

**A****α 1AT**

See ALPHA 1 ANTITRYPSIN

**AA SCREEN**

See AMINO ACID SCREEN

**ABSCCESS**

See WOUND ASPIRATE

**ACANTHAMOEBA**

Specimen required: **Eye swab or Corneal scrapping**

Department: Referred test

Comment: **Notify Duty Manager if requested.** May be requested by ophthalmologist in patients who wear contact lenses and have eye ulceration. Limited material is usually available for all tests.

See also: Eye Swab

**ACA**

See ANTI CARDIOLIPIN ANTIBODIES

**ACE**

See ANGIOTENSIN CONVERTING ENZYME

**ACETOMINOPHEN**

See PARACETAMOL

**ACETYLCHOLINE RECEPTOR ANTIBODIES ( ACRA )**

See ANTI ACETYLCHOLINE RECEPTOR ANTIBODY

**ACETYLSALICYLIC ACID ( ASPIRIN )**

See SALICYLATES

**ACID FAST BACILLI ( AFB )**

See TUBERCULOSIS

**ACLA**

See ANTI CARDIOLIPIN ANTIBODIES

**ACPA**

See ANTI CYCLIC CITRULLINATED PEPTIDE

**ACR**

See ALBUMIN CREATINE RATIO

**ACTH ( ADRENOCORTICOTROPHIC HORMONE )**

Specimen required: **1 x PPT - Must be full tube. Tubes must be pre-chilled and collected on ice.**  
 Department: Biochemistry  
 Reference range: 0 - 10 pmol/L (Diurnal Variation)  
 Interpretation: LOW - Pituitary insufficiency, extrapituitary Cushing's disease  
 HIGH - Cushing's disease of pituitary origin, adrenal insufficiency, ectopic ACTH  
**Note:** **Please refer patient to Main Laboratory ONLY.**  
 Ideally collected between 8am & 9am, Mon-Fri. Specimen to be spun and frozen immediately.  
 Afternoon collection (4-5pm) available only when specially requested.

**ACTIVE B12**

See Vitamin B12  
 Comment: Only performed if Vitamin B12 levels are below 200pmol/L

**ACTIVATED PROTEIN C RESISTANCE ( APC RESISTANCE )**

Specimen required: **1 x Sodium Citrate tube,**  
**1 x EDTA** (For molecular study for Factor V Leiden gene mutation only if required)  
 Department: Haematology  
 Reference range: Normal < 2.5

**ACUTE PHASE REACTANTS**

See ESR, FERRITIN, C-REACTIVE PROTEIN  
 Comment: If acute phase reactant not specified do an ESR and C-Reactive protein.

**ADENOVIRUS SEROLOGY**

Specimen required: **1 x SST**  
 Department: Referred test  
 Comment: May occasionally cause respiratory infection, rash, meningitis

**ADENOVIRUS PCR**

Specimen required: **Dry swab from eye(s) for PCR or stool sample for gastroenteritis. Dry nasal swab and throat swab if for diagnosis of respiratory infection.**  
 Department: Referred test  
 Comment: Can cause acute conjunctivitis + strains 40/41 cause gastroenteritis

**ADRENALINE / NORADRENALINE – Urine ( CATECHOLAMINES )**

Specimen required: **24 hour urine collection.**  
 Department: Referred test  
 Reference range: Adrenaline <120 nmol/day  
 Noradrenaline <600 nmol/day  
 Interpretation: HIGH - Pheochromocytoma, Neuroblastoma (children), severe stress or exercise.  
 Note: **Preservative: 20 mls of 50% Hydrochloric Acid.**  
**Patient should be informed of the need for care with the preservative.**

**ADH (ANTI DIURETIC HORMONE OR VASOPRESSIN)**

See Anti Diuretic Hormone

**ADRENALINE / NORADRENALINE – Blood**

Specimen required: See Metanephrines-Plasma  
 Department: Referred test  
 Comment: Due to special collection requirements this test can only be performed at the Main Laboratory.  
 Note: Blood testing will only be performed if Urine Adrenaline/Noradrenaline is elevated and consultation with pathologist has occurred.

