	SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA (UNIT OF MEDICAL RESEARCH FOUNDATION)	2025
	DIRECTORY OF SERVICES	

DIRECTORY OF SERVICES



**SRI NATHELLA SAMPATHU CHETTY
CLINICAL LABORATORY, SANKARA NETHRALAYA
(UNIT OF MEDICAL RESEARCH FOUNDATION)**

Padma Bhushan Dr.S.S.Badrinath Campus

No.41, College Road,



Nungambakkam,

Chennai – 600 006

Ph: 2823 3556 / 2827 1616 / 2831 1913

Fax: 91-044-2825 4180

Email: snsclab@snmail.org

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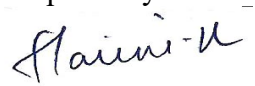




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Hospital Laboratory

<p style="text-align: center;">Sri Nathella Sampathu Chetty Clinical Laboratory, Sankara Nethralaya, (Unit of Medical Research Foundation)</p>
<p>The Legal name of the parent organization is “Medical Research Foundation”. The Organization is Registered under Societies Registration Act 1860 (S.No. 25 of 1978)</p>
<p><u>Address :</u></p> <p>SNSC Clinical Laboratory, Sankara Nethralaya (Unit of Medical Research Foundation) Padma Bhushan Dr.S.S.Badrinath Campus SANKARA NETHRALAYA, No 41, (OLD No: 18), College Road, Nungambakkam, Chennai – 600 006, Tamil Nadu, India, Ph: 2823 3556 / 2827 1616 / 2831 1913 Email: snsclab@snmail.org</p> <p>Working hours (Main Lab) : 7.30 am to 7.00 pm (Sunday holiday)</p>
<p>Laboratory Director : Dr.N.Angayarkanni Ph.D Contact : 28271616 Extn 1304/1341 Email: drak@snmail.org / snsclab@snmail.org</p>

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Other Sample Collection Centres : Address

1. SNSC Clinical Laboratory Collection Centre, Dr.S.S.Badrinath Road

Working hours : 7.30 am - 5.30 pm

Jagadguru Kanchi Sri Chandrasekarendra Saraswathi Nethra Nilayam,
 (JKCN Centre)
 No.21, Dr.S.S.Badrinath Road
 Chennai – 600 006, Tamil Nadu, India.
 Phone: 28263556 / 28271616
 Email: drak@snmail.org/snsclab@snmail.org

2. SNSC Clinical Laboratory Collection Centre, CUSSN



Working hours: 8.00 am - 4.30 pm


(C.U.Shah Sankara Nethralaya)
 No. 8, GST Road, St.Thomas Mount, Gunidy
 Chennai 600 016, Tamil Nadu, India.
 Ph No: 91-044-22346022, 22344474
 Email: drak@snmail.org/snsclab@snmail.org

3. SNSC Clinical Laboratory Collection Centre, SN RA Puram

Working hours : 9.00 am - 3.00 pm

(Sankara Nethralaya RA Puram)
 New No. 30, Old No.73, Kamarajar Salai, Raja Annamalaipuram,
 Chennai: 600 028, Tamil Nadu, India.
 Ph No: 91-044-49083500, 49083501
 Email: drak@snmail.org/snsclab@snmail.org

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The Departments under SNSC Clinical Laboratory & working hours

Padma Bhushan Dr.S.S.Badrinath Campus, No 41, College Road

A. Main Laboratory: Venugopal block (VG block) Ground Floor

1. Collection : Sample collection time: 7.30am to 6.00pm

Working hours: 7.30 am to 7.00 pm

2. Clinical Biochemistry-

3. Clinical Pathology

4. Clinical Hematology

B. KNBIRVO BLOCK

5. Histopathology and Cytopathology - 3rd floor,

6. Genetics and Molecular Biology - 4th floor,

7. Special Clinical Biochemistry - 5th floor,

8. Microbiology and Serology - 6th floor,

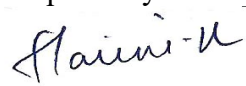

C. Venugopal block (VG block) Ground Floor,

9. Molecular Diagnostic Laboratory.

Note:

For emergency cases in house, Point of care testing (POCT) available 24x7 at all campus.

After working hours only tests that cannot be done in POCT will be collected by ward sister/on call Phlebotomist from SN Main laboratory as requested by Consultants / Anesthetist and sent to Metropolis Health Care Limited, Nungambakkam, Chennai. (Outsourced)

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S.No.	Director	SNSC Clinical Laboratory
1.	Dr.N. Angayarkanni Ph.D	

S.No.	Deputy Director	SNSC Clinical Laboratory
1.	Dr.AR.Anand Ph.D	

S.No.	HOD	Department
1.	Dr.N.Angayarkanni Ph.D	Cl Biochemistry
2.	Dr.S.Krishnakumar MD	Cl Hematology and cl Pathology
3.	Dr. S.Krishnakumar MD	Histopathology
4.	Dr.AR.Anand Ph.D	Microbiology and Serology Molecular Diagnostics
5	Dr.Sripriya S Ph.D	Head Incharge, Genetics and Molecular Biology

Quality Manager



S.No.	Name	SNSC Cl Laboratory
1.	Dr.R. Harini , MD	Associate Professor, Clinical Biochemistry

Technical Manager

S.No.	Name	Department
1.	Ms.Kamatchi MSc,MSMLT	Sp cl Biochemistry

Deputy Technical Managers



S.No.	Name	Department
1.	Ms.Saumya.T.S. M.Sc	Cl.Hematology & Cl.Pathology
2.	Ms Logeswari M.Sc	Clinical Biochemistry
3.	Ms.Priyanka BSc MLT	Microbiology & Serology
4.	Ms.M.Anitha BSc MLT	Histopathology
5.	Ms.Jayanthi M.Sc	Special Biochemistry
6.	Ms.Emelda Mary M.Sc	SNSC Collection Centre - Dr.S.S.Badrinath Road


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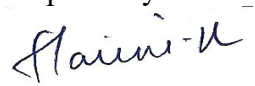

Signing Authorities/Faculty of the Laboratory Departments


S.No	Name /Lab Head	Designation, Authorized Signatory, Contact details
1.	Dr.N.Angayarkanni Ph.D Head, Clinical Biochemistry & Collection	Director - SNSC Clinical Laboratory, Management Representative (MR) NABL, Director - Biochemistry, Authorized Signatory Contact Details: 28271616, Ext:1304/ 1341 Email: drak@snmail.org
2.	Dr.R.Harini MD In-charge: Collection (main and other centers) & In-charge cl Biochemistry	Quality Manager (NABL), Associate Professor - Clinical Biochemistry, Authorized Signatory, Contact Details: 28271616, Ext:1103 Email: drharini@snmail.org
3.	Dr.Suman H Kalantri MD In-charge: Hematology & Cl Pathology	Assistant Professor-Cl.Hematology & Cl.Pathology, Authorized Signatory, Contact Details: 28271616, Ext:1101 Email: drsuman@snmail.org
4.	Dr.J.Biswas MS Director , Histopathology	Director – Histopathology, Authorized Signatory, Contact Details: 28271616, Ext:1302 Email: drjb@snmail.org
5.	Dr.S.Krishna Kumar MD Head, Hematology & cl pathology & Head, Histopathology	Prof & HOD – Histopathology, Authorized Signatory, Contact Details: 28271616, Ext:1302 Email: drkk@snmail.org

