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**Department of Laboratory Medicine
Tallaght University Hospital
Tallaght
Dublin 24**

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Introduction and Scope

Information for GPs and external users- requirements to use service



Tallaght University Hospital (TUH)

Information for GP's\external sources using the Laboratory Medicine service at Tallaght University Hospital

Every effort has been made to ensure accuracy of the content of this guide to our services. Requirements have been updated due to the release of the new ISO15189 accreditation standards. From time to time, it may also be necessary to update the content for operational reasons.

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1.0 LABORATORY MEDICINE CONTACTS

Email: gplabqueries@tuh.ie



POSTAL ADDRESS:

Department of Laboratory Medicine,
Tallaght Hospital (TUH)
Dublin 24
Ireland
D24NR0A



Prefix (01) 414 for direct access from outside the hospital

Laboratory Medicine	Contact no.	Opening Hours	Sample Deadlines
Main Office	2837/4703/4875	Mon-Fri 9am-5pm	
Central specimen reception	3917	Mon-Fri 9am-5pm Sat 9am-11:30am	Mon-Fri GP samples must be received by 1pm

2.0 QUALITY MANAGEMENT SYSTEM

The Department of Laboratory Medicine is committed to providing a high quality, efficient and comprehensive service to our patients and clinical users. Central to this commitment is the Quality Management System (QMS). The Laboratory is accredited to ISO 15189 by the Irish National Accreditation Board (INAB) and is compliant with the requirements of EU Blood directive 2002/98/EC. Refer to INAB website for the TUH scope document ref 330MT for a full list of accredited tests.

Consent

Consent for individual investigations may require prior agreement with the patient or guardian (e.g. for genetic testing). Users of the Laboratory Medicine Service are advised to familiarise themselves with the publication –HSE National consent policy. Samples submitted for analysis may be used anonymously for quality control purposes following completion of testing.

Confidentiality

All investigations and results produced by the laboratory are of a confidential nature in line with respecting the privacy of the patient / doctor relationship and the needs of the clinical staff providing the care. Access to testing information and results should be on the basis of need only. Strict access and usage criteria are enforced with prevailing Data Protection Legislation.

3.0 REQUIREMENTS FOR USE OF THE TUH LABORATORY MEDICINE GP SERVICE

- ✓ New GP should email Ciaran.love@tuh.ie to request access to the laboratory service.
- ✓ Only approved GPs are permitted to use the TUH laboratory services.
- ✓ If approved the GP should contact Healthlink to set up surgery to receive electronic results www.healthlink.ie. Healthlink will contact TUH ICT to complete the set up.

- ✓ **GP's must provide an out of hours contact number to receive urgent\ critical patient results.** [Ref: Guideline on the Communication of Laboratory results likely to require urgent action.]
- ✓ **Positive Patient identification:** All specimens must be labelled in the presence of the patient so that they can confirm correct demographics. Patient details on sample and form must be correct. Incorrectly labelled samples will be rejected.
- ✓ Patient address information must be kept up to date by practitioners. Contact gplabqueries@tuh.ie to update TUH patient record.
- ✓ In order to comply with Accreditation standards ISO15189;2022 the GP must comply with the transport conditions outlined in Section 7.2 Transport conditions
- ✓ Where available patient addressograph labels should be used on both the samples and the request forms. (exception BT refer to 4.2)
- ✓ The GP practice stamp must be used on all sheets of the request form as it improves the transfer of accurate & clear information. Use TUH GP code and GP source code if possible.
- ✓ GP locums should contact TUH ICT for coding. If no code available original GP should be stated on form.
- ✓ All GP's must use TUH Request forms. These forms can be ordered from Central Specimen Reception along with the phlebotomy consumables (See Section 8 below). Blood test requests on letters, email and electronic formats will not be accepted.
- ✓ Certain investigations may require additional information, e.g. Vitamin D and Vitamin B12. (See Section 5.1 below)

4.0 PATIENT REQUEST FORMS AND SAMPLES

- The Request Form accompanying the sample/specimen must be legibly written.
- The legibility of the manual request form is vital to ensure all patient details are accurate.
- A clearly typed or written (please use block capitals) request form must be sent to reduce the risk of errors in patient identification, test selection or location.
- The laboratory expects the requesting Doctors/Phlebotomists who opt to use printed labels to have safe procedures in place for controlling and printing, affixing and checking patient details of such labels. If using Patient ID labels please affix to both the samples provided and ALL the pages of the request form.

