GOVERNMENT OF WESTERN AUSTRALIA

PathWest LABORATORY MEDICINE WA

ABN 83 469 340 804

PATHOLOGY REQUEST

Unit no. _____ Medicare Number _____

Surname _____

Given Names _____

Date of Birth _____ Age _____ Sex _____

Address _____

TESTS REQUESTED

URGENT [X] PHONE [X] FAX [ ]

Ph / Fax Number: _____

Seated Saline Suppression Test - Pre-saline (Time 0)

Collection instructions:

- 1 x Green top PST tube (for urgent potassium)
- 1 x Lavender top EDTA tube (sent to PathWest FSH)

PathWest processing instructions:

- Register test code "SALST"
- Green tube for urgent potassium
- Lavender tube centrifuge, separate and freeze (send to FSH Lab frozen)
- Retain printed barcode labels for "post-saline" collection (4 hour infusion)

CLINICAL NOTES

Please phone urgent potassium result to: _____

? Primary Hyperaldosteronism

Baseline bloods (Time 0)

Results to be: [ ] Faxed _____ [ ] Phoned _____

Consultant

Requesting Doctor
(surname and initials, provider number, address)

Doctors Signature X _____

Request Date _____

Page _____

Copy Reports to:

Fasting: Yes [ ] No [ ]

Rule 3 Exemption: Yes [ ] No [ ]

Anticoagulant Therapy Warfarin [ ] Heparin [ ]

Patient's Signature for Ancillary Test:

X _____

Source / Hospital

Ward / Clinic

Day For Collection

M T W Thu F S Su

When collecting ANTIBIOTIC or DRUG assays fill in this box:

Drug	Dosage	Date	Time

Date of Collection Time of Collection

CLOT		SST		CIT	
ACD		HEP		EDTA	
GLU		ESR		ABG	
URINE		24 URINE		SWAB	
SLIDE		Other			

Collector's Signature

I certify that the blood specimen(s) accompanying this request was drawn from the patient named above and I established the identity of this patient by direct inquiry and/or by inspection of wrist band and immediately upon the blood being drawn I labelled the specimen(s).

X _____

Patient status at time of service or when specimens collected:

	YES	NO
1. A private patient in a private hospital or approved day hospital facility	☐	☐
2. A private patient in a recognised hospital	☐	☐
3. A Medicare (public patient) in a recognised hospital	☐	☐
4. An outpatient of a recognised hospital	☐	☐

RCPA The Royal College of Pathologists of Australasia

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NATA