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6.	Dr.A.R.Anand Ph.D Head, Microbiology & serology & Molecular Diagnostic Laboratory	Deputy Director - SNSC Clinical Laboratory, Professor and Head Microbiology & Serology, Authorized Signatory, Signing authority: Molecular diagnostics Contact Details: 28271616, Ext:1301/1305 Email: dranand@snmail.org
8.	Dr.L.Dhanu Rekha Ph.D In charge: Molecular Diagnostic Laboratory,	Senior Scientist- Molecular Diagnostic Laboratory, Authorized Signatory, Signing authority Microbiology, Serology Contact Details: 28271616, Ext:1352 Email: drdhanu@snmail.org
7.	Dr.G.Srividya Ph.D	Molecular Biologist Molecular Diagnostic Laboratory, Contact Details: 28271616, Ext:1352 drsrividya@snmail.org
10.	Dr.S.Sripriya Ph.D Head in charge: Genetics	Incharge - Genetics & Molecular Biology Authorized Signatory (Non-NABL), Contact Details: 28271616, Ext:1308 Email: drss@snmail.org

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Quality Policy ISO 15189:2022

“We at the Clinical Laboratory commit to provide Quality Medical Laboratory service to meet the needs and requirements of its patients and users to provide examinations that fulfill their intended use for generating reliable patient test reports on time, using appropriate technology of International standards and ensure continual improvement committed through good professional practice and competent staff who ensure to abide by the policies and procedures of the laboratory at all times with complete awareness of the required documentation”.

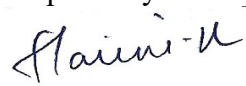

Objectives


1. To comply with ISO15189:2022 standards at all time.
2. To maintain technical excellence by using standard technology.
3. To ensure compliance with the statutory and regulatory requirements.
4. To ensure adequate resources and staff competence for effective service.
5. To ensure testing and reporting results in an effective and timely manner.
6. To ensure continued patient satisfaction.
7. To ensure continual improvement in the processes and services.



Date: 18.11.2023

Dr. N. Angayarkanni Ph.D
Director-Laboratory Services
Management Representative

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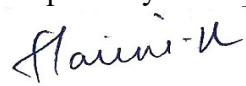

[Handling of Feedback forms / Suggestions / Complaints received at SNSC clinical laboratory](#)


Patients / Customers can give their suggestions / feedback / complaints to the SNSC Clinical Laboratory, Sankara Nethralaya through :

- (a). Feedback form at the Laboratory registration counter,
- (b). Suggestion box in the laboratory registration counter,
- (c). Through e-mail (snsclab@snmail.org) / drak@snmail.org / respective department.
- (d). If verbal it can to the Director/QM / respective departments of the laboratory.

A suitable response will be ensured on complaints and suggestions after discussion at the fortnightly laboratory services meeting. Feed backs are reviewed by the Director, QM and Head of the laboratory and by the Management.

The feedback is one of the “Quality Indicator” of the lab service and all quality indicators shall be analyzed statistically for management information so as to ensure quality system in patient service at laboratory.

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GENERAL INSTRUCTION ON SAMPLE COLLECTION

A. CLINICAL BIOCHEMISTRY:



1. Instructions for routine blood investigation:


1.1. Fasting blood sugar (FBS): For a fasting blood sugar test, do not eat or drink anything other than water for at least 8 to 12 hours over night before the blood sample is taken. Tea, coffee, alcohol intake and Smoking and excessive physical exertion are not permitted during this period. Reasonable amount of water intake is permitted. If you are diabetic consult your physician regarding your drug intake instructions.

1.2. 2-hour Postprandial (post Breakfast / lunch) blood sugar: For a 2-hour postprandial test, you need to have your blood collected exactly 2 hours after a regular Breakfast /lunch. Patient can have water and usual medicines post physician consultation regarding the same. PP blood sugar to be collected exactly after 2 hours of food (From the food intake time). The instructions for the same will be given by the Consultant /Physicians /Physician Secretary /SCC (Surgery Scheduling Center). It will be ensured by the Laboratory Enquiry Secretary and counter checked by Technician/ Lab Assistant during interaction with the patients at the time of collection.

1.3. Random blood sugar (RBS): No special preparation is required before having a random blood sugar test. The patient is required to be in non-fasting state; hence blood samples will be collected within 2 hours of last meal intake irrespective of time of the day.

1.4. Lipid profile: Patient should fast for 8-12 hours overnight before blood collection. Fasting should be no food or drink except for water.

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1.5. Plasma Glucose tolerance test (OGTT) - Instructions to patients coming for Oral

Glucose Tolerance test (OGTT) Code: 103

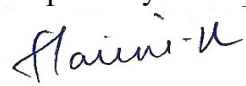

Patient should overnight fast for 12 hours before blood collection. Fasting should be no food or drink except for water 82.5 g monohydrate glucose in 250ml of water glucose load will be given orally post fasting sample collection.


- First blood should be collected in fasting condition.
- 2nd sample -1 hour after glucose load
- 3rd sample- 2hrs after glucose load

1.6. Gestational Diabetes Mellitus (GDM) Instructions to pregnant women coming for OGTT for GDM screening/diagnosis Code:104

Patient should overnight fast for 12 hours before blood collection. Fasting should be no food or drink except for water 82.5g monohydrate glucose in 250ml of water or 100g anhydrous glucose (110g Monohydrate glucose) load will be given orally post fasting sample collection.

- First blood should be collected in fasting condition.
- 2nd sample -1 hour after glucose load
- 3rd sample- 2hrs after glucose load
- 4th samples- 3 hrs after glucose. Load(If 100g load given)

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1.7. Special Biochemical Investigation:

1. Plasma Amino acid Profile (HPLC)
2. Plasma Homocysteine
3. Paper Chromatography for Plasma Ornithine/ any amino acid
4. Paper Chromatography for Plasma Galactose / other sugars.
5. Microalbuminuria/UACR (Early morning sample)

Fasting Specimen: For all the above mentioned test the patients are instructed to have his/her dinner the previous night not later than 9 pm and following that not to eat or drink except water till he/ she reports to the laboratory (fasting period should be between 8 to 12 hours).

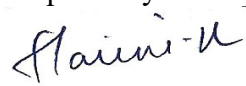

2. Instructions to the patients who have undergone FFA (Fundus Fluorescein Angiography)


In the above mentioned conditions the patients are instructed not to give blood for 24 hours after the FFA for the following test,

1. Angiotensin Converting Enzyme (ACE)
2. Plasma Homocysteine.
3. Microalbumin/UACR
4. Routine urine analysis/ Urine Sugar/Urine LFT

3. Instructions to Patients coming for serum Vitamin A testing:

- Should not take vitamin A tablet,
- Blood should be collected in Fasting Condition (10-12 hours fasting).
- No alcohol intake is allowed.

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4. Instructions to patients coming for Serum Iron, TIBC and Percentage saturation

testing:

Should not take iron medication for 3 days. (Fasting / Random). The test is out sourced.

5. IEM (Inborn Errors of metabolism):

Three containers will be provided for the patient, one of the three containers labeled 'F' (fasting) and the other two containers labeled 'R' (Random). Patient should collect the fasting urine in the 'F' container and the random urine in the 'R' containers. Provide 3 urine containers with pinch of sodium azide.

B. HAEMATOLOGY:



Random blood collection is done for routine hematological test.

C. CYTOGENETICS (INSTRUCTIONS TO CHROMOSOMAL STUDY):

1. Random blood collection is done for above mentioned test.
2. The patient should not be under any chemotherapy, immunosuppressive drugs or affected by immunosuppressive disease and septicemia, which affect mitotic index and sterility of the culture.

D. MICROBIOLOGY:

The patients coming for Microbiological test should not take any antibiotic therapy prior to investigation. Ref: Test master list SNSC/CM/12A, 12B, 12C, 12D, 12E and 12F / Departmental manual for more details.