4.1 LABELLING REQUIREMENTS

Sample/ Test Request	Minimum <u>Sample Labelling</u> Requirements	Minimum <u>Request Form</u> Requirements
Primary labelling requirements	<ul style="list-style-type: none"> - Forename(s) and surname (correct spelling, in the correct order, no abbreviations) - Date of Birth - First line of address - Date and time of sampling - Type and/or site of non-blood sample (if applicable) - Signature of sample taker 	<ul style="list-style-type: none"> - First name and surname (correct spelling, in the correct order (<i>please indicate the order of names if applicable</i>), no abbreviations) - Date of Birth - Gender (state if transgender) - Address (if this has changed provide both addresses and highlight the new address) - Location of patient - Date and time (if applicable) of sampling - Type and/or site of non-blood sample - Signature of requesting Doctor - contact number
Additional requirement	<p>Tests requested Priority status</p>	<p>Tests requested Priority status Relevant clinical information</p>

Note: Request forms and samples that fail to meet the minimum criteria (primary identifiers) will be rejected for analysis and will not be processed.

Test requests will be rejected if the following situations apply:

- Samples that do not have at least two acceptable identifiers.
- Significant differences between patient identifiers on sample and corresponding request form.
- Significant differences between patient details and previous patient record in TUH
- Blank or incomplete request forms
- Incorrectly labelled or unlabelled samples
- Failure to provide relevant clinical information

Test requests will also be rejected if the following situations apply:

- Delayed or unsuitable transportation
- Expired sample tubes
- Incorrect sample types
- Insufficient quantities of required sample types to cover requests for each discipline.

A repeat sample will be required which inconveniences your patients and delays test results.
Information on the use of samples for testing and the handling of samples is available on the Laboratory Medicine website: www.tuh.ie/laboratory-medicine

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4.2 GP BLOOD TRANSFUSION LABORATORY REQUESTS

A completed TUH Blood Transfusion request form is required for all Blood Grouping (Group & Save) requests. GP group & save requests are only performed for termination of pregnancy and following miscarriage. Positive patient identification must be performed prior to phlebotomy.

Note: The laboratory expects the requesting Doctors/Phlebotomists who opt to use printed labels to have safe procedures in place for controlling and printing, affixing and checking patient details of such labels. **NB. Printed labels not acceptable for Group & Save Samples.**

Group & Save (Blood Group & antibody screen)	
Sample Type	6ml EDTA(pink top)
Processing TAT	Routine – same day if received before cut off time Urgent – 4 hours
Information	<p>A completed <u>TUH Blood Transfusion request</u> form is required for all Blood Grouping (Group & Save) requests.</p> <p>GP group & save requests are <u>only</u> performed for termination of pregnancy and following miscarriage.</p> <p>Positive patient identification must be performed prior to phlebotomy.</p>
Minimum Sample Labelling Requirements	<ul style="list-style-type: none"> • Handwritten • First name and surname (spelt correctly, no abbreviations) • Date of Birth • MRN if available <u>or</u> first line of address • Signature of sample taker
Minimum Request Form Requirements	<ul style="list-style-type: none"> • TUH Blood Transfusion Request Form only • First name and surname (spelt correctly, no abbreviations) • Date of Birth • Hospital number (if known) • Address • Location, name and contact number of GP practise • Gender • Date/time of sampling • Signature of requesting Doctor <p>Clinical details must be provided i.e. TOP/miscarriage, gestation (weeks) and if any Anti-D administrations within last 3 months.</p>
Residual Risk	<p>Non-adherence to correct blood transfusion sampling procedure leading to patient misidentification. This can result in a Wrong Blood In Tube (WBIT) Event and failure to provide appropriate Anti-D prophylaxis following termination of pregnancy resulting in a Serious Adverse Event (SAE).</p> <p>Low risk provided safe sampling policies and procedures are adhered to. Positive patient identification is essential.</p> <p>Full risk assessment (BT-RA-0600C) available upon request.</p>