**ADRENOCORTICOTROPHIC HORMONE ( ACTH )**

See ACTH

**AFB CULTURE**

See TUBERCULOSIS

**AFB SMEAR**

See TUBERCULOSIS

Department: Referred test

Comment: Can be performed at Clinipath Pathology for urgent cases.

**AIDS**

See HIV SEROLOGY

**ALANINE TRANSAMINASE ( ALT OR SGPT )**

Specimen required: **Serum (1 x SST)**

Department: Biochemistry

Reference range: 0 - 40 U/L

Interpretation: HIGH - Liver cell damage.

- In viral conditions such as Hepatitis C, the elevation of ALT is typically greater than AST.

Comment: This Laboratory routinely performs this test as part of Liver Function Tests.

**ALBUMIN ( ALB )**

Specimen required: **Serum (1 x SST)**

Department: Biochemistry

Reference range: 35-50 g/L

Interpretation: HIGH - Shock, dehydration

LOW - Malnutrition, malabsorption, cirrhosis, heart failure, nephrotic syndrome,  
acute phase response

Comment: This Laboratory routinely performs this test as part of Liver Function Tests.

**ALBUMIN CREATINE RATIO**

Specimen required: **Spot urine**

Department: Biochemistry

Reference range: As stated on report

**ALCOHOL (ETHANOL) – LEGAL**

Specimen required: **Sample is submitted to the Collection Centre in a tamper-proof envelope. DO NOT OPEN!**  
**Full chain of custody must be observed.** Send directly to specimen reception (Attention: Duty Manager). If urgent, refer patient to main laboratory.

Department: Referred test

**Note:** A current (as of Jan 2010) cost of \$270 MUST be paid to Clinipath Pathology by eftpos cheque, money order or credit card at Collection Centre.

**ALCOHOL (ETHANOL) – NON-LEGAL**

Specimen required: **Serum (1 x SST )**

Spot urine samples may be used.

Department: Biochemistry

Note: Clinipath Pathology can perform NON-LEGAL ALCOHOLS ONLY.

See also: DRUGS of ABUSE

**ALDOSTERONE**

Specimen required: **1 x PPT - Must be full tube**  
Department: Referred test  
Note: Please note medications on request form  
Comment: **If this test is requested with RENIN, please refer the patient to the MAIN LABORATORY.**  
When supine and erect levels are requested, samples should be taken following 20 minutes in each position.

**ALKALINE PHOSPHATASE ( ALP )**

Specimen required: **Serum (1 x SST)**  
Department: Biochemistry  
Reference range: 30 - 140 U/L Adult  
36 - 550 U/L Child  
May be higher during rapid bone growth phases.  
Interpretation: HIGH - Bone disease, liver disease (especially obstructive), pregnancy  
Comment: This Laboratory routinely performs this test as part of Liver Function Tests.

**ALKALINE PHOSPHATASE ISOENZYMES**

See below ALKALINE PHOSPHATASE ELECTROPHORESIS

**ALKALINE PHOSPHATASE ELECTROPHORESIS**

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Comment: This test has replaced Alkaline Phosphatase Isoenzymes. A comment is issued indicating the proportions of liver, bone and other (e.g. intestinal) isoforms detected in the serum or plasma.

**ALPHA – 1 ANTITRYPSIN**

Specimen required: **Serum (1 x SST)**  
Department: Biochemistry  
Reference range: 0.9-2.0 g/L  
Interpretation: HIGH - Acute phase response.  
LOW - Congenital Deficiency (Phenotyping and family studies recommended.)