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E. MOLECULAR DIAGNOSTICS:

GENERAL PROTOCOL FOR SAMPLE COLLECTION (Sterile containers)

Bacteriology and Mycology Investigations (culture and PCR)

- Sterile swabs: Pus, infected wounds, throat, nose, vaginal secretions or other site.
- Sterile wide-mouthed containers for C.S.F, body fluid such as ascitic, pleural, synovial fluids and urine.
- Sterile containers, with screw cap and wide mouth for pus, urine, sputum, feces scrapings from any site & biopsies.
- For blood culture - Automated: BACTEC blood culture system bottles.
- For Anaerobic culture: Specimen inoculated immediately into Robertson Cooked Meat (RCM) media
- Blood samples- EDTA blood for PCR investigations



Viral investigation (PCR)-

- specimen in a sterile viral transport media

F. GENETICS

CYTOGENETICS (INSTRUCTIONS TO CHROMOSOMAL STUDY):

1. Random blood collection is done for above mentioned test.
2. The patient should not be under any chemotherapy, immunosuppressive drugs or affected by immunosuppressive disease and septicemia, which affect mitotic index and sterility of the culture.

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DEPARTMENT OF

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CLINICAL PATHOLOGY

[Haematology & Clinical Pathology-Directory of Services \(Click Here\)](#)

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BIOCHEMISTRY

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SEROLOGY

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DIAGNOSTICS

[Molecular Diagnostic Laboratory-Directory of Services](#) (Click Here)

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MOLECULAR BIOLOGY

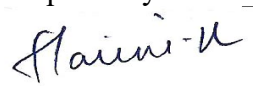

[Genetics & Molecular Biology - Directory of Services](#) (Click Here)

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PACKAGE TESTS


ROUTINE WORK UP				
S. N o.	Test code	Test Code: 301 - ROUTINE PRE-OPERATIVE WORKUP (Without Urea & Creatinine) <u>Charges: Rs.1050/-</u>	Test Code: 302 - ROUTINE PRE-OPERATIVE WORKUP (With Urea & Creatinine) <u>Charges: Rs.1350/-</u>	Test Code: 303 DIABETIC WORK UP (Code 302 + HbA1c) <u>Charges: Rs.1750/-</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)	Haemoglobin (Hb) and Haematocrit (PCV)	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count	Total W.B.C. Count and Differential Count	Total W.B.C. Count and Differential Count
3	005	E.S.R.	E.S.R.	E.S.R.
4	006	Platelet Count	Platelet Count	Platelet Count
5	102	Plasma Glucose (F/ R/ PP)	Plasma Glucose (F/ R/ PP)	Plasma Glucose (F/ R/ PP)
6	018	Urine Routine Analysis	Urine Routine Analysis	Urine Routine Analysis
7	105	--	Urea and Creatinine	Urea and Creatinine
8	151	---	---	HbA1c

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UVEITIS WORKUP				
S. No.	Test code	Test Code: 304 <u>Charges: Rs.15580</u>	Test Code: 304 with Urea & Creatinine <u>Charges: Rs. Rs.15880</u>	Test Code:306 (DIABETIC) <u>Charges: Rs.16280</u>
1	L001	Haemoglobin (Hb) And Haematocrit (PCV)	Haemoglobin (Hb) And Haematocrit (PCV)	Haemoglobin (Hb) And Haematocrit (PCV)
2	L004	Total W.B.C. Count And Differential.Count	Total W.B.C. Count And Differential.Count	Total W.B.C. Count And Differential.Count
3	L005	Erythrocyte Sedimentation Rate	Erythrocyte Sedimentation Rate	Erythrocyte Sedimentation Rate
4	L018	Urine Routine Analysis	Urine Routine Analysis	Urine Routine Analysis
5	L102	Plasma Glucose (F/R/PP)	Plasma Glucose (F/R/PP)	Plasma Glucose (F/R/PP)
6	L105	--	Urea And Creatinine - (Plasma)	Urea And Creatinine - (Plasma)
7	L202	Antibodies To Treponema Pallidum	Antibodies To Treponema Pallidum	Antibodies To Treponema Pallidum
8	L203	Rheumatoid Arthritis (RA) Factor	Rheumatoid Arthritis (RA) Factor	Rheumatoid Arthritis (RA) Factor
9	L206	Antinuclear Antibody	Antinuclear Antibody	Antinuclear Antibody
10	L207	Antibodies To Toxoplasma Gondii:ELISA	Antibodies To Toxoplasma Gondii:ELISA	Antibodies To Toxoplasma Gondii:ELISA
11	L601	Mantoux (Ra/La)	Mantoux (RA/LA)	Mantoux (RA/LA)
12	L009	Blood Smear Study	Blood Smear Study	Blood Smear Study
13	L453	HLA B 27 Typing	HLA B 27 Typing	HLA B 27 Typing
14	L274	Quantiferon-Tb Gold Test	Quantiferon-Tb Gold Test	Quantiferon-Tb Gold Tes
15	L126	Angiotensin Converting Enzyme ACE)-(Serum)	Angiotensin Converting Enzyme (ACE)-(Serum)	Angiotensin Converting Enzyme (ACE)-(Serum)
16	L151	---	---	HbA1c

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VASCULITIS WORKUP				
S. No.	Test code	Test Code: 307 <u><i>Charges: Rs.19600</i></u>	Test Code: 308 with Urea & Creatinine <u><i>Charges: Rs.19900</i></u>	Test Code:309 (DIABETIC) <u><i>Charges: Rs.20300</i></u>
1	001	Haemoglobin (Hb) And Haematocrit (PCV)	Haemoglobin (Hb) And Haematocrit (PCV)	Haemoglobin (Hb) And Haematocrit (PCV)
2	004	Total W.B.C. Count And Differential.Count	Total W.B.C. Count And Differential.Count	Total W.B.C. Count And Differential.Count
3	005	Erythrocyte Sedimentation Rate	Erythrocyte Sedimentation Rate	Erythrocyte Sedimentation Rate
4	007	Reticulocyte Count	Reticulocyte Count	Reticulocyte Count
5	009	Blood Smear Study	Blood Smear Study	Blood Smear Study
6	018	Urine Routine Analysis	Urine Routine Analysis	Urine Routine Analysis
7	102	Plasma Glucose (F/R/PP)	Plasma Glucose (F/R/PP)	Plasma Glucose (F/R/PP)
8	105	--	Urea And Creatinine -(Plasma)	Urea And Creatinine - (Plasma)
9	126	Angiotensin Converting Enzyme (ACE)-(Serum)	Angiotensin Converting Enzyme (ACE)-(Serum)	Angiotensin Converting Enzyme (ACE)-(Serum)
10	202	Antibodies To Treponema Pallidum	Antibodies To Treponema Pallidum	Antibodies To Treponema Pallidum
11	206	Antinuclear Antibody	Antinuclear Antibody	Antinuclear Antibody
12	601	Mantoux (RA/LA)	Mantoux (RA/LA)	Mantoux (RA/LA)
13	234	Antibodies To C ANCA (Pr3)	Antibodies To C ANCA (Pr3)	Antibodies To C ANCA (Pr3)
14	138	Homocysteine	Homocysteine	Homocysteine
15	879	Anti Ds DNA Antibody	Anti Ds DNA Antibody	Anti Ds DNA Antibody
16	165	CCP Antibody	CCP Antibody	CCP Antibody
17	274	Quantiferon-TB Gold Test	Quantiferon-TB Gold Test	Quantiferon-TB Gold Test
18	218	C- Reactive Protein(CRP)	C- Reactive Protein(CRP)	C- Reactive Protein(CRP)
19	312	Basic Coagulation Tests	Basic Coagulation Tests	Basic Coagulation Tests
20	235	Antibodies To P ANCA (MPO)	Antibodies To P ANCA (MPO)	Antibodies To P ANCA (MPO)
21	L151	---	---	HbA1c