DCT (Direct Coombes Test)	
Sample Type	EDTA sample (3ml Purple top or 6ml Pink top)
Processing TAT	Routine – same day if received before cut off time Urgent – 4 hours

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Information	Note: Testing for IgA, IgM, C3c and C3d are not within the scope of INAB accreditation.
Minimum Sample Labelling Requirements	<ul style="list-style-type: none"> • Handwritten or addressograph label • First name and surname (spelt correctly, no abbreviations) • Date of Birth • MRN if available <u>or</u> first line of address
Minimum Request Form Requirements	<ul style="list-style-type: none"> • GP form or TUH Blood Transfusion Request Form • First name and surname (spelt correctly, no abbreviations) • Date of Birth • Hospital number and/or first line of address • Location/name of GP practise • Gender • Date/time of sampling
Residual Risk	<p>Delay in test result availability for clinician/patient. Incorrect result released impacting patient care/treatment. Repeat sampling of patient.</p> <p>Low risk – control measures in place. Positive patient identification is essential.</p> <p>Full risk assessment (BT-RA-0600G) available upon request.</p>

Disease Association Tissue Typing (HLA Typing)	
Sample Type	5-10ml EDTA
Processing TAT	Routine – up to 4 weeks
Information	External Laboratory Tests. Samples are Referred to the National Histocompatibility and Immunogenetics Laboratory (NHLI).
Minimum Sample Labelling Requirements	<ul style="list-style-type: none"> • Handwritten or addressograph label • First name and surname • (spelt correctly, no abbreviations) • Date of Birth • MRN if available <u>or</u> first line of address
Minimum Request Form Requirements	<ul style="list-style-type: none"> • GP form or TUH Blood Transfusion Request Form • First name and surname • (spelt correctly, no abbreviations) • Date of Birth • Hospital number and/or first line of address • Location/name of GP practise • Gender • Date/time of sampling • Specify typing required e.g. HLA B27
Residual Risk	<p>Delay in test result availability for clinician/patient. Incorrect result released impacting patient care/treatment. Repeat sampling of patient.</p> <p>Low risk – control measures in place. Positive patient identification is essential.</p> <p>Full risk assessment (BT-RA-0600K) available upon request.</p>

5.0 SPECIMEN GUIDE AND ORDER OF DRAW

5.1 BLOOD SPECIMENS

The common specimen requirements are heparinised plasma, serum (from whole blood which has clotted), fluoride-oxalate plasma, and EDTA whole blood or plasma. Regular stock rotation of supplies is encouraged to ensure sample tubes are in date. For most biochemical and endocrine tests the preferred specimen tube is a 3.5mL heparinised tube.

Order of Draw:

Please take separate blood samples for **each** Discipline.

Tri-Sodium Citrate Solution (Blue cap) 	HAEMATOLOGY - Coagulation Screen, INR, Fibrinogen Please <u>fill to line on the bottle</u> - under or over filled tubes CANNOT be used
Clotting Accelerator (Red cap) -Serum  Please take separate blood samples for each Discipline.	IMMUNOLOGY – Serum required for all immunology tests – restricted to tests listed on request form. CLINICAL CHEMISTRY - Lithium, LDH, HCG - separate sample for each request is required. (Vitamin D – please see information below) HAEMATOLOGY – Vitamin B12, FERRITIN, FOLATE, INTRINISIC FACTOR ANTIBODY MICROBIOLOGY -Hepatitis A, B, C, HIV, ASOT, Farmers lung antibodies, Aspergillus fumigatus antibody, Avian precipitants, Syphilis.
Lithium Heparin (Green cap) 	GENERAL CLINICAL CHEMISTRY – Sodium, Potassium, Creatinine, Urea, eGFR, Liver profile (Total Protein, Albumin, Total Bilirubin, ALT, ALP, GGT), Bone profile (Calcium, Phosphate, ALP), TPO, Lipid profile (Cholesterol, Triglycerides, HDL & LDL Cholesterol), Thyroid profile (TSH, FT4), CRP, FSH/LH, PSA, NT Pro-BNP, CA125, Carbamazepine, Digoxin, Phenobarbitone, Phenytoin, Theophylline, Valproate. CK, Urate, Iron Profile, Magnesium, Progesterone (Female <50 yrs), Prolactin, Testo, Oestradiol, FT3
EDTA (Purple cap) 	HAEMATOLOGY – FBC (& Film), ESR, Reticulocyte Count, Sickle Cell, Haemoglobinopathy investigation, Malaria Parasites. A separate sample is required for each request. CLINICAL CHEMISTRY – HbA1C MICROBIOLOGY - PCR for CMV, EBV, HIV, HSV 1,2 BLOOD TRANSFUSION – DCT
EDTA (Pink cap) 	BLOOD TRANSFUSION Group & Screen (for termination of pregnancy and following miscarriage only) - Handwritten Details only, must be signed. NO Addressograph NO Exceptions. TUH Blood Transfusion request card required. Direct Coombs Test – Handwritten or addressograph label. GP request form acceptable.
Fluoride (Grey cap) 	Blood Sugar Glucose Levels State time on sample and form and state whether sample is FASTING or RANDOM

