

Laboratory Reflex Testing

(As approved by the Elliot Hospital Medical Executive Committee)

TEST / PROTOCOL Name & Associated Lab Order Code	REFLEX TEST (<i>When initial test is positive</i>)
ANA Screen	ANA Titer
Anti-Streptolysin O (ASO) Screen	ASO Titer
Celiac Cascade	IGA – TTG (If IGA is <39 or >351) continue per cascade
CPK	CPK- MB (If CPK >100)
Fetal Blood Screen	Kliehauer-Betke
Group B Strep PCR (negative)	Culture
Hepatitis B Surface Antigen (HBSAG)	HBSAG Confirmation by Neutralization Assay
Hepatitis C Virus (equivocal)	HCVQ confirmation
HIV 1/2	HIV 1 Confirmation by Western Blot
LDL Cholesterol (when Triglyceride >400)	Direct LDL
Lyme Antibody	IgG and IgM
Rapid Group B Strep (negative)	Culture
Rapid Plasmin Reagin (RPR)	Titer and Syphilis Antibody
Strep Pneumoniae Antigen on CSF (pos or neg)	Culture
Thyroid Cascade	TSH – FT4 (If TSH <0.550 or >4.78) continue per cascade
Thyroid Stimulating Hormone (TSH)	FT4 (If <0.550 or >4.78)
Type & Screen (OBS panel) (Outpatients)	Antibody identification
Type & Screen (Surgical patients)	Antibody Identification & 1-unit crossmatch compatible blood
Urinalysis (UA)	Microscopic done if Blood, Protein, Leukocyte Esterase or Nitrite is positive
Urinalysis, Reflex to Microscopy and Culture (UAUCC)	Microscopic done as above and Culture & Sensitivities if Leukocyte Esterase, Nitrite, White Blood Cells (>Occasional), or Bacteria are positive.
CBC with Differential (if blood microorganisms are suspected)	Blood Parasite Smear