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MAGNESIUM (Mg)

Specimen required: **Serum (1 x SST)**
 Department: Biochemistry
 Reference Range: 0.65 - 1.10 mmol/L
 Interpretation: HIGH - Renal failure, hyperalimentation.
 LOW - Decreased intake, extra renal loss (e.g. diarrhoea), renal loss (e.g. diuretics, hyperaldosteronism), and cyclosporin therapy.

MALARIAL PARASITES

Specimen required: **1 x EDTA blood. Mark as Urgent**
Thick and thin films recommended over 12-24 hours.
 Department: Haematology

MALARIA PCR

Specimen required: **1 x EDTA**
 Department: Referred test
 Note: May be requested for cryptic cases of malaria

MANGANESE (Mn) - SERUM

Specimen required: **2 x Trace Element (Royal Blue Top K₂EDTA) dedicated tube**
 Department: Referred test
 Reference Range: As stated on report

MANGANESE (Mn) – WHOLE BLOOD

Specimen required: **2 x Trace Element (Royal Blue Top K₂EDTA) dedicated tube**
 Department: Referred test
 Reference Range: As stated on report

MANNANOSE BINDING LECTIN (MBL)

Specimen required: **1 x small SST, 1x EDTA**
 Department: Referred test

MANTOUX TESTING (TUBERCULIN SKIN TEST)

Specimen required: **Tuberculin skin test** : Skin reaction read 48-72 hours after inoculation with Tuberculin antigen. Testing is only performed at the main laboratory. Patients should ring for an appointment and need to be aware that they will be inoculated on the first visit and then have to return to the Main Laboratory 48-72 hrs later to have the test read. Testing is performed according to the following schedule
 Inoculation on Monday tests read, Wednesday
 Inoculation on Wednesday tests read Friday
 Inoculation on Friday tests read Monday .
 Comment: Quantiferon (whole blood Interferon Gamma Assay) available and may be more suitable for some patients.

MAST CELL TRYPTASE

Specimen required: **Serum (1 x SST) attach Process immediately sticker**
 Department: Referred test
 Note: Specimen must be frozen upon receipt at Laboratory

MATERNAL SERUM SCREEN (MSS)

Replaced by FIRST and SECOND TRIMESTER SCREENING

MBA20 (MULTIPLE BIOCHEMICAL ANALYSIS – 20 TESTS)

Specimen required: **1 x Serum (SST) AND 1 x Glucose Tube (Oxalate)**
Patient should be FASTING unless known Diabetic.

Department: Biochemistry

Note: This request is NOT available for Medicare requests. This test combination is only available for insurance or employment medicals.

MC&S (MICRO CULTURE & SENSITIVITY)

See SWABS

MEASLES PCR

Specimen required: **Dry Nasal and Throat swabs +/- Urine for PCR**

Department: Referred test

MEASLES VIRUS SEROLOGY IGG & IGM

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

Department: Serology

Results: Reported as Detected / Not Detected with appropriate interpretive comment.

Indications: Characterised by rash and inflammation of the conjunctiva, fever.
Consider also Parvo B19, Rubella, arboviruses and rickettsiae.

Comment: **Treat as urgent if recent exposure is suspected.**

Note: Outbreaks can occur with imported measles. Notify by telephone to Public Health Unit if IgM+.

MEDITERANEAN FEVER (FAMILIAL) PCR

Specimen required: **1 x EDTA**

Department: Referred test

MELANIN

Specimen required: **Spot Urine – Protect sample from light**

Department: Referred test

MELATONIN

Specimen required: **Salivary 1ml**

Department: Referred test

MENINGITIS

Specimen required: **CSF for bacterial culture and/or viral PCR tests**

Department: Microbiology

Note: **Test is Urgent**

See also: NEISSERIA MENINGITIS

MERCURY (Hg)

Specimen required: **Spot Urine** - Testing for exposure to **inorganic** or unspecified Hg
2 x Trace Element (Royal Blue Top K₂EDTA) dedicated tube - Testing for exposure to **organic** Hg

Department: Referred test

Reference Range: As reported

MESOMARK

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

Department: Referred test

Note: This is a Mesothelioma test and is non-rebatable test, please contact Laboratory for current cost to patient.

METABOLIC BONE STUDY - FASTING

Specimen collection: **Spot urine**
FASTING 1 x small SST for ionised calcium and PTH place in fridge (PTH is heat labile)
2 x large SST for the other biochemistry.

Note: **INSTRUCTIONS TO PATIENT:**

- 1) Patient should fast from 12 midnight on the night prior to the test (water is permitted).
- 2) On the morning of the test the patient should empty their bladder on rising and drink two glasses of water.
- 3) DO NOT eat or smoke. Before leaving home the patient should again empty their bladder if required.
- 4) DO NOT take any CALCIUM medication but take all other normal medications, unless instructed not to by their Medical Practitioner.

Comment: Tests Performed: **Urine:** creatinine, calcium, phosphate and n-Telopeptide
Blood: ALP, phosphate, creatinine, albumin, calcium, vitamin D, PTH and ionised calcium.

METABOLIC SCREEN (PAEDIATRIC URINE)

Specimen required: **Spot Urine** – 5 to 10 mls required, No preservative
FREEZE SAMPLE as soon as possible after collection.
 Mainly done on children to screen for inborn metabolic error.

