****

**Call back #\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |
| --- |
| **Standard Order Priority List**Notify the lab if the priority needs modified |
| 1. **Aerobic Culture**
2. **Cell Count with Differential**
3. **Anaerobic Culture**
4. **Synovasure**
 | 1. **Leukocyte Esterase**
2. **Fungus Culture**
3. **Acid Fast Bacilli Culture**
4. **Crystal Exam**
 |
| **Test** | **Tube and Volume** | **Comments** |
| Microbiology Culture | SPS, Any Sterile Tube**Minimum 1.0 mL** | Body fluid submitted with Eswabs, EDTA (LAV top), heparin (green top) or other anticoagulants other than SPS are unacceptable for culture. |
| Synovasure | Any Sterile Tube**Minimum 1.0 mL** |  |
| Cell count | LAV Top – **Preferred**Or Green Top**Minimum 0.5 mL\*** | Add fluid immediately after collect and **gently mix by inversion 8 times** to prevent clotting**\*Use LAV for cell count and crystals if <1mL available** |
| Crystal Exam | Green Top - **Preferred**Or LAV Top**Minimum 0.5 mL\*** | Add fluid immediately after collect and **gently mix by inversion 8 times** to prevent clotting**\*Use LAV for cell count and crystals if <1mL available** |