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S. No.	Test code	Test Code: 310 COMPLETE HEMOGRAM <i>Charges: Rs.1630</i>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count
3	005	E.S.R.
4	002	Total RBC Count
5	006	Platelet count
6	003	Blood Indices
7	009	Blood Smear Study
8	007	Reticulocyte Count

S. No.	Test code	Test Code: 311 ANEMIA WORK UP <i>Charges: Rs.2320</i>
1	001	Haemoglobin (hb) and Haematocrit (pcv)
2	004	Total WBC. count and differential count
3	005	E.S.R
4	002	Total RBCcount
5	006	Patelet count
6	003	Blood indices
7	009	Blood smear study
8	007	Reticulocyte count
9	012	Sickle cell preparation
10	155	Notion routine analysis
11	020	Plasma/ serum urea and creatinine
12	105	Hemoglobin variants a2/f(hplc))



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S. No.	Test code	Test Code: 312 BASIC COAGULATION TESTS <u>Charges: Rs.1330</u>
1	051	Bleeding Time
2	052	Clotting Time
3	053	Clot Retraction
4	025	Prothrombin Time (PT)
5	026	Activated Partial Thromboplastin Time (APTT)
6	006	Platelet count

S. No.	Test code	Test Code: 313 COAGULATION PROFILE <u>Charges: Rs.3480</u>
1	051	Bleeding Time
2	052	Clotting Time
3	053	Clot Retraction
4	025	Prothrombin Time (PT)
5	026	Activated Partial Thromboplastin Time (APTT)
6	006	Platelet count
7		<u>Euglobulin Lysis Time</u>
8		Fibrinogen Assay
9		Factor XIII
10	015	Blood Group and Rh Typing



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S.No	Test code	Test Code: 314 SARCOIDOSIS WORKUP <u>Charges: Rs.2950</u>
1	005	ESR
2	115	Total Proteins & A.G Ratio
3	126	Angiotensin Converting Enzyme
4	219	Lysozyme Assay
5	601	Mantoux (RA/LA)
6	161	Serum /Plasma Calcium
7	162	Serum /Plasma Inorganic Phosphorus

S. No.	Test code	Test Code: 315 SPECIAL BIOCHEMICAL TESTS <u>Charges: Rs.9970</u>
1	146	Blood Thiobarbituric Acid Reactive Substances
2	141	Serum Vitamin E (HPLC)
3	142	Plasma Vitamin C
4	131	Serum Vitamin A (HPLC)
5	145	Blood Superoxide dismutase
6	144	Blood Glutathione Peroxidase
7	143	Blood Glutathione

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S. No.	Test code	Test Code: 316 TORCHES SCREENING <u>Charges: Rs.8040</u>
1	207	Abs. to Toxoplasma gondii (IgG & IgM)
2	210	Abs. to Rubella Virus (IgG & IgM)
3	211	Abs. to CMV (IgG & IgM)
4	212	Abs. To HSV (IgG & IgM)
5	202	Non Treponemal (RPR) and Treponemal (TPHA)

S. No.	Test code	Test Code: 381 ROUTINE WORK UP (FAST TRACK) <u>Charges: Rs.840</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	002	Total RBC Count
3	004	Total W.B.C. Count and Differential Count
4	006	Platelet Count
5	102	Plasma Glucose (F/R/PP)

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DCR WORKUP				
S. No.	Test code	Test Code: 319 <u><i>Charges: Rs.5590</i></u>	Test Code: 320 with Urea & Creatinine <u><i>Charges: Rs.5890</i></u>	Test Code: 321 (DIABETIC) <u><i>Charges: Rs.6290</i></u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)	Haemoglobin (Hb) and Haematocrit (PCV)	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count	Total W.B.C. Count and Differential Count	Total W.B.C. Count and Differential Count
3	005	E.S.R.	E.S.R.	E.S.R.
4	102	Plasma Glucose (F/ R/ PP)	Plasma Glucose (F/ R/ PP)	Plasma Glucose (F/ R/ PP)
5	018	Urine Routine Analysis	Urine Routine Analysis	Urine Routine Analysis
6	105	--	Urea and Creatinine	Urea and Creatinine
7	312	<u>Basic Coagulation Tests:</u> Bleeding Time Clotting Time Clot Retraction	<u>Basic Coagulation Tests:</u> Bleeding Time Clotting Time Clot Retraction	<u>Basic Coagulation Tests:</u> Bleeding Time Clotting Time Clot Retraction
	025	Prothrombin Time (PT)	Prothrombin Time (PT)	Prothrombin Time (PT)
	026	Activated Partial Thromboplastin Time (APTT)	Activated Partial Thromboplastin (APTT)	Activated Partial Thromboplastin Time (APTT)
	006	Platelet count	Platelet count	Platelet count
8	015	Blood Group and Rh Typing	Blood Group and Rh Typing	Blood Group and Rh Typing
9	317	HbsAg, Abs to HCV, RPR and TPHA	HbsAg, Abs to HCV, RPR and TPHA	HbsAg, Abs to HCV, RPR and TPHA
10	L151	---	---	HbA1c



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S. No	Test code	Test Code: 382 CHEMO PACKAGE <u>Charges: Rs.3390</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count
3	005	E.S.R.
4	006	Platelet count
5	018	Urine Routine Analysis
6	102	Plasma Glucose (F/ R/ PP)
7	105	Urea and Creatinine
8	109	Electrolytes (NA, K,CL,HCO)
9	114	Bilirubin (Total and Direct)
10	116	Alkaline Phosphatase
11	117	ALT (SGPT)
12	118	AST (SGOT)



S. No	Test code	Test Code: 383, CBC PACKAGE <u>Charges: Rs.1210</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	002	Total RBC Count
3	003	Blood Indices
4	004	Total W.B.C. Count and Differential Count
5	006	Platelet count
6	007	Reticulocyte Count

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S. No	Test code	Test Code: 384, CRVO PACKAGE <u>Charges: Rs.5350</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	002	Total RBC Count
3	003	Blood Indices
4	004	Total W.B.C. Count and Differential Count
5	006	Platelet count
6	025	Prothrombin Time (PT)
7	026	Activated Partial Thromboplastin Time (APTT)
8	105	Urea and Creatinine
9	123	Lipid Profile
10	151	HbA1c
11	218	C-Reactive Protein
12	138	Serum Homocysteine

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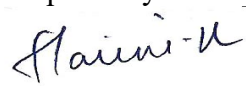

