# **Lab Production Schedule: Anatomical Pathology**

### Days of the Week Performed

Test Name	Dept	Shift	М	т	w	, т		F	s	s	Cutoff Time	Usual TAT (Days)	Desired Volume (mL)	Container	Shipping Stabilities	Comments
Bone Marrow Biopsy	AP	D, E, N	√	√	√	√	⊥,	√	'ے	二 ′		1 - 3	1 cm core biopsy	30 mL formalin	Room Temp	
Immumofluorescent Studies, Biopsy	AP	D	<b>√</b>	<b>√</b>	1	· 1	<u> </u>	<b>V</b>	 	<u> </u>	<u> </u>	1 - 2	biopsy of kidney, skin, lung	Micheles solution	Room Temp	Call lab for kit
Immumofluorescent Studies, subsequent Ab's	AP	D	<b>√</b>	<b>V</b>	√	1	<u></u>	<b>√</b>	I	<u> </u>	!	1 - 2	[	Micheles solution	ĺ	
Lymph Node Biopsy	AP	D		1	V	1		1		Ĺ		1 - 3		Saline moist sponge		Clients call lab; inpatient take to frozen section lab
Stone Analysis	AP	D	√	√	√	√	`	√	الله	<i>'</i>	'	7	Entire Calculi	Plastic urine container	<u> </u>	
Tissue Biopsy - CNS	AP	D	V	<b>√</b>	<b>V</b>	<b>√</b>		<b>V</b>	<b>V</b>	<b>√</b>		2	40 mg fresh tissue to neuropathology immediately	Notify neuropathology before surgery		Call neuropathology for instructions
Tissue Biopsy - Muscle	AP	D	V	V	V	V		<b>V</b>		L'	11:00 AM	2-3	40 mg fresh tissue to neuropathology immediately	Notify neuropathology before surgery		Call neuropathology for instructions
Tissue Biopsy - Myocardium	AP	D	V	<b>√</b>	V	V		<b>V</b>		L	10:00 AM	1	Heart tissue - consult pathologist prior to surgery	t 10% neutral buffered formalin in plastic container		Call surgical pathology for instructions
Tissue Biopsy - Myocardium for Immunofluorescence	AP	D	<b>√</b>	<b>V</b>	<b>√</b>			<b>√</b>	 	1		1 - 2	Consult pathologist	Micheles solution		Call surgical pathology for instructions
Tissue Biopsy - Neuropathology	AP	D	V	√	1			√					40 mg fresh tissue to neuropathology immediately			Call neuropathology for instructions
Tissue Biopsy - Peripheral Nerve	AP	D	V	V	<b>V</b>				_   			10	1 cm length, fresh to neuropathology immediately			Call neuropathology for instructions
Tissue Biopsy - Renal	AP	D	√	√	√	√	, II.	√				1 - 2	3x1 cm core	Renal Bx kit (3 part)		Call surgical pathology for kit
Tissue Biopsy - Skin (neuropathology)	AP	D	V	<b>V</b>	1	V			_   		12:00 noon		2 x 3 mm skin punch biopsy of scapular region			Call neuropathology for instructions
Tissue Biopsy - Skin (surgical pathology)	AP	D	<b>√</b>	<b>√</b>	V	. 1		<b>√</b>		L		2	1 mm skin punch or shave biopsy	30 mL formalin filled bottle	Room Temp	
Tissue Biopsy - Surgical Pathology Examination	AP	D	V			V		1	_ L			1 - 2	Tissue fixed in neutral buffered formalin	Plastic container with enough fixative (buffered 10% formalin) to cover the specimen	Room Temp	