**ALPHA – 1 ANTITRYPSIN GENOTYPE**

Specimen required: **1 x EDTA or Heparin NO GEL**  
Department: Referred test  
Note: **Send whole blood**

**ALPHA - FETO PROTEIN ( AFP )**

Specimen required: **Serum (1 x SST)**  
Department: Biochemistry (For tumour marker AFP only, pregnant AFP must be referred to SCI)  
Reference range: Male and Non-Pregnant Female – < 8 kU/L  
Interpretation: HIGH Non-Pregnant: Hepatic carcinoma, hepatitis, cirrhosis, embryonal carcinoma and yolk sac tumour.  
- Pregnant: Neural tube defects, Twins, Exomphalos, Wrong Dates.

See also: SECOND TRIMESTER SCREENING

Specimen required: **Amniotic Fluid**  
Department: Referred test  
Reference range: These are gestation specific, and are provided on the report. Ranges for 15 – 21 weeks gestation are provided.  
Interpretation: HIGH - Elevated in 85 - 95% of open neural tube defects.

**ALPHA SUB UNIT**

Specimen required: **Serum (1 x SST)**  
Department: Referred test

**ALUMINIUM**

Specimen required: 2 x Trace Element (Royal blue top K<sub>2</sub>EDTA), can be spot urine  
Department: Referred test

**AMIKACIN**

See GENTAMICIN / AMINOGLYCOSIDE MONITORING

**AMINO ACID SCREEN (AA SCREEN)**

Specimen required: **FASTING Serum (1 x SST) - Collect at Main Laboratory ONLY.**  
Department: Referred test  
**Note:** **Specimen must be separated and frozen within the hour.**  
Comment: This is a Referred test. Please check for current COST TO PATIENT. Clinipath Pathology requires postage and handling fee. The patient will receive an invoice for the test. After payment a receipt is issued which can be used to claim some Medicare benefit, but **ONLY** if the request was from a registered Medical Practitioner.

**AMINOGLYCOSIDE MONITORING**

See GENTAMICIN / AMINOGLYCOSIDE MONITORING

**AMINOPHYLLINE**

See THEOPHYLLINE

**AMIODARONE**

Specimen required: **1 x Heparin NO GEL . Collect PRE-DOSE sample (Trough)**  
Department: Referred test  
Reference range: Not reported.  
Levels greater than 3 mg/L (of Amiodarone and metabolite Diethyl Amiodarone) may be associated with an increased incidence of adverse effects.  
Note: Please record time of last dose and collection.

**AMITRIPTYLINE**

Specimen required: **1 x Heparin NO GEL. Collect PRE-DOSE sample (Trough)**  
Department: Referred test  
Reference range: 50 - 200 ug/L (Amitriptyline and metabolite Nortriptyline combined).  
PEAK LEVEL: 4-8 hours after oral administration.  
HALF LIFE: 17-40 hours.  
Comment: If dose changes, please wait two weeks before re-assay.

**AMMONIA**

Specimen required: **Direct patient to main lab as blood must be spun and frozen immediately  
Lithium Heparin, spin and freeze immediately**  
Department: Referred test

**AMOEBIA**

see ENTAMOEBIA HISTOLYTICA

**AMPHETAMINES**

see DRUGS of ABUSE

**AMYLASE**

Specimen required: **Serum (1 x SST)**  
 Department: Biochemistry  
 Reference range: < 100 U/L  
 Interpretation: VERY HIGH - Acute pancreatitis.  
 HIGH - Cholecystitis, perforated peptic ulcer, intestinal obstruction, abdominal trauma, ruptured ectopic pregnancy.

**ANA**

See ANTI NUCLEAR ANTIBODY (ANA)

**ANCA**

See ANTI NEUTROPHIL CYTOPLASMIC ANTIBODY)

**ANDROGENS**

Specimen required: **Serum (1 x SST)**  
 Department: Biochemistry  
 See also: Individual Androgens - TESTOSTERONE, D H E A S, ANDROSTENEDIONE, SEX HORMONE BINDING GLOBULIN

**ANDROSTENEDIONE**

Specimen required: **Serum (1 x SST)**  
 Department: Biochemistry  
 Reference range: Males 2.1-10.8 nmol/L  
 Female 1.0-11.5 nmol/L  
 Interpretation: HIGH - Virilising tumours and congenital adrenal hyperplasia.  
 - Polycystic ovary disease.  
 Note: The specimen should ideally be collected in the 1st half of the menstrual cycle.