SAMPLE VOLUMES

- It is preferable that blood tubes, especially those containing preservatives, are filled to their stated capacity. This avoids any risk of insufficiency or interferences from excess concentrations of preservative.
This is mandatory for some tests:
 - Coagulation tubes must be filled to the mark.
- Minimum volume for FBC is 1ml. Samples smaller than this may be rejected or results may be incomplete.
- 3ml EDTA is required for ESR. Samples smaller than this may be rejected. One 3ml EDTA can be used for all routine haematology testing (e.g. FBC and ESR). Priority will be given to processing FBC analysis first. It is usually possible to process smaller samples where the tube is at least half filled i.e. 2mls or, in the case of paediatric tubes, 0.7ml. A limited chemistry profile can usually be obtained on such samples.
- In the case of very short samples please indicate those tests that are of highest priority.

Additional information

- Please ensure samples reach the laboratory in as short a time as possible post phlebotomy as delays may impact on the ability to perform certain analyses, and/or the quality of results; please refer to the individual department sections for information specific to tests you may wish to request.
- If you have an urgent request, please contact the laboratory section in advance and tick the urgent box on the request form.
- Urgent samples should be transported urgently by taxi and brought directly to the relevant laboratory.
- In line with the National Laboratory Handbook Volume 1, requests for Vitamin B12 & Folate will not be processed without relevant clinical details.

Immunology Requests

All Immunology requests are referred to SJH Immunology for analysis. As per TUH GP request form, only TTG, Rheumatoid Factor, CTD Screen and Anti-CCP are available.

Allergens - Only the specific IgE Sensitisation tests listed on request form are routinely available. A small number of further allergens may be available from SJH Immunology when adequate and appropriate clinical details are provided.

Vitamin D Requests

Following on from a detailed memo issued on 26.08.2024 concerning the publication of the HSE Laboratory Services Reform Programme "Indications for Measurement of Vitamin D levels", the Clinical Chemistry Department in Tallaght University hospital is now activating new procedures relating to this analytical service, as follows:

1. A new mandatory manual form is required to be fully filled in and accompany each Vitamin D request. Please email gplabqueries@tuh.ie for a copy of the request form.
2. A separate serum sample is now required for each Vitamin D request.
3. If either of these steps are not followed, the Vitamin D test will not be processed
4. There will no facility to add-on to previous or accompanying samples.

5.2 NON BLOOD SPECIMENS

All non-blood specimens e.g. urines, swabs, sputum, faeces etc. must be fully labelled according to the table in Section 4. Sample type and site sample was taken should be stated.

Eq.24hour urine collections require First name, Surname with the correct spelling, DOB, first line of address, collection start time and collection finish time. Matching request form with First name, surname DOB, address and tests requested required.

Tissue samples for histology must be placed in 10% formalin, pre-filled containers are available from the laboratory.

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An andrology service (post vasectomy and semen analysis for fertility studies) is available from the cellular pathology lab by appointment only. Contact gplabqueries@tuh.ie for details.

