

D**DAT**

SEE COOMBS TEST

D - DIMERS

Specimen required: **1 x Sodium citrate or 1 x EDTA.** Attach Process immediately sticker
Department: Haematology
Reference range: Negative
Interpretation: May be positive in DVT, PE and DIC

DENGUE FEVER SEROLOGY

Specimen required: **Serum (1 x SST)**
Department: Referred test
Results: Reported as Detected / Not detected with appropriate interpretive comments.
See also ARBOVIRUS Screen

DEOXYPYRIDINOLINE

TEST SUPERCEDED BY N Telo peptide (NTX)

DEXAMETHASONE SUPPRESSION TEST

Dose given: 1 mg dexamethasone is given orally at bedtime (11 pm).
Contact the Laboratory to arrange for the drug dose.
Specimen required: A **serum (1 x SST)** cortisol sample is taken next morning at 8 - 9 am. Must be taken at this time with patient rested. Please note all medications on the request form.
Department: Biochemistry
Reference range: As stated on report
Interpretation: Normal suppression response excludes Cushing's syndrome.

DHEA-S (DEHYDROEPIANDROSTERONE SULPHATE)

Specimen required: **Serum (1 x SST)**
Department: Biochemistry
Reference range: As stated on report.
Interpretation: HIGH - Polycystic ovary syndrome, adrenal hyperplasia / tumour.

DIELDRIN

Specimen required: **1 x Heparin NO GEL**
Department: Referred test
Reference range: As stated on report.

DIFFERENTIAL LEUCOCYTE COUNT

See FULL BLOOD EXAMINATION (FBC)

DIGOXIN (DIG)

Specimen required: **Serum (1 x SST) Specimen should be collected at least eight (8) but preferably more than 12 hours after last dose. Please note down time of last dose and time of collection.**

Department: Biochemistry

Results: Therapeutic Range: 0.5 – 0.8 ug/L
Peak Level: Steady state peak 1 - 5 hours after oral administration; however serum levels may spike 60 - 90 minutes after dose.
Half Life: 20 - 50 hours.

Comment: 1. Quinidine potentiates the effects of Digoxin.
2. Digoxin is excreted unchanged via the kidney; hence rate of excretion is related to glomerular filtration rate.
3. Toxicity is exacerbated by low potassium.

DI-HYDROXY TESTOSTERONE (DHT)

Specimen required: **1 X SST (SERUM)**

Department: Referred test

Comment: Spin and freeze serum ASAP

DILANTIN

See PHENYTOIN

DIRECT ANTIGLOBULIN TEST (DAT)

See COOMBS TEST

DIURETIC SCREEN

Specimen required: **Spot Urine**

Department: Referred test

Classes tested: Phenylphalene, Coloxyl, Rheine, Bisacodyl, Danthral.

DNA ANTIBODIES (DOUBLE STRANDED DNA ANTIBODIES)

See ANTI DNA ANTIBODIES

Note: Not to be confused with anti DNAase B, an anti Streptococcal Ab usually tested with ASOT.

DNA PATERNITY TESTING

Specimen Required: **Samples will be collected by appointment only at Clinipath Pathology Main Laboratory in West Perth.**

Department: Referred test

Note: Please phone Clinic Nurse in Charge on 9476 5222 for all information and appointments.

DOTHIEPIN (PROTHIADIN)

Specimen required: **1 x Heparin no gel. Collect PRE-DOSE sample (Trough).**

Department: Referred

Therapeutic Range: As stated on report

Interpretation: Tricyclic Antidepressant.

DOWNS SYNDROME

See FIRST TRIMESTER SCREENING

DOXEPIN

Specimen required: **Serum (1 x SST). Collect PRE-DOSE sample (Trough).**

Department: Referred

Therapeutic Range: As stated on report

Interpretation: Tricyclic antidepressant.

DRUGS OF ABUSE / ADDICTION, DRUG SCREEN

Specimen required: **Spot Urine. If urgent refer patient to Main Laboratory**

Department: Biochemistry

Note: Please give adequate history as to type of suspected abuse, e.g. routine screen, pre-employment, attempted overdose etc, times of overdose if known. We routinely assay urine alcohol, amphetamines, cannabinoids, cocaine metabolite, opiates, Benzodiazepines, and methadone.

Please list ANY prescribed drugs and over-the-counter medications taken in the previous few days.

CHAIN OF CUSTODY FORM SHOULD BE FILLED OUT FOR ALL DRUG SCREEN SAMPLES COLLECTED.

ALCOHOL

Cutoff Level 40.0 mg/dL

Detectable for: 2 - 14 hours post intake

AMPHETAMINES

Cutoff Level 300 ug/L

Detectable for: 48 - 72 hours post intake

CANNABINOIDS (THC)

Cutoff Level 50 ug/L

Detectable for: Moderate smoker (4 times a week) 15 days post intake
Heavy smoker (smoking daily) 30 days post intake
Chronic smokers - may be up to 2 months post intake

COCAINE METABOLITE

Cutoff Level 300 ug/L

Detectable for: 2 - 4 days post intake

OPIATES

Cutoff Level 300 ug/L

Detectable for: 2 - 3 days post intake

BENZODIAZEPINES

Cutoff Level 200 ug/L

Detectable for: 3 days post intake if therapeutic dose ingested
Up to 4 - 6 weeks after extended dosage

METHADONE

Cutoff Level 100 ug/L as EDDP metabolite

Detectable for: 3 days post intake

Note: Interpretation of retention time must take into account, variability of urine specimens, drug metabolism and half-life, patient's physical condition, fluid intake, and method and frequency of ingestion. The above detection times serve as a guideline only.

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