

O

OBSTETRIC SCREEN

See FIRST TRIMESTER SCREEN and SECOND TRIMESTER SCREEN

OCCULT BLOOD

See FAECES: OCCULT BLOOD

OESTRIOL UNCONJUGATED (UE3)

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

Department: Biochemistry

Comment: This test of foetoplacental function is detectable only in the third trimester of pregnancy and has virtually been displaced by ultrasound testing.

OESTRADIOL (E2)

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

Department: Biochemistry

Reference range: Female:
Follicular 77 - 920 pmol/L
Mid Cycle 139 - 2381 pmol/L
Luteal 77 - 1145 pmol/L
Menopausal < 100 pmol/L
Male: 40 - 160 pmol/L

See also: Salivary Hormones

OLANZAPINE

Specimen required: **1 x Heparin NO GEL**

Department: Referred test

Therapeutic Range: Trough levels. 10 ug/L

OPIATES

See DRUGS of ABUSE

ORF VIRUS (PCR)

Specimen required: **Smear or Dry Swab (no transport media)**

Department: Referred test

ORGANOPHOSPHATES/CHLORIDES

See CHOLINESTERASE

OSMOLALITY (PLASMA)

Specimen required: **1 x Li Heparin**

Department: Biochemistry

Reference range: 275 - 295 mOsmol/kg up to 60 years
280 - 301 mOsmol/kg >60 years

Comment: In water and electrolyte disturbances, osmolality measurements can be helpful if plasma and spot urine samples are taken at the same time.

OSMOLALITY (URINE)

Specimen required: Spot **Urine**

Department: Referred test

Reference range: 50 - 1200 mOsmol/kg (Depending upon fluid intake)

Comment: Usually requested together with plasma osmolality.

OSMOTIC FRAGILITY

Specimen required: **1 x Heparin NO GEL** - Dispatch samples immediately after collection, they must arrive at RPH within 1 hour of collection AND before 1200 Monday-Friday.

Department: Referred test

Note: **Please send patient to Clinipath Pathology Main Laboratory.**

OSTEOCALCIN

Specimen required: **Serum (1 x SST) – Patient must be bled at Main Laboratory. Specimen must be frozen within 30 minutes of collection.**

Department: Referred test

Reference Interval: As stated on report

Comment: Marker of bone deposition.

Interpretation: HIGH - High turnover osteoporosis, Paget's disease, primary hyperparathyroidism and metastatic bone disease.

OVA, CYSTS & PARASITES (OCP)

See FAECES

OVARIAN TUMOUR MARKERS

See CA 125

OXALATE (URINE)

Specimen required: **Urine (24 hour collection).**

Preservative: 10 mLs of 50% HCl.

Department: Referred test

Reference range: As stated on report

Interpretation: HIGH - Calcium oxalate renal stone formation, congenital.

Note:

- (i) Transient increase follows ingestion of certain fruits and vegetables, e.g. rhubarb, strawberries, spinach, tomatoes, sorrel, etc.
- (ii) Elevated urinary oxalate occurs in a proportion of normal subjects on high Vitamin C intake.