**ANTINUCLEAR FACTOR (ANF)**

See Anti nuclear antibody

**ANGIOTENSIN CONVERTING ENZYME ( ACE )**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test  
 Reference range: As stated on report .

**ANION GAP**

Specimen required: **Serum (1 x SST)**  
 Reference range: 10 – 20 mmol/L  
 Comment: This is a calculation performed with routine ELECTROLYTE estimations.

**ANTENATAL BASIC SCREENING TESTS (REPLACES PREGNANCY PATHOLOGY ASSESSMENT)**

Specimen required: **Serum (1 x SST), 1 x EDTA. MSU**  
 Department: Serology / Haematology / Microbiology / Biochemistry  
 Comment: Includes a selection of Medicare items which must be specified e.g.  
 FBC (Full Blood Count)  
 ABO & Rh GROUP. (Blood Group)  
 ANTIBODY SCREEN (Maternal Antibody Screen)  
 RUBELLA IgG ANTIBODIES (Rubella Immunity)  
 HEPATITIS B SURFACE ANTIGEN  
 RPR, TPHA (Syphilis Serology)  
 HCV, HIV, etc  
 MSU for mc&s  
 Additional serology needs to be specified e.g.  
 VARICELLA  
 CMV

TOXOPLASMOSIS  
HERPES SIMPLEX I & II  
HEPATITIS A

### ANTI ACETYLCHOLINE RECEPTOR ANTIBODIES

Specimen required: **Serum (1 x SST)**  
Department: Referred test

### ANTIBODY REGISTRATION & IDENTIFICATION

Specimen required: **2 x Clotted blood (NO GEL SERUM ) and 1 x EDTA**  
Department: Referred test  
Comment: Referred to Red Cross Blood Transfusion Centre.

### ANTIBODY SCREENING ( MATERNAL )

Specimen required: **1 x EDTA**  
Department: Haematology

### ANTIBODIES (NON-MATERNAL)

See FULL ANTIBODIES LIST AT END OF ' A ' SECTION  
Not to be confused with Blood Group Antibodies

### ANTICARDIOLIPIN ANTIBODY IGM & IGG (ACA / ACLA)

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Indications: Anticardiolipin antibodies are a characteristic finding in the anti-phospholipid syndrome, which is sometimes associated with SLE or another autoimmune disease. Typical clinical features include venous and arterial thromboses, recurrent spontaneous abortion and thrombocytopenia.  
Reference range: As stated on report  
Comment: Was previously called Cardiolipin Antibodies

### ANTI CCP

See ANTI CYCLIC CITRULLINATED PEPTIDE

### ANTI CYCLIC CITRULLINATED PEPTIDE

Specimen required: **Serum (1 x SST)**  
Department: Immunology  
Reference range: <5 U/mL  
Comment: Anti cyclic citrullinated peptide (Anti CCP) antibodies are autoantibodies detected in the serum of some patients with rheumatoid arthritis (RA). A combination of Anti CCP and rheumatoid factor has a very high diagnostic specificity (>99%) and is of value in the early diagnosis of RA.

