

Dept	Description of Changes from Ver. 3.15 to 3.16 GUH LAB USER GUIDE	Page No. Ver. 3.15	Page No. Ver. 3.16
GENERAL	General 2.3 Contact Information - Clinical Immunology: added general immunology email	N/A - New addition	page 6
GENERAL	General 2.5 Ms. Kasia Magga replaces Ms Karen Mullins as Central Reception Manager	As Previous	Page 9
GENERAL	General Added in an excerpt to describe how the Laboratory complies with Freedom of Information	N/A - New addition	Page 11
GENERAL	General - Contact Details under Blood and Tissue Establishment: added an additional Tissue Establishment extension number for the Blood and Tissue Establishment, revised the Vigilance team into Biovigilance and Haemovigilance and also added the Code Red Massive Transfusion extension numbers clinicians can use in the event of a Code Red situation	Page 4	Page 4
GENERAL	General - The Blood and Tissue on call hours are different to the other departments particularly on the weekend hours as on call hours on Saturday and Sunday morning as well as Bank Holiday Monday mornings is 10am in this Establishment. Other departments are 8am. For this reason the user must contact Blood and Tissue if needed on call via SWITCH on these days until 10am. It then reverts to extension phone number again until midnight that night. This was now made clear in the section detailing the on call service of each department to ensure there is no ambiguity if the emergency on call service is needed in the department of Blood and Tissue and from what time it needs to be contacted via SWITCH.	Page 5	Page 5 & 6
USE	Section 3.2 Board Number - noted PID (patient identifier) is interchangeable	N/A - New addition	page 14
USE	The Blood and Tissue Establishment and GMP facility has a very different service to the other testing laboratories and thus the criteria for the labelling and request form needs are very different to the other departments. This distinction was not clear and may confuse the user of the service thus it was made clear in this version that Blood and Tissue criteria is different and can be sought in section 7 instead.	Page 14 (Sect 3.2)	Page 16 (Sect 3.2)
USE	Section 3.2 The medical practitioner signing the request form is responsible for ensuring that the test request is appropriate and that issues of consent to testing and privacy have been dealt with appropriately	N/A - New addition	Page 15
TRANSPORT	Section 5.7 Immunology Samples Corrected 'Requests' to 'Serum gel specimens' and added ref to Section 16.		page 23
REPORTING	6.2 HealthLink: added details for regular imports, responsibilities for software system and dealing with problems	N/A - New addition	page 24
Blood and Tissue Establishment	Section 7.3 and Section 7.14 added in the fact Blood and Tissue are licensed for CAR-T processes and to contact the CAR-T Co-Ordinator if you require to discuss.	Page 31 and 38	Page 31 and 38
Blood and Tissue Establishment	7.17 - removal of Consultant who left GUH Dr Maria Eduarda Couto		Page 32
Blood and Tissue Establishment	Blood and Tissue have added 4gms of Fibrinogen to the Maternity and Merlin Park satellite fridges to be used in emergencies. This is now detailed in the guide. Additionally 4 O Positive units were placed in Merlin Park to be used if the patient is in a critical condition, crossmatched blood is all used, EEmergency O Negative blood is used and the clinician feels they cannot wait for stock to arrive from GUH. It is stated this is a clinical decision and it clearly states this on the labels. This is now detailed in this guide.	N/A - New addition	Page 39
IMMUNOLOGY	Section 11.3: Corrected reference for national Handbook to Advice Note and added URL link	N/A - New addition	page 52
IMMUNOLOGY	Section 11.7: added reference to Advice Note and added URL link	N/A - New addition	page 54
IMMUNOLOGY	Section 11.13: updated reporting of Eurofin Biomnis reports	62	page 62
VIROLOGY	Section 14.5; Update section on Respiratory virus testing to include influenza A/B, RSV and SARS-CoV-2; Removal of Male Urethral Specimens section; Removal of receipt time for CMV tests to reach the Virology laboratory; Replace DEAFF tests with CMV PCR; Removal of Influenza A/B, RSV Detection section;		page 76 - 77
VIROLOGY	Section 14.6; Removed 'one to' from specimen retention policy. Serum retained for two years.		page 77
