



The humble faeces specimen...

Most patients feel uncomfortable and embarrassed about collecting a faeces sample and presenting it to a collection centre. Collecting one specimen is usually enough of an ordeal for any patient, so getting the right specimen to the lab on time and in the right condition is the best way to avoid unnecessary repeat collections.

We have developed the following guide for the more common requests. The SNP on-line Test Code Manual has detailed information for faeces tests and all other tests available at SNP. Visit the website www.snp.com.au and login to the secure "for Doctors" centre. If you need a login and password, contact the SNP Doctor IT team on 1800 100 769.

Infectious agent or test	Request	Collection Transport requirements	Container	Medicare criteria for rebate*
Bacterial culture for infectious agents such as • <i>Campylobacter</i> • <i>Salmonella</i> • <i>Shigella</i> • <i>Aeromonas</i> • <i>Yersinia</i>	M/C/S Indicate in clinical notes if patient has travelled or eaten seafood	Room temperature	Brown top jar 	One M/C/S in 7 day period
Parasite examination for infectious agents such as • <i>Cryptosporidium</i> • <i>Giardia</i> • <i>Strongyloides</i>	Faeces microscopy or OCP Indicate in clinical notes if patient has travelled or has eosinophilia	Room temperature	Brown top jar  Item No. 04163	Two OCP tests in 7 day period
Parasite examination for <i>Dientamoeba fragilis</i>	Faeces microscopy or OCP including <i>D. fragilis</i>	Room temperature	SAF fixative and brown top jar  Item No. 05457	Two OCP tests in 7 day period
<i>Clostridium difficile</i> Toxin	<i>Clostridium difficile</i> toxin PCR	Room temperature	Brown top jar	Rebate available
Faeces for occult blood single or multiple tests	FOB or FOB x 3	Patients must inoculate a tube directly from faeces specimen immediately after collection. If more than one test is required, use one tube per specimen collected on separate days. Room temperature.	Quicktest faeces collection tube  Item No. 05135	Rebate available if clinically indicated
pH and/or reducing substances	Faeces pH and/or reducing substances	Freeze (-20°C, transport in dry ice)	Brown top jar	Rebate available
Norovirus or Norwalk virus	Faeces Norovirus or Norwalk virus	Room temperature	Brown top jar	Rebate available
Rotavirus/Adenovirus	Faeces for Rotavirus/Adenovirus	Room temperature	Brown top jar	Rebate available

* Rebates are available for eligible patients/referrer/tests as per MBS. Accounts for non-eligible tests will be forwarded to the patient for full payment.

Units	Range
pmol/L	(11.0-19.0)
pmol/L	(3.5-6.3)
μU/L	(0.10-2.60)

What will reference intervals refinement mean to you?

- Reference intervals (previously termed normal ranges) should be specific to a patient's age and sex and to the method used by a laboratory.
- Sullivan Nicolaides Pathology, part of the Sonic Healthcare network across Australia, has derived optimal reference intervals for all major biochemistry tests.
- We'll keep you updated via *Syzygy* about the planned implementation date for the changeover to the new reference intervals.

Using the 'Bhattacharya technique' analytical tool we have extracted and analysed an underlying 'normal' population from our extensive laboratory patient results database. This very large amount of data meant that age, sex and pregnancy status could be taken into account, rather than using more generalised intervals. The advantage to doctors will be that Sonic Laboratories around Australia will be using the same reference intervals, reducing problems of interpretation and inconsistency in patient management.

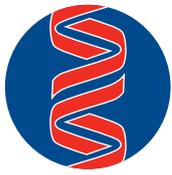
The new reference intervals give doctors a greater degree of accuracy in the interpretation of each patient's results, as they will be more relevant to each individual patient sub-group. These reference intervals have also been further validated by comparison with other published reference values, and subjected to rigorous scrutiny by the professionals involved before being accepted.

The use of common reference intervals, where possible, is also recommended in the NATA ISO15189 field application document.

These reference intervals will be implemented over the next twelve months on the majority of the more commonly requested biochemical analytes, but will not include glucose and lipid studies where the decision limits have already been set by an expert clinical group.



**Sullivan
Nicolaides**
PATHOLOGY



Doctor's challenge

Q.1 How is Giardiasis spread?

Q.2 How can you be sure *Blastocystis hominis* is the cause of symptoms?