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NON GRANULOMATOUS WORK UP

S. No.	Test code	Test Code: 388 <u>Charges: Rs.8710</u>	Test Code: 389 with Urea & Creatinine <u>Charges: Rs.9010</u>	Test Code:390 <u>Charges: Rs.9410</u>
1	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
2	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT
3	005	ERYTHROCYTE SEDIMENTATION RATE	ERYTHROCYTE SEDIMENTATION RATE	ERYTHROCYTE SEDIMENTATION RATE
4	018	URINE ROUTINE ANALYSIS	URINE ROUTINE ANALYSIS	URINE ROUTINE ANALYSIS
5	102	PLASMA GLUCOSE (F/R/PP)	PLASMA GLUCOSE (F/R/PP)	PLASMA GLUCOSE (F/R/PP)
6	105	--	UREA AND CREATININE -(PLASMA)	UREA AND CREATININE -(PLASMA)
7	202	ANTIBODIES TO TREPONEMA PALLIDUM	ANTIBODIES TO TREPONEMA PALLIDUM	ANTIBODIES TO TREPONEMA PALLIDUM
8	203	RHEUMATOID ARTHRITIS (RA) FACTOR	RHEUMATOID ARTHRITIS (RA) FACTOR	RHEUMATOID ARTHRITIS (RA) FACTOR
9	206	ANTINUCLEAR ANTIBODY	ANTINUCLEAR ANTIBODY	ANTINUCLEAR ANTIBODY
10	601	MANTOUX (RA/LA)	MANTOUX (RA/LA)	MANTOUX (RA/LA)
11	453	HLA B 27 Typing	HLA B 27 Typing	HLA B 27 Typing
12	151	---	---	HbA1c

GRANULOMATOUS WORK UP

S. No.	Test code	Test Code: 385 <u>Charges: Rs.8940</u>	Test Code: 386 with Urea & Creatinine <u>Charges: Rs.9240</u>	Test Code:387 (DIABETIC) <u>Charges: Rs.9640</u>
1	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
2	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT
3	005	ERYTHROCYTE SEDIMENTATION RATE	ERYTHROCYTE SEDIMENTATION RATE	ERYTHROCYTE SEDIMENTATION RATE
4	018	URINE ROUTINE ANALYSIS	URINE ROUTINE ANALYSIS	URINE ROUTINE ANALYSIS
5	102	PLASMA GLUCOSE (F/R/PP)	PLASMA GLUCOSE (F/R/PP)	PLASMA GLUCOSE (F/R/PP)
6	105	--	UREA AND CREATININE -(PLASMA)	UREA AND CREATININE -(PLASMA)
7	202	ANTIBODIES TO TREPONEMA PALLIDUM	ANTIBODIES TO TREPONEMA PALLIDUM	ANTIBODIES TO TREPONEMA PALLIDUM
8	207	ANTIBODIES TO TOXOPLASMA GONDII:ELISA	ANTIBODIES TO TOXOPLASMA GONDII:ELISA	ANTIBODIES TO TOXOPLASMA GONDII:ELISA
9	601	MANTOUX (RA/LA)	MANTOUX (RA/LA)	MANTOUX (RA/LA)
10	009	BLOOD SMEAR STUDY	BLOOD SMEAR STUDY	BLOOD SMEAR STUDY
11	274	QUANTIFERON-TB GOLD TEST	QUANTIFERON-TB GOLD TEST	QUANTIFERON-TB GOLD TEST
12	126	ANGIOTENSIN CONVERTING ENZYME (ACE)-(SERUM)	ANGIOTENSIN CONVERTING ENZYME (ACE)-(SERUM)	ANGIOTENSIN CONVERTING ENZYME (ACE)-(SERUM)
13	151	---	---	HbA1c

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S. No	Test code	Test Code: 391 STEROID + IMT CLEARANCE <u>Charges: Rs.4250</u>
1	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
2	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT
3	005	ERYTHROCYTE SEDIMENTATION RATE
4	018	URINE ROUTINE ANALYSIS
5	102	PLASMA GLUCOSE (F/R/PP)
6	105	UREA AND CREATININE -(PLASMA)
7	006	PLATELET COUNT
8	113	LIVER FUNCTION TESTS-(SERUM/PLASMA)
9	123	Lipid Profile
10	151	HbA1c

S. No	Test code	Test Code: 392 SCLERITIS WORK UP <u>Charges: Rs.9140</u>
1	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
2	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL.COUNT
3	005	ERYTHROCYTE SEDIMENTATION RATE
4	018	URINE ROUTINE ANALYSIS
5	102	PLASMA GLUCOSE (F/R/PP)
6	105	UREA AND CREATININE -(PLASMA)
7	203	RHEUMATOID ARTHRITIS (RA) FACTOR
8	206	ANTINUCLEAR ANTIBODY
9	234	ANTIBODIES TO CANCA (PR3)
10	235	ANTIBODIES TO PANCA (MPO)
11	601	MANTOUX (RA/LA)
12	202	ANTIBODIES TO TREPONEMA PALLIDUM
13	218	C- REACTIVE PROTEIN(CRP)

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S. No	Test code	Test Code: 393 CKD PACKAGE <u>Charges: Rs.4020</u>
1	102	PLASMA GLUCOSE (F/R/PP)
2	105	UREA AND CREATININE -(PLASMA)
3	108	ELECTROLYTES
4	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
5	002	TOTAL RBC COUNT
6	003	BLOOD INDICES
7	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL COUNT
8	006	PLATELET COUNT
9	007	RETICULOCYTE COUNT
10	158	BICARBONATE
11	025	PROTHROMBIN TIME (PT)
12	026	ACTIVATED PARTIAL THROMBOPLASTIN TIME (APTT)
13	151	HBA1C
14	018	URINE ROUTINE ANALYSIS

S. No	Test code	Test Code: 394 THROMBOPHILIA PACKAGE <u>Charges: Rs.27350</u>
1	001	HAEMOGLOBIN (HB) AND HAEMATOCRIT (PCV)
2	002	TOTAL RBC COUNT
3	003	BLOOD INDICES
4	004	TOTAL W.B.C. COUNT AND DIFFERENTIAL COUNT
5	006	PLATELET COUNT
6	007	RETICULOCYTE COUNT
7	958	THROMBOPHILIA PANEL
8	959	FACTOR VIII ACTIVITY
9	962	FACTOR V LEIDEN MUTATION
10	874	D-DIMER
11	878	HB VARIANT STUDY

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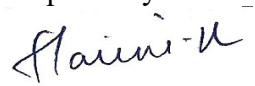

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S. No.	Test code	Test Code: 396 NEEDLE STICK INJURY PACKAGE-2 <u>Charges: Rs.4080</u>
1	220	Abs. To HIV 1 and HIV 2
2	222	HBs Ag
3	223	Abs. to HCV
4	260	Abs to HBs Ag
S. No.	Test code	Test Code: 395 NEEDLE STICK INJURY PACKAGE-1 <u>Charges: Rs.3200</u>
1	220	Abs. To HIV 1 and HIV 2
2	222	HBs Ag
3	223	Abs. to HCV

S. No.	Test code	Test Code: 326 EUA + CHEMO PACKAGE-1 <u>Charges: Rs.1450</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count
3	006	Platelet Count
4	102	Plasma Glucose (F/ R/ PP)
5	117	ALT (SGPT)
6	105	Urea and Creatinine
7	154	GAMMA GT (GGTP)

S. No.	Test code	Test Code: 325 EUA PACKAGE <u>Charges: Rs.720</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count
3	006	Platelet Count
4	102	Plasma Glucose (F/ R/ PP)

S. No.	Test code	Test Code: 327 EUA + CHEMO PACKAGE-2 <u>Charges: Rs.2590</u>
1	001	Haemoglobin (Hb) and Haematocrit (PCV)
2	004	Total W.B.C. Count and Differential Count
3	312	Basic Coagulation Tests
4	102	Plasma Glucose (F/ R/ PP)
5	117	ALT (SGPT)
6	105	Urea and Creatinine
7	154	GAMMA GT (GGTP)

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S. No.	Test code	Test Code: 159 CHEM 8 PANEL (POCT) Charges: Rs.1300
1	159	Haemoglobin (Hb) and Haematocrit (PCV) Glucose (F/ R/ PP) Urea and Creatinine Sodium Potassium Chloride Total Carbon Dioxide Ionised Calcium Anion Gap