Department: Referred test

METADRENALINE PLASMA FREE

See METANEPHINES below

METANEPHRINES - PLASMA

Specimen required: **2 x HNG (pre-chilled) collect onto a cup of ice, spin chilled, separate plasma and freeze**
FREEZE SAMPLE as soon as possible after collection.

Department: Referred test

Note: Patient should fast overnight and rest for 20min before collection.
This test can only be collected at the main laboratory.

METHADONE

See DRUGS OF ABUSE

METHAEMOGLOBIN

Specimen required: **1 x Heparin NO Gel - Please send patient to Clinipath Pathology Main Laboratory for sample collection.**
Sample must be dispatched immediately after collection, to be tested within the hour.

Department: Referred test

Reference Range: As reported.

METHYLENE TETROHYDROFOLATE REDUCTASE GENE TEST PCR

Specimen Required: **2 x EDTA dedicated tubes**

Department: Referred test

METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS (MRSA) SCREEN

Specimen required: (i) Nasal swabs from both anterior nares.
 (ii) Throat swab.
 (iii) Hand swabs from interdigital spaces and wrists of both hands.
 (iv) Swab of any lesions, if present
 (v) Other variations including Axilla and groin to be included if indicated

Department: Microbiology

Comment: At least 48 hours is required before a report can be issued.

Note: In house results can make reasonable prediction of the strain, either transmissible variants requiring additional infection controls, and strains with lower transmissibility. (WAMRSA)
 Molecular sub-typing confirmation takes 7-14 days.

METHYL MALONIC ACID (MMA)

Specimen required: For children See METABOLIC SCREEN (PEDIATRIC URINE)
For adults collect 1 x PPT
Department: Referred

MICROALBUMIN (MALB)

Specimen required: **Urine. Spot or 24 hour collection (12 hour collection is sometimes requested)**
Department: Biochemistry
Reference Range: Spot Urine : Normalbuminuria < 20 mg/L
Microalbuminuria 20 - 200 mg/L
Persistent proteinuria > 200 mg/L
24 Hour Urine : Normalbuminuria < 30 mg/day
Microalbuminuria 30 - 300 mg/day
Persistent proteinuria > 300 mg/day
Interpretation: Useful as an indicator of incipient (and potentially reversible) diabetic nephropathy.
Note: 12 hour collection is called 'Timed Overnight Microalbumin'. Collect between 8pm & 8am in a 24 hour container

MINIMAL INHIBITORY CONCENTRATION

Specimen required: **Contact Laboratory for specific details if testing required**
Department: Microbiology
Comment: Specialised antibiotic susceptibility tests performed as per microbiological protocols.

MOLECULAR STUDIES

See UNDER FOLLOWING HEADINGS

COAGULATION: see THROMBOPHILIA SCREENING
HAEMOCHROMATOSIS: see HAEMOCHROMATOSIS
HAEMATOLOGY: See Gene Re-arrangement Studies; BCR-ABL PCR and Haemophilia Gene Studies
GASTROENTEROLOGY: see CYSTIC FIBROSIS GENE STUDIES
NEUROLOGY: Consult with pathologist

MOLYBDENUM

Specimen required: **2 x Trace Element (Royal Blue Top K₂EDTA) dedicated tube**
Department: Referred test

MONOSPOT

See IM TEST

MPO

See ANTI NEUTROPHIL CYTOPLASMIC ANTIBODY

MRSA (SWABS)

See METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS (MRSA) SCREEN

MTHFR GENE TEST

See Methylene Tetrahydrofolate Reductase Gene Test Pcr

MULTIPLE BIOCHEMICAL ANALYSIS

See MBA20

MUMPS PCR

Specimen required: **Dry Mouth swab for PCR**
Department: Referred test

MUMPS VIRUS ANTIBODY IGG & IGM

Specimen required: **Serum (1 x SST)**
Department: Serology
Results: Reported as Detected / Not Detected with appropriate interpretive comment.
Indications: Bilateral or unilateral parotitis. Extra salivary symptoms may include meningitis, encephalitis, epididymoorchitis, oophoritis, polyarthritis and pancreatitis.

MURRAY VALLEY ENCEPHALITIS SEROLOGY (MVE)

Specimen required: **Serum (1 x SST) Urgent Serology Test**
Murray Valley Encephalitis is caused by an ARBOVIRUS
Department: Referred test

MYOBACTERIUM

See Tuberculosis

MYCOPLASMA PCR

Specimen required: **First void urine or SWAB (Plain Dry Swabs)**
Department: Referred test
Note: This test is Mycoplasma genus specific and also detects Ureaplasma.

MYCOPLASMA PCR FOR CHRONIC FATIGUE

Specimen Required: **Mycoplasma PCR will only be performed on respiratory specimens.**
Department: Referred test
Note: Contact Laboratory for further information regarding specimen requirements.
See also: Mycoplasma Pneumoniae below

MYCOPLASMA PNEUMONIAE SEROLOGY

Specimen required: **Serum (1 x SST)**
Symptoms: Atypical pneumonia.
Department: Referred test
Results: Titre with appropriate interpretive comment.

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