Hint: Investigative Protocols 600 and 602 www.snp.com.au, quicklink to investigative protocols or the Pathology Handbook for Doctors investigative protocol tab.

Answers in the next issue of *Syzygy*.

Answers to Doctor's challenge

Q1. How is pertussis diagnosed?

The organism can be detected in the mucus in the nose. Ideally the specimen is collected in a swab or small tube passed into the nasal passages, or a throat swab. Another method measures the amount of antibodies to pertussis in blood. These develop between 2 and 6 weeks after the infection begins, and it may be necessary to collect another sample later in the illness to confirm the diagnosis.

Q2. What are the transportation requirements for specimens for *Bordetella pertussis* culture?

Charcoal medium.

Q3. What groups of people should be considered for chemoprophylaxis?

Prophylaxis (same as treatment course) should be considered for close contacts of the patient (people living in the same household, working, or attending the same institution, e.g. maternity hospital ward, newborn nursery, child care centre). Chemoprophylaxis is only useful if commenced within 21 days of onset of symptoms, or within 14 days of onset of paroxysmal cough in the patient. Included in this definition are:

- all household members when the household includes any child < 24 months of age who has received < 3 doses of vaccine
- any woman in the last month of pregnancy
- children and adults in the same care group if the patient attended child care > 1 hour while infectious and the centre has children < 24 months of age who have received < 3 doses of vaccine
- healthcare staff working in a maternity hospital or newborn nursery where the patient worked in a maternity or newborn nursery for > 1 hour while infectious, then all babies in that ward should receive antibiotics.

Sullivan Nicolaides Pathology is now able to offer the Calcium Phosphate Product calculation as an additional Biochemistry report.

There is evidence that the Calcium Phosphate Product (simply serum corrected calcium multiplied by serum phosphate) is a useful calculation for assessing risk of arterial calcification (calciphylaxis) in patients on dialysis. Accordingly there is evidence of an association between an increasing serum Calcium Phosphate product and increasing cardiovascular mortality. In dialysis patients, a sustained increase of the Calcium Phosphate product above 4 increases the risk of arterial calcification dramatically.

We are now pleased to be able to offer this parameter. If you are interested in having this parameter automatically added for patients or an associated renal unit, please contact your territory manager on 1300 SNPATH (1300 767 284).

References: The CARI Guidelines, Calcium x phosphate product, October 2005

Let us know your patient is a concessional patient.

When you collect specimens in your office, please help us to identify patients who are eligible for bulk billing* based on their concessional status. We now have check boxes on all our request forms.

Simply tick the appropriate box, record the patient's Medicare number and obtain their signature in the assignment box.

*Pensioners, Health Care Card holders and Vet Affairs patients are offered bulk billing for pathology services that are eligible for Medicare rebate. Patients will receive an account for all non-eligible services.

Unravelling Pathology Accounts... Why not let us answer the questions

At SNP our people in the Patient Service Centre are ready to answer patient enquiries. They are trained to interpret the complex pathology items in the Medicare Schedule to help patients understand their accounts.

So the next time a patient asks you for your assistance in understanding their account, simply give them the PSC telephone number 1300 732 030.

The Patient Service Centre is open from Monday to Friday 7am – 7pm.



Collection Centre updates

Brisbane – relocation (Feb 09)

Mater Medical Centre
Level 7 Suite 36, 293 Vulture Street
South Brisbane
Ph (07) 3844 0353

Regional – new hours

Maroochydore
Saltwater, 1st Avenue
Mon – Fri 6 am – 5 pm
Ph (07) 5459 1400

Opening Soon

Walloon
Teneriffe

Birtinya

Suite 6A, 5 Innovation Parkway
Mon – Fri 7 am – 12 noon
Ph (07) 5437 6122



Our Robina collection centre at the corner of Robina Parkway and Cheltenham Drive, Robina, is now a procedural centre. Please call (07) 5593 1155 for an appointment.

Plan now for Warfarin Care Enrolments before Easter 2009

To ensure the safe and complete enrolment of patients into our Warfarin Care Program, we will accept new enrolment applications until 4 pm on Wednesday 1st April 2009. Enrolments will re-open Tuesday 14th April 2009 at 9 am.

For more information about Warfarin Care, please contact our Warfarin Care team on (07) 3377 8578, or visit the 'for doctors' area at: www.snp.com.au.