TEST DIRECTORY	Adalimumab (trough levels and antibodies), Turnaround: changed from 10 to 5 working days		page 81
IMMUNOLOGY	Allergen Specific IgE (Rast) Turnaround: changed from 7 to 5 working days		page 83
	Anti-Beta-2 Glycoprotein-1 Antibodies: Turnaround changed from 7 to 5 working days		page 85
	Anti-CASPR2 antibodies: referred to UCL, London.		page 86
	Anti CCP (Citruinated Cyclic Peptide): Turnaround: changed from 7 to 4 working days		page 86
	Anti-CV2/ CRMP5-- referred to UCL, London		page 86
	Anti-Endomysial Antibodies: Turnaround: changed from 10 to 7 working days		page 86
	Anti-GABA a - referred to Oxford		page 86
	Anti-GABA b (anti-glutamate receptor antibodies) -details added		page 87
	Anti-Ganglioside Antibodies: referred to Neuroimmunology Lab, Queen Elizabeth University Hospital, Glasgow		page 87
	Anti-Gastric Parietal Cell Antibodies: Turnaround changed from 7 to 5 working days		page 87
	Anti-GBM Glomerular Basement Membrane (GBM) Antibodies Turnaround changed from 5 to 3 working days		page 87
	Anti-Glutamic Acid Decarboxylase (GAD) Antibodies: Turnaround changed from 3 weeks to 7 working days		page 87
	Anti-Histone Antibodies: Turnaround changed from 3 weeks to 7 working days		page 87
	Anti-Jo-1 Antibodies & Anti-La (SS-B) Antibodies: Turnaround: changed from 10 to 7 working days		page 88
	Anti-LGI1 antibodies: referred to UCL, London		page 88
	Anti-M2 Mitochondrial (Pyruvate Dehydrogenase) Antibodies: Turnaround changed from 3 weeks to 7 working days		page 88
	Anti-Myelin Associated Glycoprotein (MAG) Antibodies: referred to UCL, London		page 88
	Anti-Neuromyelitis Optica Antibodies , Anti-Neuronal Nuclear Cell (Hu Ri) Antibodies & Anti NMDA Receptor Antibodies- referred to UCL, London.		page 89
	Anti-neuromyelitis optica - CSF testing also available		page 89
	Anti-NMDA - CSF analysis also available		page 89
	Anti-Paraneoplastic Antibodies: See anti-Hu Ri Yo: & Anti-Purkinje Cell (Yo) Antibodies- referred to UCL, London.		page 89
	Anti-Phospholipase 2A receptor (PLA2R) antibodies: Turnaround changed from 3 weeks to 15 working days		page 90
	Anti-Purkinje (yo) - UCL London		page 90
	Anti-Ribosomal P Protein Antibodies & Anti-Ro (SS-A) Antibodies: Turnaround changed to 7 working days		page 90
	Anti-Sci-70 (Topoisomerase 1) Antibodies, Anti-Sm (Smith) Antibody & Anti-Soluble Liver Antigen (SLA) Antibodies: Turnaround changed to 7 working days		page 90-91
	Anti-Thyroid Peroxidase (TPO) Antibodies: Turnaround changed from 5 to 4 working days		page 91
	Anti-Thyroid Receptor Antibodies: Turnaround changed from 10 to 6 working days		page 91
	Anti-U1-RNP Antibodies: Turnaround changed to 7 working days		page 92
	Anti-Voltage Gated Calcium Channel (VGCC) Antibodies: - referred to Eurofins Biomnis. MUST be frozen with 4 hours of collection.		page 92
	Anti-Voltage Gated Potassium Channel (VGKC) Antibodies: referred to UCL, London. Removed CSF- TNA		page 92
	Autoantibody Tests, Autoimmune ENA Panel, Autoimmune Inflammatory Myopathy panel, Autoimmune Liver Disease Panel, Autoimmune Systemic Sclerosis Panel: Turnaround changed to 7 working days		page 93/94
	Bence - Jones proteins (Urine Free Light Chains): Turnaround changed from 10 to 15 working days		page 95
	Beta-2- transferrin: removed serum, not required as per Sheffield test requirements		page 95
	Cerebrospinal Fluid - Oligoclonal bands and CSF IgG Index: Turnaround changed from 3 weeks to 15 working days		page 102
	Complement: C5/C6/C7/C8/C9: referred to Eurofins Biomnis		page 106
	Complement: C3/C4: Turnaround changed from 5 to 3 working days		page 106
	Connective Tissue Disease Screen (CTD): Turnaround changed from 5 to 7 working days		page 107
	Cytogenetics: Chromosome Analysis /Karyotyping Adults (age >18 years): Turnaround changed from 15 to 25 working days		page 110
	Cytogenetics: Chromosome Analysis / Karyotyping Paediatric (age <18 years): Turnaround changed from 2-4 months to up to 2 months		page 110
	Free light chains: Turnaround changed from 10 to 5 working days		page 117
	Haemophilus influenzae B Antibodies (IgG): Turnaround changed from 5 weeks to 15 working days		page 122
	HLA B27 & Typing: address shortened to Eurofin Biomnis Dublin		page 124
	Immunoglobulins IgG / IgA / IgM and Serum Protein Electrophoresis: Turnaround changed from 10 to 5 working days		page 126
	IgE (Total): Turnaround changed from 7 to 4 working days		page 126