S. No.	Test code	Test Code:328 Pre operative package- STAT Charges: Rs.2010
1	159	CHEM 8 PANEL (POCT)
2	004	Total W.B.C. Count and Differential Count
3	005	E.S.R.
4	006	Platelet count
5	018	Urine Routine Analysis



S. No.	Test code	Test Code:329 Pre operative diabetic package- STAT Charges: Rs.2410
1	159	CHEM 8 PANEL (POCT)
2	004	Total W.B.C. Count and Differential Count
3	005	E.S.R.
4	006	Platelet count
5	018	Urine Routine Analysis
6	151	HbA1c

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TEST MASTER LIST
OUT SOURCE TESTS

S NO	Code NO	Name of the test	Lister Price (Rs.)	<p style="text-align: center;">Contact Main Lab</p> <p style="text-align: center;">Board no 04428271616</p> <p style="text-align: center;">Ext: 1101 for</p> <p style="text-align: center;">Sample Collection</p> <p style="text-align: center;">and</p> <p style="text-align: center;">Turn Around Time</p> <p style="text-align: center;">for</p> <p style="text-align: center;">Test Results</p>
1	808	ANTI PHOSPHOLIPID ANTIBODY	1050	
2	809	CD4 COUNTS	1315	
3	811	PROTEIN C (ACTIVITY)	4725	
4	812	PROTEIN S (ACTIVITY)	4725	
5	813	VITAMIN B12	1200	
6	816	FOLATE RBC	2365	
7	820	URIC ACID	220	
8	832	ANTI THROMBIN III ACTIVITY	4675	
9	834	CORTISOL	710	
10	836	DENGUE NSI ANTIGEN	1000	
11	837	FERRITIN (SERUM/CMIA)	860	
12	845	SERUM IRON, TIBC AND PERCENTAGE SATURATION	1250	
13				
14	858	PROTEIN, ELECTROPHORESIS	980	
15	860	IGE TOTAL ANTIBODY	1030	
16	862	PROCALCITONIN (PCT)	2990	
17	865	LDH	485	
18	866	WEIL FELIX (weil felix test for rickettsia serum)	1110	
19	867	MAGNESIUM	590	
	869	CEA	840	
20	870	IGG4 SUB CLASS	7200	

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**SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY,
SANKARA NETHRALAYA
(UNIT OF MEDICAL RESEARCH FOUNDATION)**

DIRECTORY OF SERVICES

2025

21	872	FSH-LH-PROLACTIN PROFILE	1450
22	873	TPO ANTIBODY	1290
23	874	D DIMER	1390
24	875	AMYLASE	630
25	878	HB VARIANT ASSAY	1060
26	880	SERUM ACID PHOSPHOTASE	325
27	881	SERUM ESTRADIOL	700
28	882	TESTOSTERONE FREE	1930
29	883	TESTOSTERONE TOTAL	750
30	884	PROLACTIN	590
31	885	AMH-ANTI MULLERIAN HORMONE	2150
32	886	PSA-FREE	1105
33	887	PSA-TOTAL	810
34	889	SARS COV2 NUCLEOCAPSID ANTIBODY QUALITATIVE (NOT FOR VACCINATED)	735
35	928	ACHR ANTIBODIES ACETYL CHOLINE RECEPTOR ANTIBODIES SERUM	3650
36	929	MUSK ANTIBODY MYASTHENIA GRAVIS SERUM	6825
37	933	DHEAS- DEHYDROEPIANDROSTENEDIONE SULPHATE SERUM	1150
38	934	RETINAL BINDING PROTIEN	2800
39	935	PARA THYROID HORMONE	2995
40	938	SCRUB THYPHUS IGM-SERUM	1155
41	939	AFP-ALPHA FETO PROTEIN- CLIA- SERUM	970
42	940	CA-125 SERUM	1310
43	941	INHIBIN A SERUM	1260
44	942	INHIBIN B SERUM	2415
45	944	PLASMA VORICONAZOLE	6155

Contact Main Lab

Board no 04428271616

Ext: 1101 for



Sample Collection

and

Turn Around Time



for

Test Results

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46	945	TSH RECEPTOR ANTIBODY LATS, TSI-SERUM	4600	Contact Main Lab Board no 04428271616 Ext: 1101 for Sample Collection and Turn Around Time for Test Results
47	949	LUPUS ANTICOAGULANTS (LAC) PROFILE	2350	
48	950	CD19	2890	
49	951	CD20	2520	
50	952	LYMEBORRELIA BURGDORFERI IGG ANTIBODIES BY EIA - SERUM	1945	
51	953	LYMEBORRELIA BURGDORFERI IGM ANTIBODIES BY EIA - SERUM	1785	
52	954	CPK TOTAL SERUM	430	
53	955	LIPASE SERUM	640	
54	956	FIBRINOGEN ASSAY	1105	
55	959	FACTOR VIII ACTIVITY	2515	
56	960	FACTOR V LEIDEN MUTATION	6150	
57	961	BILE ACIDS-TOTAL BIOCHEMICAL	1785	
58	962	CARDIOLIPIN ANTIBODY ACL-IGG ANTIBODY	1040	
59	963	CARDIOLIPIN ANTIBODY ACL-IGM ANTIBODY	1040	
60	967	OCCULT BLOOD - STOOL	160	
61	Others	MICROALBUMINURIA (UACR)	620	
62	OTHER TESTS :	Refer Directory of Services Metropolis Health Care (Soft copy available as excel sheet/link for the same available at the system desktop of Collection area / Secretary /Lab enquiry) -Ref: Record for Outsource tests list (R/ SNSC/ ML/ OSTL)		

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**SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY,
SANKARA NETHRALAYA
(UNIT OF MEDICAL RESEARCH FOUNDATION)**

2025

DIRECTORY OF SERVICES

DEPARTMENT OF HAEMATOLOGY & CLINICAL PATHOLOGY



Dr.S.Krihnakumar MD
Professor, Histopathology & Cytopathology,
Cl.Hematology & Cl.Pathology




Dr.Suman.H.Kalantri MD
Cl.Hematology & Cl. Pathology



LOCATION OF DEPARTMENT OF HAEMATOLOGY & CLINICAL PATHOLOGY

SN Main Campus, Venugopal Block (VG Block) 1st Floor

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Prepared by: Dr.Suman.H.Kalantri MD Assistant Professor, Cl.Hematology & Cl.Pathology		Approved & Issued by: Dr.S.Krihnakumar, MD HOD, Cl.Hematology & Cl.Pathology	

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2.	Test Master List / Turn Around Time	3 - 7
3.	Acceptance and Rejection Criteria for Collection Area, Hematology & Clinical Pathology	8 - 9

GENERAL INSTRUCTION ON SAMPLE COLLECTION

HAEMATOLOGY:

Random blood collection is done for routine hematological test.

