

Pathology Requesting for Adult Patients in the Emergency Department - Suggested Tests for Common Conditions

Presentation	Aseptic collection		Depending on instrument type and chemistry methodology different hospitals will have a local protocol to follow. The following gel tube colours are a guide only CHECK WITH YOUR LOCAL LABORATORY											K EDTA or	Blood Bank EDTA	Syringe BG	Only send M/C/S if clinical concern UTI	Other Investigations
	BC ¹	Coags ²	UEG ³	LFT	Ca/Phos/Alb	Urate	Troponin	Lipase	hCG ⁴ (female)	CRP / PCT	CK	Drug level	FBC	Group/Antibody screen ⁵	Blood Gas ⁶	Dipstick Urinalysis		
Abdominal pain severe (upper/epigastric)				Plus LDH													Lactate	
Abdominal pain severe (lower)														Female			Lactate	
Back pain atraumatic (requiring admission)																		
Cellulitis (requiring admission)																	wound M/C/S if purulent lesions	
Chest pain - suspected Ischaemic Heart Disease																		
Chest pain - suspected Pulmonary Embolism		Consider d-dimer																
Confusion/Syncope																	CSF examination / investigations	
Cerebrovascular Accident																		
Diabetic Ketoacidosis																		
Fever for Investigation (include returned travellers)																	Infection investigations relevant to history (eg malaria, dengue)	
Fractures Neck Of Femur/Major Long Bone																		
Fractures Minor for Theatre >65yo																		
Gastrointestinal Bleed																		
Jaundice For Investigation																	viral hepatitis investigations (serology and/or NAAT)	
Febrile Neutropenia																Plus M/C/S		
Overdose (significant)																	Paracetamol level	
Per Vaginal Bleed - 1st trimester																	STI investigations (eg chlamydia & gonorrhoea NAAT)	
Pneumonia (requiring admission)																	Sputum M/C/S, multiplex respiratory molecular testing	
Pyelonephritis (not simple cystitis)																Plus M/C/S		
Renal Colic (1st episode)																		
Renal Disease																		
Seizures (1st episode)			Plus bedside glucose		Plus Mg												CSF examination / investigations	
Seizures (recurrent)																		
Septic Joint - suspected																	Joint Fluid M/C/S	
Sepsis																Plus M/C/S	Lactate + relevant cultures	
Snake Bite ⁷				consider LDH									Plus film					
Short Of Breath - Asthma (requiring admission)																	Multiplex respiratory molecular testing	
Short Of Breath - suspected Acute Pulmonary Oedema																		
Short of Breath - Chronic Obstructive Pulmonary Disease																	Sputum M/C/S	
Trauma (Major)																		

Key	This form is a guide for clinical staff initiating pathology tests. Clinical judgment should be exercised. Some patients may not need any tests or have had them performed recently. If in doubt consult with senior ED doctor. Some tests may not be immediately available locally.	
Perform test	1. BC = Blood Cultures. History of immunocompromise, fever and/or clinical syndrome suggesting sepsis is a more important indicator to collect BC than whether the patient is febrile at the time of examination/collection.	
Not Generally Indicated	2. Coags = Standard Coagulation Panel (includes INR/PT, APTT, fibrinogen).	
Consider or Ask Supervisor	3. UEG = Urea, creatinine, electrolytes and glucose. 4. hCG is usually required prior to drug treatment and radiological investigations in women of child bearing age 5. There are very specific requirements relating to requests and specimen collection/labelling for transfusion. Please ensure requests and specimens fully comply with local requirements 6. Blood gas: Venous blood gas is often acceptable. Arterial sample required for assessment of oxygen status. 7. Snake bite: FBC + film, INR +aPTT, UEG, CK, consider fibrinogen + d-Dimer (false negatives occur with point of care devices), consider LDH	



From 'Guideline on Pathology Testing in the Emergency Department' developed by the Australasian College for Emergency Medicine (ACEM) and the Royal College of Pathologists of Australasia (RCPA) 2018

Please refer to full guideline document for further information