	IgG Subclasses (IgG1, IgG2, IgG3) & IgG Subclasses (IgG4): Turnaround changed from 10 to 7 working days		page 126
	IgG4: added For Age-related Paediatric Ranges see report		page 126
	Myositis Specific and Associated Antibodies Screen: Turnaround changed from 10 to 7 working days		page 137
	Pneumococcus IgG/ IgG2 antibodies: Turnaround changed from 5 weeks to 15 working days		page 142
	Quantiferon Test (Interferon Gamma Release assay - IGRA): Turnaround changed from 10 to 4 working days		page 145
	Rheumatoid Factor IgM: Turnaround changed from 5 to 4 working days		page 146
	Serum Amyloid A (SAA): Turnaround changed from 3 weeks to 6 weeks		page 150
	Tetanus Toxoid IgG Antibodies: Turnaround changed from 5 weeks to 15 working days		page 151
	Tryptase (Mast Cell): Turnaround changed from 3 weeks to 10 working days		page 153

TEST DIRECTORY	Aspergillus fumigatus precipitins: Report section changed from Positive/Negative to Detected/Not detected	page 93
VIROLOGY	Avian precipitins (Bird Fancier's Lung (BFL) disease): Report section changed from Positive/Negative to Detected/Not detected	page 94
	Brucella antibodies: Report section changed from Positive/Negative to Detected/Not detected	page 98
	Cytomegalovirus (CMV) IgM Antibody: Addition of reference to cross reactivity with other viruses in comment section	page 110
	Echinococcus (Hydatid cyst) antibodies: Report section changed from Positive/Negative to Detected/Not detected	page 112
	Farmers Lung Antibodies: Title updated to include species; Comment updated to include disease description	page 115
	Filaria Antibodies: Comment updated to include use of test in clinical diagnosis	page 115
	Galactomannan on Respiratory samples: removed and combined with Galactomannan antigen EIA – Serum or Respiratory samples	page 118
	Galactomannan antigen EIA – Serum or Respiratory samples: Added	page 118
	Galactomannan antibodies: referred to Galactomannan antigen EIA – Serum or Respiratory samples'	page 118
	Hantavirus Antibodies: Added 'See also under viral haemorrhagic fever under Travel'	page 121
	Hepatitis A IgM Antibody: Addition of comment section	page 122
	Hepatitis A IgG Antibody: Addition of comment section	page 122
	Hepatitis B Surface Antigen: Addition of section comment	page 122
	Hepatitis B DNA / Viral Load: Addition of HBV genotyping to title; comment updated to include monitoring and assessment of disease progression	page 122
	Hepatitis C Antibody: Comment updated to include antidoy detection timeline	page 123
	Hepatitis C PCR / Viral Load / Genotype: Comment updated to include clinical reasons for testing	page 123
	Hepatitis D Antibody: Comment updates to inform clinicians that newly diagnosed Hep B patients samples will be referred to NVRL for Hep D screening; Report section changed from Positive/Negative to Detected/Not detected	page 123
	Herpes simplex virus (HSV) antibody: Comment updated to inform clinicians not to request this test for 'acute diagnosis'; Report section changed from Positive/Negative to Detected/Not detected	page 124
	Herpes simplex virus PCR: Title updated to include Varicella-Zoster virus (VZV); Specimen type updated to 'lesion swab'; Report comment update to included VZV detected/Not detected	page 124
	Histoplasma Antibodies: Changed to Non-Indigenous Mycoses Serology; Comment added; Report section changed from Positive/Negative to Detected/Not detected	page 125
	Human Immunodeficiency Virus antigen/antibody: Comment now includes qualitative detection of antigen and referral to NVRL of newly diagnosed samples	page 126
	Human Immunodeficiency (HIV) PCR / Viral Load / Genotype: Comment updated to include possibility of false pos results on patients receiving CAR-T therapies	page 126
	Human T-Lymphocyte Virus (HTLV): Comment updated to describe HTLV and outcome of serology testing	page 127
	Hydatid antibodies: Referred to 'Echinococcus serology'	page 127
	Influenza A virus--: Refer to 'Respiratory Virus PCR'	page 128
	Influenza B virus--: Refer to 'Respiratory Virus PCR'	page 128
	JC (Polyoma) Virus: Addition of this virus	page 130
	Legionella pneumophila Urinary Antigen: Comment updated to advise users to include clinical details and refrigerate sample if there is a delay in getting to the lab	page 131
	Leptospira antibody: Onward reference lab details updated; Addition of comment; Report section changed from Positive/Negative to Detected/Not detected	page 132