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	SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA (UNIT OF MEDICAL RESEARCH FOUNDATION)	2025
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TEST MASTER LIST

DEPARTMENT OF HAEMATOLOGY

S No	Code No	Name of the test	**Turn around time (TAT)	Specimen required	Anticoagulant (vacutainer tubes)	Storage time/ Temperature	Tariff
1	001	Hb and PCV	2 Hours	2mL blood 1 mL (<10 yrs)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	190
2	002	Total RBC count	2 Hours	2 mL blood 1 mL (<10 yrs)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	120
3	003	Blood Indices	2 Hours	2ml blood 1ml (<10 yrs)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	200
4	004	TC and DC	2 Hours	2mL blood 1 mL (<10 yrs)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	190
5	005	ESR	2 Hours	3mL blood	5.4mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	120
6	006	Platelet count	2 Hours	2mL blood 1 mL (<10 yrs) (Direct smear should be taken as and when the request raised from the Heamatology department for the clinical correlation).	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	190
7	007	Reticulocyte count	2 Hours	2mL blood 1 mL (<10 yrs)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	320
8	009	Blood smear study	2 Hours	2mL blood 1 mL (<10 years)-1 Smear	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	300
9	010	Blood smear parasite	2 Hours	2ml blood in EDTA and 2.7ml blood of 3.2% citrated blood, 1 wet mount, 2 thin and thick smears (Ref SNSC/CM/3.1)	3.2% citrated blood (Blue), 3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	300
10	012	Sickle cell preparation	2 Hours	2mL blood 1 mL (<10 years)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8 ⁰ C	170

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11	015	Blood group and Rh typing	2 Hours	2mL blood 1 mL (<10 years)	3.6mg K2 EDTA (Lavender)	Upto 24 hours/ 2-8°C	200
12	025	Prothrombin time (PT)	2 Hours	2.7mL blood 1 mL (<10 years)	3.2% citrated blood (Light Blue)	Upto 24 hours/ 2-8°C	400
13	026	Partial thromboplastin time (PTT)	2 Hours	2.7mL blood 1 mL (<10 years)	3.2% citrated blood (Light Blue)	Upto 4 hours/ 2-8°C	400
14	051	*Bleeding time	2 Hours	-	-	-	100
15	052	*Clotting time	2 Hours	3 mL blood	Plain glass tube	Discarded on the same day /37°C water bath	100
16	053	*Clot retraction	2 Hours	4 mL blood	Plain (Red)	Upto 24 hours/ 2-8°C *Note: If the Clot retraction is poor, it is kept in the water bath for 24 hours.	140
17	56/313	*Factor XIII	24 hours	2.7mL blood	3.2% citrated blood (Light Blue)	Upto 24 hours/ 2-8°C	230
18	57/313	*Euglobulin lysis test	24 hours	2.7mL blood	3.2% citrated blood (Light Blue)	Upto 24 hours/ 2-8°C	380
19	027	Blood Collection for Cross Matching (Ref: SNSC/CM/9)	24 hours	2 mL Blood & 4 mL Blood	3.6mg K2 EDTA (Lavender) & Plain (Red)	Upto 24 hours/ 2-8°C	1340
20	063	* CSF- Total WBC Count and RBC Count	2 Hours	0.5-1.0 mL CSF	---	Sample should be given to the clinical biochemistry department after the testing	200
21	064	* PT/INR-POCT	15 Minutes	1 mL Whole Blood	---	Upto 24 hours/ 2-8°C	1000


In case of Baby Collection/ Patient for whom blood collection is difficult, blood is collected in 1 ml K2 EDTA Microtainers using Syringe and needle. **Collect 3mL 5.4mg K2 EDTA sample for Package tests which include ESR testing.**

Information to the Patients:

- All samples for routine hematological tests, random blood collection is being done.
- Turnaround time for Package Tests: 2 hours

*** Test which are not under Scope of NABL.**

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**** TURN AROUND TIME (TAT) APPLICABLE ONLY IF MARKED AS URGENT IN LABORATORY INVESTIGATION REQUEST ONLINE**

TEST WHICH IS MARKED REGULAR WILL BE REPORTED WITHIN 3 HOURS

SNSC Collection centres :Pycrofts Road - 3 hours

SN RA Puram - 6 hours

CUSSN - 6 hours


TEST MASTER LIST

DEPARTMENT OF CLINICAL PATHOLOGY

*** Test which are not under Scope of NABL.**

S No	Code No	Name of the test	**Turn around time (TAT)	Specimen required	Anticoagulant (vacutainer tubes)	Storage/ Temperature	Tariff
1	018	Urine routine analysis Color ,Clarity,pH,SG ,Glucose,Protein Ketone,Leucocyte, Nitrite,Bilirubin Urobilinogen,Blood, Ascorbic acid	2 hours	5-10mL	-	Discarded on the same day/ Room temp	210
2.	020	Motion routine analysis	2hours	at least 4ml (4 cm3)	-	Discarded on the same day/ Room temp	220
3.	028	Urine – Sugar, Protein, Ketones	1 hour	5-10mL Urine sample	-	Discarded on the same day/ Room temp	70
4.	029	Urine – LFT	2 hours	5-10mL ml Urine sample	-	Discarded on the same day/ Room temp	100
5.	031	Stool Ocult Blood	2hours	at least 4ml (4 cm3)	-	Discarded on the same day/ Room temp	160

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	SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA (UNIT OF MEDICAL RESEARCH FOUNDATION)	2025
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**** TURN AROUND TIME (TAT) APPLICABLE ONLY IF MARKED AS URGENT IN LABORATORY INVESTIGATION REQUEST ONLINE**

TEST WHICH IS MARKED REGULAR WILL BE REPORTED WITHIN 3 HOURS

SNSC Collection centres :Pycrofts Road - 3 hours

SN RA Puram - 6 hours

CUSSN - 6 hours


Mantoux test done in SN Main, JKCN, CUSSN & SN RA Puram Centers

*** Test which are not under Scope of NABL.**

S N O	Code NO	Name of the test	**Turn around time (TAT)	Specimen required	Anticoagulant (vacutainer tubes)	Storage/ Temperature	Tariff
1.	601	* Mantoux test	48 hours reporting time (TAT)	-	Inject PPD (5 TU / 0.1 ml) intradermally	Read the result after 48 hrs within 72 hrs Mantoux test reading form to be given for the patient with explanation of the same	210
2.	019	*Bence Jones Protein	2 hours	10-15mL	-	Discarded on the same day/ Room temp	200

Patient to be sent to SNSC Clinical Laboratory (SN MAIN LAB) for the following tests

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	SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA (UNIT OF MEDICAL RESEARCH FOUNDATION)	2025
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Requests for the tests received in collection centers should be referred to SN MAIN LAB for Collection

S.No	Code No.	Name of Test
1.	010	Blood Smear Parasite
2.	025	Prothrombin Time (PT)
3.	026	Partial Thromboplastin Time(PTT)
4.	125	Blood Pyruvate and Lactate
5.	307	Vasculitis Workup
6.	308	Vasculitis Workup with Urea & Creatinine
7.	309	Vasculitis Workup Diabetic
8.	312	Basic Coagulation Tests
9.	313	Coagulation Profile
10.	319	DCR Work-Up
11.	320	DCR Work-Up with Urea & Creatinine
12.	321	DCR Work-Up (Diabetic)
13.	384	CRVO Package
14.	385	Granulomatous Work Up
15.	386	Granulomatous Work Up with Urea & Creatinine
16.	387	Granulomatous Work Up Diabetic
17.	388	Non Granulomatous Work Up
18.	389	Non Granulomatous Work Up with Urea & Creatinine
19.	390	Non Granulomatous Work Up Diabetic
20.	393	CKD Package
21.	394	Thrombophilia Package
NO SPECIAL TESTS TO BE COLLECTED		


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ACCEPTANCE AND REJECTION CRITERIA FOR COLLECTION AREA,
HEMATOLOGY & CLINICAL PATHOLOGY

