

**LABORATORY TEST REQUISITION**

**Non-Alcoholic Fatty Liver Disease – NAFLD**

**PRIMARY CARE MANAGEMENT PATHWAY**

Clinical Laboratories  
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The requisition should be used only for tests outlined under “Baseline Investigations” on the NAFLD primary care management pathway as outlined below. The pathway document can be found at:

<https://kingstonhsc.ca/refer/gastroenterology>

PHYSICIAN
Name: _____
OHIP/CPSO No: _____
Clinic Name: _____
Address: _____
Phone: _____
Fax: _____
Authorizing Signature: _____
Cc Report to: _____
<b>Attestation:</b> Referring physician attests that the requisition is being used <i>only for a patient that is on the NAFLD pathway.</i>

PATIENT INFORMATION	
OHIN: _____	V: _____
KHSC CR No: _____	
Last Name per health card: _____	First Name per health card: _____
DOB: _____ Sex: <input type="radio"/> M <input type="radio"/> F	
<small>YYYY/MM/DD</small>	
<b>Blood Collection Sites:</b> Patients may choose to go to <u>Armstrong 1 (KGH)</u> or <u>Jeanne Mance 5 (HDH)</u> <b>It is requested that patients bring this laboratory requisition for blood work when they visit.</b>	

BASELINE INVESTIGATIONS	
<ul style="list-style-type: none"> <li>▪ Liver Tests (includes ALT, AST, ALP, Albumin, Total Bilirubin, INR)</li> <li>▪ CBC (includes Platelets)</li> <li>▪ Lipid Profile (includes Cholesterol, Triglycerides, HDL, LDL)</li> <li>▪ HbA1c</li> </ul>	
<input type="radio"/> <b>Initial Baseline Investigations</b>  <b>Date Ordered:</b> _____ <span style="float: right;"><small>YYYY/MM/DD</small></span>	<input type="radio"/> <b>Follow-up Investigations (q 2-3 years)</b>  <b>Date of Last Tests:</b> _____ <span style="float: right;"><small>YYYY/MM/DD</small></span>

For Phlebotomy & Laboratory Use Only			
SPECIMEN COLLECTION		SPECIMEN COLLECTION TUBES	
Collection Centre (⊗ one):	<input type="radio"/> KGH Armstrong 1 <input type="radio"/> HDH Jeanne Mance 5	<b>1</b> Light Blue Top Sodium Heparin Tube <b>1</b> Green Top Lithium Heparin Tube <b>2</b> Lavender Top EDTA Tubes	
Collection Date/Time:	_____		
Collected By:	_____		
<b>Chemistry Test Codes</b>		<b>Hematology Test Codes</b>	
<ul style="list-style-type: none"> <li>▪ ALT</li> <li>▪ ALB</li> <li>▪ HBA1C</li> </ul>	<ul style="list-style-type: none"> <li>▪ AST</li> <li>▪ TBILI</li> </ul>	<ul style="list-style-type: none"> <li>▪ ALP</li> <li>▪ LIPID</li> </ul>	<ul style="list-style-type: none"> <li>▪ CBC</li> <li>▪ PT</li> </ul>