6.0 CENTRIFUGATION (if applicable)

Centrifuge pilot is currently running with selected GP practices. Only pre-spun samples from these practices are acceptable. SLA with the GP practice is required.

7.0 TRANSPORTATION OF SAMPLES

7.1 PACKAGING OF SAMPLES

The laboratory does not process leaking, unlabelled or mislabelled specimens.

- Samples must be placed in a biohazard bag with request form placed separately in the pouch provided.

DO NOT PLACE SAMPLE AND FORM TOGETHER IN THE SAME POUCH IN BIOHAZARD BAG

- Always use approved in-date sample collection containers and ensure lids are securely closed
- Use approved sample collection biohazard bags which can contain any spills or leaks within the bag when properly sealed
- Do not transport broken or leaking samples
- Always dispose of sharps appropriately
- Always supply clinical information including known infection risk with each request.

7.2 TRANSPORT CONDITIONS

To comply with the new ISO 15189 2022 accreditation standards (7.2.5)

- Blood samples should be transported in approved transport boxes to the Laboratory at ambient temperature 15-22°C within 6 hours of collection e.g. courier transport boxes. Other samples should be transported 4-6°C and arrive the same day.
- Temperature of samples during transport should be monitored e.g. temperature tracking.
- Samples should be received the same day. If patient samples and materials are to be stored they should be stored in conditions that ensure the continuing integrity samples and in a manner that prevents cross contamination and deterioration. Fridge Temperature should be monitored. Please inform laboratory of storage conditions used as this may affect sample results.
- If GP is organising a Taxi\GP Practice staff member drop off, GPs are to ensure samples transported to the Laboratory are in line with prevailing ADR transport regulations.
- In the case where patients are requested to drop in samples to the laboratory, it is important that the same level of care is taken with the identification and packaging of specimens.
- Please ensure that samples are transported in the correct condition to the Laboratory. If the integrity of a sample has been compromised and there is a health risk, the organisation responsible for the transport of the sample shall be notified immediately and action taken to reduce the risk and to prevent recurrence. A non-conformance is raised.

- GP\Laboratory staff must ensure that the time between collection and receipt in the Laboratory is appropriate for the requested examinations. GPs must record the date and time of collection on sample. Request forms will be dated and time stamped on arrival in Central Specimen Reception Laboratory Medicine. An audit will be carried out to check if transport times are appropriate.
- Refer to specific instructions in individual department sections for transport of samples which require special conditions or handling. If in any doubt please contact the relevant department by telephone

8.0 LABORATORY MEDICINE SPECIMEN RECEPTION SERVICES

The specimen reception area in the Laboratory provides the following functions:

- **Reception, collation and registration of specimens from GP patients.**
- Supply of blood tubes, sample containers, request forms, & bags.
- Point of contact for patients – sample drop off.

***Specimen Reception Patient Sample Drop in
Hours of opening***
Monday to Friday 9:00am to 1:00pm
Saturday 9:00am to 11:30am (urgent samples only)

COLLECTION OF CONTAINERS / PHLEBOTOMY CONSUMABLES ORDERS

- Patients can collect specific sample containers e.g. 24hour urine collection containers, from specimen reception staff, who will also supply instructions (verbal and written) in the use of such containers.
- GPs may arrange supplies by using the dedicated GP Stock requisition email, GPSTOCKORDERS@TUH.IE, and the GP Stock requisition form (LM-LF-0020C).

Copies of this form may be obtained by sending an email to the aforementioned email address. Requisitions must be received by Thursday for processing and collection the following Monday. Due to storage restrictions, any orders not collected by the end of the week will be returned to stock and a new order will be required to be submitted. Orders for large numbers of items may not be completely filled due to our own stock constraints. Completed forms may also be sent in via courier/taxi

9.0 GP REPORTS

Laboratory Medicine TUH is a paperless laboratory and test results are sent by ICT (via secure FTP) to Healthlink at regular intervals throughout the day.

- For GP patients, the patient location is defined as the GP surgery from which the request is received.
- Patients' results requested by TUH consultants can be requested by their GP and sent via Healthlink.
- Where GP samples are being referred to us from another hospital, reports will be returned to the hospital.