### ANTI DIURETIC HORMONE (ADH OR VASOPRESSIN)

Specimen required: **2x EDTA**  
Department: Referred

### ANTI DNA - ANTI DOUBLE STRANDED DNA ANTIBODIES (DS-DNA)

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Reference range: Negative anti-ds DNA < 6 kIU/L

**ANTI DNASE B TITRE**

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Reference range: As stated on report.  
Positive in 85-90% of patients with rheumatic fever, glomerulonephritis and pyoderma.  
Comment: This is complementary to ANTI STREPTOLYSIN TITRE.  
Not to be confused with double stranded anti DNA.  
It is advisable to choose 2 anti streptococcal Ab tests to improve specificity e.g. ASOT + Anti Dnase B. Antibodies appear 1-2 months after onset of infection. Response is longer lasting than ASOT.  
See also: Streptococcal serology

**ANTI ENDOMYSIAL IGA ANTIBODIES**

TEST NO LONGER PERFORMED. REPLACED BY TISSUE TRANSGLUTAMINASE ANTIBODIES (TTG)

**ANTI ENA - AUTO ANTIBODIES TO EXTRACTABLE NUCLEAR ANTIGENS (ENA)**

Specimen required: **Serum (1 x SST)**  
Department: Immunology  
Comment: The ENA which are tested are: SS-A/Ro, SS-B/La, RNP, Sm, Jo-1 and Scl-70. For other antigens, testing can be discussed with immunology.

**ANTI FACTOR Xa**

Specimen required: **2 x Sodium Citrate tubes.**  
Department: Referred test  
Reference range: As stated on report.

**ANTI FILAGGRIN ANTIBODIES**

TEST NO LONGER PERFORMED. REPLACED BY ANTI CYCLIC CITRULLINATED PEPTIDE

**ANTI GAD (GLUTAMIC ACID DECARBOXYLASE) ANTIBODIES**

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Reference range: As stated on report.

**ANTIGEN DETECTION - DIRECT**

See HSV, FLU, RSV etc

**ANTI GLIADIN ANTIBODIES**

TEST NO LONGER PERFORMED - REPLACED BY TISSUE TRANSGLUTAMINASE ANTIBODIES (TTG)

**ANTI INTRINSIC FACTOR ANTIBODIES**

See INTRINSIC FACTOR ANTIBODIES

**ANTI KERATIN ANTIBODIES**

TEST NO LONGER PERFORMED. REPLACED BY ANTI CYCLIC CITRULLINATED PEPTIDE

**ANTI LIVER/KIDNEY MICROSOMAL ANTIBODIES**

Specimen required: **Serum (1 x SST)**  
Department: Immunology  
See also: AUTOANTIBODIES

**ANTI LYMPHOCYTE ANTIBODIES**

Specimen required: **2 x ACD and 1 x SST**  
Department: Referred

**ANTI MULLERIAN HORMONE**

Specimen required: **1 x SST**  
 Department: Referred

**ANTI MITOCHONDRIAL ANTIBODIES**

Specimen required: **Serum (1 x SST)**  
 Department: Immunology  
 See also: AUTOANTIBODIES

**ANTI NEUTROPHIL CYTOPLASM ANTIBODIES ( ANCA / MPO / PR3 )**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test  
 Reference range: Positive results are expressed with titres and interpretative comments.  
 Comment: Indicated in vasculitis syndromes, especially Wegener's granulomatosis and glomerular nephritis. Also may be positive in some connective tissue disorders, inflammatory bowel disease and autoimmune hepatitis.

**ANTI NUCLEAR ANTIBODIES ( ANA )**

Specimen required: **Serum (1 x SST)**  
 Department: Immunology  
 Results: Positive ANA findings are titrated and reported as the pattern of fluorescence and titre strength.  
 Note: If required Anti ENA and Anti DNA must be requested as separate tests.  
 Comment: Examination by indirect immunofluorescence (ANA)

**ANTI PARIETAL CELL ANTIBODIES**

Specimen required: **Serum (1 x SST)**  
 Department: Immunology  
 See also: AUTOANTIBODIES

**ANTI PLATELET ANTIBODIES**

Specimen required: **Serum (1 x SST) and 2 x Sodium Citrate - DO NOT refrigerate or centrifuge sample**  
 Department: Referred test  
 Reference range: Negative  
 Note: **Collect sample at Main Laboratory only, Monday – Friday ONLY. Must arrive at RPH before 1pm.**