# **Lab Production Schedule: Cytology and Electron Microscopy**

### Days of the Week Performed

				-						Cutoff	Usual TAT	Desired Volume		Shipping	
Test Name	Dept	Shift	M	_Т_	W	_Т_	_ F_	<u> </u>	S	Time	(Days)	(mL)	Container	Stabilities	Comments
Cell Block and Smear	Cyto	D	\ \	<b>√</b>	1	\ \	√				1 - 3	As much as possible	1 ml syringe		Smear must be fix with spray or 95% ETOH
Cytology, Anterior Eye Chamber	Cyto	D	1	√	<b>V</b>	<b>V</b>	√				1 - 2	5 mL	Sterile container		Send ASAP
Cytology, Body Fluid	Cyto	D	√	√	√	√	√				1 - 2	Brush lesion area	Cytolyte fixative		Add heparin if bloddy
Cytology, Bronchial Washings	Cyto	D	√	√	√	√	√				1 - 2	Brush lesion area	Cytolyte fixative		Call cytology
												Scrape of buccal			
Cytology, Brushings	Cyto	D	√	√	√	√	√				1 - 2	muscosa			Call cytology
Cytology, Buccal Smear	Cyto	D	√	√	√	√	√				1 - 2	Cervical scraping	SurePath pap kit		Call cytology
Cytology, Cervical/Vaginal	Cyto	D	√	√	√	√	√				1 - 10	fresh fluid	Sterile container		Call lab for kit
Cytology, Cyst Fluid	Cyto	D	√	√	√	√	√				1 - 2				
Cytology, Needle Aspiration (FNA)	Cyto	D	√	√	<b>√</b>	<b>√</b>	√				2 - 4				
Cytology, Nipple Discharge	Cyto	D	√	√	√	√	√				2 - 4				
Cytology, Spinal Fluid	Cyto	D	√	√	√	√	√				1 - 2		CSF tube		
Cytology, Surface Scrape	Cyto	D	<b>√</b>	V	<b>√</b>	V	<b>√</b>				1 - 2	direct scrape of lesion			Call cytology
Cytology, Urine	Cyto	D	\ \	<b>√</b>	<b>√</b>	<b>V</b>	<b>√</b>				1 - 2	voided or catherized urine - do not use first morning	Sterile capped container	Send on ice	
Cytology, Washings	Cyto	D	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>				1 - 2		Sterile capped container		Call cytology
Electron Microscopy	EM	D	<b>√</b>	<b>√</b>	<b>√</b>	V	<b>√</b>				3	Consult with surgical pathologist	Gluteraldhyde		Call EM lab for fixative



# **Lab Production Schedule: Flow Cytometry**

Days	of the	Week	Performed
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Test Name	Dept	Shift	м	т	w	т	F	s	s	Cutoff Time	Usual TAT (Days)	(mL)	Container	Stabilities	Comments
BCelSubs	Flow	D	\ \ \		\ \					Time	1-3	7 ml blood; 3 ml	Green (Sodium Heparin) and Lavender (EDTA)		Include CBC results if available. T cell subsets must be ordered with this test Call FLOW lab 317.491.6550
CD4TF/UP	Flow	D	V	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)		Include CBC results if available - Call FLOW lab 317.491.6550
CD4TINTL	Flow	D	V	<b>V</b>	V	<b>√</b>	V				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)		Include CBC results if available - Call FLOW lab 317.491.6550
CD4 Derm	Flow	D	V	<b>V</b>	V	V	V				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)		Include CBC results if available - Call FLOW lab 317.491.6550
Con Trans	Flow	D	V	V	V	V	V				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)	Room Temp	Include CBC results if available - Call FLOW lab 317.491.6550
Leuk/Lym	Flow	D	\ \ \	<b>√</b>	<b>√</b>	<b> </b> √	\ \ \				1-3	7 ml blood; 7 ml bone marrow; tissue, FNA and body fluids	Green (Sodium Heparin) and Lavender (EDTA); transport refrigerated tissue, FNA and body fluids in RPMI	and bone marrow); refrigerated (tissue,	an order for CBC with EDTA tube - Call FLOW
Leukocytes Adhesion Defect	Flow	D	V	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin)	Room Temp	Include CBC results if available - Call FLOW lab 317.491.6550
Lympheno	Flow	D	V	<b>V</b>	<b>√</b>	<b>√</b>	V				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)		Include CBC results if available - Call FLOW lab 317.491.6550
CD3 Pnl	Flow	D	V	V	V	V	V				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)	Room Temp	Include CBC results if available - Call FLOW lab 317.491.6550
Paroxysmal Nocturnal Hemoglobinuria	Flow	D	V	<b>V</b>	<b>V</b>	V	V				1 - 3	7 ml blood	Green (Sodium Heparin) and Lavender (EDTA)	Room Temp	Include CBC results if available - Call FLOW lab 317.491.6550
TCelSubs	Flow	D	V	<b>√</b>	<b>√</b>	\ \	\ \				1 - 3	7 ml blood; 3 ml minimum	Green (Sodium Heparin) and Lavender (EDTA)	Room Temp	Include CBC results if available - Call FLOW lab 317.491.6550

