

**Lab Requisition Completion Example**

Effective Date: 27 March 2018

Completing laboratory requisitions as below avoids sample processing delays and possible rejection due to lack of key information. [Laboratory Services Policy – Acceptance of Samples and Test Requests – Appendix A](#)

Full first and last name AND other requested information ensures the laboratory can correctly choose the requestor and copy to recipient(s) from the almost 10,000 practicing Alberta Physicians and other practitioners who order lab tests AND deliver results for effective and efficient patient care.


With 3.8 million Albertans, Laboratory Services requires complete patient identifiers to report lab results on the correct patient and avoid serious adverse events.

If no PHN or ULI, MRN

Required for Outpatient and Community

Patient location or Inpatient Facility Care

Incomplete Copy to requests will not be processed due to privacy breach concerns

 <b>Alberta Health Services</b>		[Requisition Title Here]				Session # (lab only)	
		PHN	Alternate Identifier		Date of Birth (yyyy-Mon-dd)		
Patient	Last Name	First Name		Middle	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Phone	
	Address	City/Town	Prov	Postal Code		Location	
	Requestor Name (last, first)		Copy to (last, first)		Copy to (last, first)		
Requestor	Location/Facility/Address		Location/Facility/Address		Location/Facility/Address		
	Phone		Phone		Phone		
	Healthcare Provider ID		Healthcare Provider ID		Healthcare Provider ID		
<b>Collection</b>	Date (yyyy-Mon-dd)	Time (24 hr)		Location		Collector ID	
Priority: <input type="checkbox"/> Routine <input type="checkbox"/> Stat <input type="checkbox"/> Urgent <input type="checkbox"/> Timed		Ⓢ Denotes a <b>Fasting Test</b> . Refer to Patient Instruction Sheet.				Hours Fasting	

**Printed copies are UNCONTROLLED unless signed by an authorized lab personnel below.**

(Authorized individuals are: lab personnel designated in their zone/program or provincial role to produce print copies)

Controlled Copy:

Date Printed:

Initials:

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