**ANTI SMOOTH MUSCLE ANTIBODIES**

Specimen required: **Serum (1 x SST)**  
 Department: Immunology  
 See also: AUTOANTIBODIES

**ANTI STAPHYLOLYSIN TITRE**

Test no longer available

**ANTI STREPTOLYSIN O TITRE ( ASOT )**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test  
 Reference range: Adults < 200 iu/mL  
 Children up to 12 years < 150 iu/mL  
 Comment: Positive in 85-90% of patients with rheumatic fever and 50-60% with glomerulonephritis  
 Antibodies appear rapidly 1-2 weeks after onset of infection  
 Note: To increase specificity, it is recommended to perform both ASOT and Anti DNASE b  
 See also: ANTI DNASE B TITRE

**ANTI THROMBIN III ( AT3 )**

Specimen required: **1 x Sodium Citrate tube.**  
Department: Haematology  
Reference range: As stated on report.

**APC RESISTANCE**

See ACTIVATED PROTEIN C RESISTANCE

**APOLIPOPROTEINS A1 & B**

Specimen required: **Serum (1 x SST) - Fasting**  
Department: Referred Test  
Reference range: As stated on report.

**APO-E GENOTYPING**

Specimen required: **1 x EDTA**  
Department: Referred Test

**APTT**

See PARTIAL THROMBOPLASTIN TIME

**ARBOVIRUS SEROLOGY**

Specimen required: **Serum (1 x SST)**  
Department: Clinipath Pathology / Referred test  
See also Ross River, Barmah Forest etc  
Note: Includes Ross River Virus, Barmah Forest Virus and Dengue Fever serology (Referred test)  
Other Arboviruses including should be requested separately  
- Murray Valley Encephalitis  
- Japanese Encephalitis

**ARR ALDOSTERONE RENIN RATIO**

See Aldosterone or Renin

**ARSENIC**

Specimen required: **Spot Urine / 24 hr urine (no preservative)**  
Department: Referred test  
Reference range: As stated on report  
Note: The preferred specimen for toxicity and occupational monitoring is the urine method which measures total arsenic. **Patients should avoid seafood 5 days prior to testing** to exclude non toxic organo-arsenic compounds.

**ASCORBIC ACID**

See VITAMIN C

**ASCA (ANTIBODY AGAINST SACCHROMYCES CEREVISIAE)**

Specimen required: **Serum (1 x SST)**  
Department: Referred test  
Comment: May be a marker for inflammatory bowel disease e.g. Crohns  
Also see: Sacchromyces cerevisiae

**ASPARTATE AMINOTRANSFERASE (AST OR SGOT)**

Specimen required: **Serum (1 x SST)**  
 Department: Biochemistry  
 Reference range: Female: < 37 U/L  
 Male: < 45 U/L  
 Interpretation: HIGH – Myocardial infarction, liver disease (especially hepatocellular), myopathy, exercise, haemolytic anaemia.  
 FALSE HIGH – Haemolysis and delayed separation of specimen.

**ASPERGILLIS SEROLOGY**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test

**ASOT**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test  
 See also: ANTI STREPTOLYSIN O TITRE (ASOT)

**ATHLETES FOOT**

See Nail Clippings for Dermatophytes

**ATYPICAL PNEUMONIA SEROLOGY**

Specimen required: **Serum (1 x SST)**  
 Department: Referred test  
 Note: If tests are not specified refer to microbiologist.  
 Tests include: Mycoplasma pneumoniae, Legionella,

**AUSTRALIAN ENCEPHALITIS SEROLOGY**

See Arboviruses "Murray Valley" etc regarded as Urgent Test

**AUTO ANTIBODIES**

Specimen required: **Serum (1 x SST)** (haemolysed or lipaemic serum is unsuitable)  
 Department: Immunology  
 Reference range: Negative  
 Methodology: Qualitative and Quantitative Testing is carried out by Immunofluorescence for the following:  
     Anti Smooth Muscle Antibodies  
     Anti Parietal Cell Antibodies  
     Anti Mitochondrial Antibodies  
     Anti Nuclear Antibodies  
 Each test may be requested separately  
 Note: Anti Liver/Kidney Microsomal Antibodies (LKM), ENA, double stranded DNA must be requested separately  
 Interpretation: As reported  
 Comment: A small percentage of the normal population produce positive results in low titre. Any low positive patients should be retested in approximately one (1) month as some drugs and illnesses can give a positive result.