	Lymphogranuloma venereum: Specimen type updated to rectal swab; Comment updated to describe cause of LGV; Report section changed from Positive/Negative to Detected/Not detected	page 133
	Measles IgG antibody: Comment added	page 134
	Measles IgM antibody: Title updated to include RNA; Oral fluid added as specimen type; Addition of comment	page 135
	Mumps IgG antibody: Addition of comment	page 138
	Mumps IgM antibody: Addition of RNA to title; Addition of oral fluid to specimen type; addition of comment	page 138
	Mycoplasma genitalium PCR: Laboratory updated to 'referred to NVRL'; Comment updated to describe disease significance; TAT changed from 10 working days to 2-3 weeks	page 139
	Mycoplasma pneumoniae: Title changed from antibody to serology/PCR; Specimen type now including Respiratory samples; Comment updated to describe IgM levels in serum; Report section changed from Positive/Negative to Detected/Not detected	page 139
	MPox (monkey pox or MPVX): Addition of this test	page 139
	Neisseria gonorrhoeae PCR: title changed to include 'see also CT/TV'	page 140
	Parvovirus B19 IgM + IgG antibodies: Report section changed from Positive/Negative to Detected/Not detected	page 142
	Parvovirus / B 19 IgM Antibodies: Removal of this-combined above in Parvovirus B19 IgM + IgG antibodies	page 142
	Respiratory Syncytial virus: Title changed to Respiratory Virus PCR: SARS-CoV2; Influenza A and B; Respiratory Syncytial Virus (RSV); Comment added with reference to EVR; Report section update to alert users that results are available on APEX or EVOLVE once technically validated.	page 149
	Rubella IgG Antibody: Addition of comment; Report section updated to include numeric values of immunity	page 150
	Rubella IgM Antibody serology: Title updated to Rubella PCR and/or IgM Antibody – Serology (or orocol); specimen updated to include oral fluid; Comment added; NVRL included as a reference laboratory	page 150
	SARS CoV – 2 (PCR): Title updated to 'see Respiratory Virus PCR'	page 150
	Schistosoma haematobium antibodies: Comment updated to include complication and diagnosis; Report section changed from Positive/Negative to Detected/Not detected	page 150
	Strongyloides antibodies: Comment updated to include clinical clue of Strongyloides; Pos/Neg removed from report section and 'As per Ref Lab report' added	page 152
	Syphilis (Treponema pallidum) antibodies: Addition of CST as specimen type; Addition of comment: Addition of RPR titre in report section.	page 153
	Toxocara Antibodies: Update of referral laboratory address; Addition of specimen types (CSF/eye) on discussion; Addition of comment; Pos/Neg replaced by 'Results are expressed as an optical density value with Ref Lab comment' in results section	page 155
	Toxoplasma gondii IgG: Title update to include IgM, avidity, dye test; specimen type update to include Amniotic Fluid; Aqueous fluid; CSF; EDTA blood; Tissue; Vitreous Fluid; Comment added; Report section update to separate IgM and IgG reporting	page 156
	Toxoplasma gondii IgM antibodies: merged with Toxoplasma gondii IgM; IgG antibodies; avidity; dye test	page 156
	Toxoplasma gondii antibody /avidity/dye test: merged with Toxoplasma gondii IgM; IgG antibodies; avidity; dye test	page 156
	Travel related infections, Rare and Imported Pathogens Laboratory (RIPL) testing: Section added	page 157
	Trichomonas vaginalis: Title updated to include (TV); Comment section update to add requirement of clinical details	page 157
	Tropheryma whipplei added	page 158
	Trypanosoma cruzi Antibodies: Comment added; Report section changed from Positive/Negative to Detected/Not detected	page 161
	Varicella-Zoster Virus (VZV) IgG antibodies: Comment section added	page 161
	Varicella-zoster Virus IgM PCR: IgM removed from title; comment added; TAT changed from 2-3 weeks to 5 working days	page 161
	Yellow fever antibodies: title updated to 'see Travel Section'	page 163
	Yersinia Antibodies: Title changed to 'Yersinia PCR developmental assay in UK may be available after discussion and full clinical details'	page 163
	Zika: Comment section added; Report section changed to 'Reference Lab report'	page 163
TEST DIRECTORY		
Haematology	Anti Xa-changed to 2 hrs	page 92
	ESR changed to 1-day	page 114
	Haematitics- addition of centrifugation requirements	page 120