Further details on sample types and turnaround times please refer to the discipline information in the main Laboratory User Manual which can be found on the TUH website

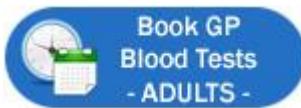
<https://www.tuh.ie/Healthcare-Professionals/Contacts-Information/Laboratory-Medicine.html>

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10.0 ADULT PHLEBOTOMY SERVICE (Phlebotomy Services at TUH)

TUH provides a limited phlebotomy service for GP referred patients. Access to this SwiftQueue service is by appointment only. Patients need to make a booking online by accessing the TUH website www.tuh.ie and selecting Tallaght University Hospital **Book GP bloods- Adults.**



Note: Patients who schedule appointments through the TUH OUTPATIENT CLINIC will not be accommodated at their designated appointment time.

The following information is required:

- The patient must have a GP request form signed by a GP or health link referral letter / email to avail of this service.

The Adult Phlebotomy (Blood Tests) Department offers two types of services

- GP Referral Service
- Out-Patient Clinic Referral Service

Reference; WHO guidelines on drawing blood: best practices in phlebotomy 2010

Opening Hours - (Adults)

GP Referral Service 08.00 to 16.45hrs Monday to Friday.

Out-Patient Clinic Referral Service 08.00hrs to 16.40hrs. Monday to Friday.

Directions to Adult Patient Blood Tests Area: Enter via the main entrance and take the second left. The phlebotomy department is located in the Rynd unit at the end of the main corridor. Patients are requested to Check- in at the swift queue self-service kiosk on their arrival. Registering at the kiosk will notify the phlebotomist of your arrival.

ADULT PHLEBOTOMY DEPARTMENT STARTING TIMES / HOURS OF SERVICE

WARD	ALL O.P.D. REFER.	ALL G.P. REFER.
Mon-Fri	8.00hrs - 16:45hrs	8.00hrs - 16:45hrs
Sat		
Sun & Bank Hols.	N/A	N/A

The Phlebotomy Manager for adult phlebotomy service may be contacted at 3040/Bleep 6249.

Paediatric Phlebotomy is managed by the Children's Hospital Ireland (CHI). To book blood tests for children under 16 years please use the link below.

<https://www.childrenshealthireland.ie/outpatients/blood-tests>

11.0 GP COMMUNICATION

- Communication between Tallaght Hospital and GPs is by direct contact by phone or health mail to gplabqueries@tuh.ie
- The primary responsibility for follow up action on any laboratory test result rests with the person who requested the test. Prior to requesting a test, the practitioner is responsible for ensuring that a process is in place to ensure that they or another competent team member, is available to receive and act on the result when it becomes available. Ref: "Communication of Laboratory Results Likely to Require Urgent Action"
- In the event an urgent report is required, the requestor must alert the laboratory by telephone to clearly state the nature of the urgency and must ensure it is clearly indicated on the Request Form. The laboratory administration team is not resourced to issue routine laboratory results by phone except in emergency situations.
- In the event of an urgent critical result Laboratory staff will attempt to contact the GP by phone. If staff are unable to contact the GP a health mail alert notification may be sent while we continue to try to contact the GP.
- Advisory services available from discipline consultants. Please refer to Laboratory User Manual on www.tuh.ie for contact numbers

12.0 USER FEEDBACK

As part of our continual improvement process we would welcome your feedback, positive or negative, on our GP service. Please contact the Laboratory manager by email at ciaran.love@tuh.ie or by phone at 01-4143905.

13.0 Amendments

Section	Changes	Initials\Date
3.0	GP's must provide an out of hours contact number to receive urgent\critical patient results. [Ref: Guideline on the Communication of Laboratory results likely to require urgent action.] Highlighted and reference added	FOD 30/01/2026
4.2	Table amended. Addition: sample type, TAT, information & residual risk	MOB 27/01/2026
5.1	Sample type for ESR changed to EDTA	HB 27/01/2026
11.0	The primary responsibility for follow up action on any laboratory test result rests with the person who requested the test. Prior to requesting a test, the practitioner is responsible for ensuring that a process is in place to ensure that they or another competent team member, is available to receive and act on the result when it becomes available. Ref: "Communication of Laboratory Results Likely to Require Urgent Action"	FOD 30/01/2026
Appendix 1	List of Clinical Chemistry tests available was amended	EB\GB 27/01/2026