**ANTIBODY TESTS**

Specimen required: Generally, all tests beginning with **Auto / or Anti** require **Serum (1 x SST)** with the exception of those listed at the bottom of the page

Anti Acetylcholine Receptor Abs – AchR  
 Anti Basement Membrane Zone Abs – BMZ – see Skin  
 Anti Beta-2-Glycoprotein I Abs  
 Anti Campylobacter jejuni - Guillain-Barré  
 Anti AntiCardiolipin Abs – ACLA or ACA  
 Anti Cyclic Citrullinated Peptide Abs-CCP  
 Anti DNA Abs – DNA or DS-DNA

Anti Dnase B – see Streptococcal serology  
 Anti Endomysial Abs – EMA (see TTG)  
 Anti Extractable Nuclear Antigens – ENA inc. SSA(Ro), SSB(La), RNP, Sm, Jo-1, Scl-70.  
*Anti Filaggrin Abs – discontinued*  
 Anti Ganglioside Abs – GM1  
 Anti Gliadin Abs  
 Anti Glomerular Basement Membrane - GMB  
 Anti Glutamic Acid Decarboxylase – GAD  
 Anti Gluten Abs - see TTG  
 Anti Intrinsic Factor Abs  
 Anti Islet Cell Abs  
*Anti Keratin Abs – discontinued*  
*Anti Microsomal Abs – replaced by TPO Abs*  
 Anti Mitochondrial Abs  
 Anti Musk Abs  
 Anti Myeloperoxidase Abs - MPO  
 Anti Myocardial Abs  
 Anti Neuronal Nuclear Abs – see Purkinje Cell Abs  
 Anti Neutrophil Cytoplasmic Abs – ANCA  
 Anti Nerve Abs  
 Anti Nuclear Abs – ANA  
 Anti Nuclear Factor – ANF – see ANA  
 Anti Ovarian Abs  
 Anti Parietal Cell Abs – APC  
 Anti Phospholipid Abs – see Cardiolipin Abs  
 Anti Proteinase 3 – PR3  
 Anti Purkinje Cell Abs –Hu or Ri or Yo  
 Anti Reticulin Abs  
 Anti Ribosomal Abs  
 Anti Saccaroyces cerevisiae  
 Anti Skin Abs  
 Anti Smooth Muscle Abs - SMA  
 Anti Staphylolysin Abs  
 Anti Streptolysin O Abs – ASOT  
 Anti Thyroid Abs – TPO Abs & TG Abs  
 Anti Thyroid Peroxidase Abs – TPO Abs  
 Anti Thyroglobulin Abs – TG Abs  
 Anti Tissue Transglutaminase Abs (TTG)  
 Anti Trypsin – see Alpha 1 Anti Trypsin  
 Anti TSH Receptor Abs

**EXCEPT FOR THE FOLLOWING ANTIBODIES REQUIRING DIFFERENT SAMPLE TYPES:**

Anti Factor Xa Activity	Sample Required: <b>Citrate</b>
Anti Lymphocyte Antibodies	Sample Required: <b>Serum NO GEL (whole sample)</b>
Anti Platelet Antibodies	Sample Required: <b>Citrate x 2, &amp; Serum NO GEL</b>
Anti Sperm Antibodies -ASAB	Sample Required: <b>Can be Serum (1 x SST) OR Semen</b>
Anti Thrombin III - ATIII	Sample Required: <b>Citrate</b>
Maternal Antibodies	Sample Required: <b>EDTA x1</b>