Peak achieved at 6 hours Effective level >30 nmol/L		
Oligoclonal Banding (see <u>Protein Electrophoresis, CSF</u>)						
Oligosaccharide Screen, Urine	Biochemical Genetics	Random urine BIOCHEMICAL GENETICS LAB REQUISITION	Batched and tested as required	See report issued by lab	2008-06-10	
Open Neural Tube Defect (ONTD) (see <u>Maternal Serum Screen (for Open Neural Tube Defect and Down Syndrome Risks)</u>)						
Open Spina Bifida (OSB) (see <u>Maternal Serum Screen (for Open Neural Tube Defect and Down Syndrome Risks)</u>)						
Opiate Screen (see <u>Opiates Screen, Urine</u>)						

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Opiates Screen,Urine Opiate Screen Morphine Morphine Glucuronide	Core UH & VH	Random urine GENERAL LABORATORY REQUISITION	As required	Negative	2008-11-15	<p data-bbox="1661 224 1990 467">Please order Urine Oxycodone separately, as the urine Opiates Screen is a poor screening tool for Oxycodone.</p> <p data-bbox="1661 521 1990 1317">A positive result for the Opiates Screen indicates that the drug (any combination of codeine, morphine, hydromorphone or hydrocodone) may be present in urine at a minimum total concentration of 300 ng/mL. This result is to be regarded as preliminary/presumptive unless subsequently verified by a definitive confirmation test (available upon request by calling the Toxicology Laboratory).</p> <p data-bbox="1661 1370 1990 1487">Note 1. The Opiates Screen is a poor screening test (more...)</p>

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Organic Acid - Screening, Urine	Biochemical Genetics	Random urine BIOCHEMICAL GENETICS LAB REQUISITION	As required	See report issued by lab	2008-06-10	
Orotic Acid, Urine Urea Cycle Disorder	Biochemical Genetics	Random urine BIOCHEMICAL GENETICS LAB REQUISITION	As required	0.0-7.7 ug/mg creatinine	2008-06-10	
Osmolality, 24-Hour Urine	Core	24 Hour urine GENERAL LABORATORY REQUISITION	As required	300-900 mosm/kg	2006-05-16	

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Osmolality,Urine/Serum/Plasma	Core	Random urine collected in a sterile container or 5 mL Gold or 4.5 mL Green top Vacutainer Pediatric: 0-2 years: 1 mL Red Microtainer 2-10 years: 2 mL Red top tube GENERAL LABORATORY REQUISITION	As required	Urine: 300-900 mOsm/Kg Serum/Plasma: 275-295 mOsm/Kg		
Other FNA (see <u>Image-Guided Fine Needle Aspirate Cytology, Non-Image Guided Fine Needle Aspiration Biopsy for Cytology</u>)						

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Ova and Parasite Screen	Microbiology (VH)	Faeces See Critical Information Required before submitting samples. For samples other than faeces, contact the lab before collecting for specific instructions regarding preservation and transport. MICROBIOLOGY REQUISITION	Daily If full Ova and Parasites requested, the sample will be referred out Monday-Friday		2011-07-21	
Ova and Parasites (see <u>Cryptosporidium</u>)						

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Ova and Parasites- Blood and Tissue Leishmania Trypanosoma Echinococcus Schistosoma Trichinella Toxoplasma	Microbiology (VH)	Note:Please contact a Medical Microbiologist before specimen collection: Specimen type varies with species PUBLIC HEALTH LABORATORY TEST REQUISITION	Monday - Thursday	See report	2010-09-13	
Ova and Parasites- Ticks/Arthropods Ticks Arthropods	Microbiology (VH)	Ticks, mites etc. PUBLIC HEALTH LABORATORY TEST REQUISITION	Daily	See report	2007-05-29	
Oxalate, 24-Hour Urine	Core	24-hour urine GENERAL LABORATORY REQUISITION	Referred out Monday- Thursday	Child (0-16 years): 161-483 mol/day Male: 92-564 mol/day Female: 46-368 mol/day	2018-01-15	

Test Name	Laboratory	Specimen Type	Test Schedule	Reference Range	Effective Date	Comments
Oxalate, Random Urine	Core	Random urine (24-hour urine is the preferred sample type; see Lab Test Information Guide entry for Citrate, 24-Hour Urine) GENERAL LABORATORY REQUISITION	Referred out Monday-Thursday	< 6 months: ≤ 0.37 mmol/mmol creatinine 6-24 months: ≤ 0.26 mmol/mmol creatinine 2-5 years: ≤ 0.14 mmol/mmol creatinine 6-12 years: ≤ 0.08 mmol/mmol creatinine > 18 years: ≤ 0.04 mmol/mmol creatinine	2018-01-15	
Oxycontin (see <u>Urine Oxycodone</u>)						
Oxygen Affinity (see <u>p50 O2 Affinity Hemoglobin</u>)						