APPENDIX 1: LIST OF LABORATORY TESTS ROUTINELY AVAILABLE TO GPS

Clinical Chemistry	Haematology	Immunology	Microbiology	Blood Transfusion
Sodium, Potassium	Vitamin B12/Folate/ Ferritin (clinical details essential)	Anti-CCP	Culture & Sensitivity	Group & Save (for TOP only)
Creatinine, Urea, eGFR	Infectious Mononucleosis screen	Rheumatoid Factor	Fungal Culture	DCT
Liver Profile (Total Protein, Albumin, Total Bilirubin, ALT, ALP, GGT)	Coagulation screen	Intrinsic factor	Mycobacterial investigation	HLA B27 (referral test)
Bone profile (Calcium, Phosphate, Alk Phos)	INR (Warfarin) must state anticoagulant status	Tissue Transglutaminase antibody (tTg)	Stool investigation	
Lipid profile (Total Cholesterol, Triglycerides, HDL & LDL Cholesterol)	FBC		Ova & Parasites (based on clinical details)	
Thyroid Function (Free T4/TSH) SUPPLY CLINICAL DETAILS – e.g. on T4?	ESR	Connective Tissue Disease (CTD) Screen	Chlamydia / Gonorrhoea/ Trichomonas	
FSH/LH	Haemachromatosis Screen (signed patient consent essential)	Only 3 Allergy tests permitted: <ul style="list-style-type: none">Animal Disorders (allergy)House dust mite (allergy)Peanut AllergyMixed Grass pollen (allergy)	Herpes Simplex Virus	
PSA (Supply Clinical details)	Sickle cell/ Thalassaemia/Haemoglobinopathy		Varicella Zoster Virus (VZV) IgG (Immune status)	
Indications as per National Guideline			STI screen (Syphilis, HIV, HBsAg)	
CA 125 Indications as per National Guideline	Malaria screen (urgent test, must contact lab prior to sending, must hand deliver to haematology)		Measles/Mumps/Rubella IgG screen	
Glucose – Please indicate if fasting, 2hr PP or random			Viral Hepatitis B & C screen (HBsAg + anti-HCV)	
Haemoglobin A1c			Hepatitis B Infection status (HBsAg, anti-HBc)	
NT Pro-BNP Indications as per National Guideline			Hepatitis A IgG (HAV IgG)	
Vitamin D Indications as per National Guideline			Hepatitis B surface Antigen (HBsAg)	
C Reactive Protein (CRP)			Hepatitis B surface Antibody (Post vaccination)	
Carbamazepine,			Hepatitis C Antibody (anti-HCV core IgG)	
Digoxin,				

Information for GPs and external sources using Laboratory Medicine service at TUH LM-LI 0010B Version: I.S. Index: LM-LI 0010B. Printed: 03 Feb 2020 08:28

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Phenobarbitone,			Hepatitis C PCR (HCV RNA; current infection)	
Phenytoin, Theophylline			Syphilis serology HIV Ag/An Combo assay	
Valproate			Individual serology screens (HIV, Hepatitis B, Hepatitis C, Hepatitis A, Hepatitis D, Hepatitis E)	
Lithium			Individual Molecular screens (HSV PCR, HIV PCR)	
hCG (Pregnancy Test only)			ASOT	
Thyroid Peroxidase Autoantibodies (TPO) – ONCE ONLY PER PATIENT			Farmers Lung antibodies	
Total IgE			<i>Aspergillus fumigatus</i> antibody titres	
Bron Studies including TIBC			Avian precipitants	
CK			Lyme Serology	
Urate				
LDH				
Magnesium				
Oestradiol Progesterone (Female <50 yrs only) Testosterone				
Free T3 (available but demand managed)				
Albumin/Creatinine Ratio (Urine)				
Protein/Creatinine Ratio (Urine)				

Information on request

Note: Haematology tests: Other tests are available if appropriate for patient care. Please contact the Haematology lab before requesting.