S.NO	ACCEPTANCE CRITERIA	REJECTION CRITERIA
1.	Collection Area - Properly labeled specimens. 1. Full patient name and Date of birth 2. Patient identification number. 3. Date and time of collection 4. Phlebotomist signature.	Collection Area – improperly labeled 1. Specimens not labeled 2. Specimens labeled with the incorrect patient identification 3. Specimens, that do not match the patient information on the laboratory requisition.
2.	Collection Area – Correct Specimen Collection 1. Specimens collection with proper Preservative or anticoagulant. 2. Correct volume 3. Specimen collection without any hemolysis, lipemic or particulate matter 4. Specimen without any contamination	Collection Area – Improper Collection. 1. Specimens collected with the improper preservative or anticoagulant 2. Quantity of specimens insufficient to perform testing 3. Specimens which are hemolyzed, lipemic or contain particulate matter. Individual protocol must be reviewed. 4. Specimens which are obviously or subsequently prove to be contaminated.
3.	Transportation of Specimens in 3 tier packing system.	Delay in Transit to the laboratory: 1. Serum Specimens not separated from the clot and left at room temperature or refrigerated for a time, which exceeds the protocol for, the test requested. 2. Urine specimens left at room temperature for more than two hours. 3. Coagulation specimens more than four hours except for PT which is up to 24 hours. 4. Urine specimens for culture left at room temperature for more than two hours or refrigerated for more than 24 h .
4.	Specimens collected by proper veni puncture site.	Inappropriate specimens: 1. Specimens collected from intravenous tubing. 2. Specimens collected from heparin locks.

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5.	Specimen transportation with appropriate packing.	Specimens inappropriately transported to the laboratory: <ol style="list-style-type: none"> 1. Specimens not in compliance with universal precaution, (e.g. Not Bagged) 2. Specimens leaking or grossly contaminated on the exterior portion of container. Note: Irretrievable specimens, such as Cerebral spinal fluid (CSF), operating room specimens, cord blood, biopsy or specimens taken prior to antibiotic therapy will not be discarded.
6.	Hematology : EDTA samples - Properly mixed without any clot.	A. Inadequate Specimens: <ol style="list-style-type: none"> 1. Lavender vacutainers for hematology analysis with less than 2ml/1ml 2. Blue vacutainer for Coagulation studies which are less than 2.7ml/1ml. B. Clotted Specimens: The presence of clots in the vacutainers upon visual inspection. C. Hemolysed samples: <ol style="list-style-type: none"> 1. Grossly haemolysed samples(EDTA) giving inaccurate results or unreadable blood films should be rejected 2. Hemolysed Citrate plasma should be rejected D. Aged specimens: <ol style="list-style-type: none"> 1. EDTA samples more than 24 hours old are rejected 2. Coagulation specimens more than 4 hours except for PT which is up to 24 hours. E. Test is not offered in Hematology laboratory.
7.	Clinical Pathology: <ol style="list-style-type: none"> 1. Urine - Sufficient quantity in clean non-sterile Container brought within 1 hour of Collection. 2. Stool -Sufficient quantity in clean non-sterile Container 3. Stool Samples brought within 1 hour of Collection. 	<ol style="list-style-type: none"> 1. Any Sample (Urine /Motion) brought after 1 h of Collection. 2. Insufficient Quantity. 3. Specimen collected within 24 hrs after performing fundus fluorescence angiogram. 4. Gross contamination with vaginal/anal secretions If the samples are processed in known case of menstrual or other unsatisfactory conditions or contaminations then the final report shall mention the nature of problem.

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**SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY,
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(UNIT OF MEDICAL RESEARCH FOUNDATION)**

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DIRECTORY OF SERVICES

DEPARTMENT OF CLINICAL & SPECIAL BIOCHEMISTRY



Dr.N.Angavarkanni Ph.D



**Director : Laboratory services
Director : Biochemistry**




Dr.R.Harini MD

**Quality Manager &
Associate Prof. Biochemistry**



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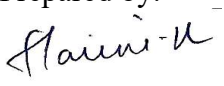
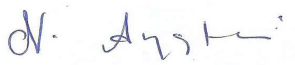
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LOCATION OF DEPARTMENT OF CLINICAL & SPECIAL BIOCHEMISTRY

- **Clinical Biochemistry:** SN Main Campus, Venugopal Block (VG Block) 1st Floor
- **Special Clinical Biochemistry:** SN Main Campus, KNBIRVO Building 5th Floor

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GENERAL INSTRUCTION ON SAMPLE COLLECTION

CLINICAL BIOCHEMISTRY:

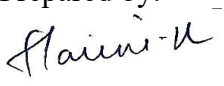
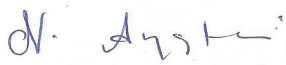
1. Instructions for routine blood investigation: Clinical Biochemistry:


1.1. Fasting blood sugar (FBS): For a fasting blood sugar test, do not eat or drink anything other than water for at least 8 to 12 hours over night before the blood sample is taken. Tea, coffee, alcohol intake and Smoking and excessive physical exertion are not permitted during this period. Reasonable amount of water intake is permitted. If you are diabetic consult your physician regarding your drug intake instructions.

1.2. 2-hour Postprandial (post Breakfast / lunch) blood sugar: For a 2-hour postprandial test, you need to have your blood collected exactly 2 hours after a regular Breakfast /lunch. Patient can have water and usual medicines post physician consultation regarding the same. PP blood sugar to be collected exactly after 2 hours of food (From the food intake time). The instructions for the same will be given by the Consultant / Physicians /Physician Secretary /SCC (Surgery Scheduling Center). It will be ensured by the Laboratory Enquiry Secretary and counter checked by Technician/ Lab Assistant during interaction with the patients at the time of collection.

1.3. Random blood sugar (RBS): No special preparation is required before having a random blood sugar test. The patient is required to be in non-fasting state; hence blood samples will be collected within 2 hours of last meal intake irrespective of time of the day.

1.4. Lipid profile: Patient should fast for 8-12 hours overnight before blood collection. Fasting should be no food or drink except for water.

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1.5. Plasma Glucose tolerance test (OGTT)- Instructions to patients coming for Oral Glucose Tolerance test (OGTT) Code:103

Patient should overnight fast for 12 hours before blood collection. Fasting should be no food or drink except for water 82.5g monohydrate glucose in 250ml of water glucose load will be given orally post fasting sample collection.

- First blood should be collected in fasting condition.
- 2nd sample -1 hour after glucose load
- 3rd sample- 2hrs after glucose load

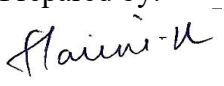
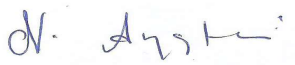
1.6. Gestational Diabetes Mellitus (GDM) Instructions to pregnant women coming for OGTT for GDM screening/diagnosis Code:104


Patient should overnight fast for 12 hours before blood collection. Fasting should be no food or drink except for water 82.5g monohydrate glucose in 250ml of water or 100g anhydrous glucose (110 g Monohydrate glucose) load will be given orally post fasting sample collection.

- First blood should be collected in fasting condition.
- 2nd sample -1 hour after glucose load
- 3rd sample- 2hrs after glucose load
- 4th samples- 3 hrs after glucose.load(If 100g load given) Ref: SNSC/CC/3D

1.7. Special Biochemical Investigation:

1. Plasma Amino acid Profile (HPLC)
2. Plasma Homocysteine
3. Paper Chromatography for Plasma Ornithine/ any amino acid
4. Paper Chromatography for Plasma Galactose / other sugars.
5. Microalbuminuria/UACR (Early morning sample)

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Fasting Specimen: For all the above mentioned test the patients are instructed to have his/her dinner the previous night not later than 9 pm and following that not to eat or drink except water till he/ she reports to the laboratory (fasting period should be between 8 to 12 hours).

2. Instructions to the patients who have undergone FFA (Fundus Fluorescein

Angiography)

In the above mentioned conditions the patients are instructed not to give blood for 24 hours after the FFA for the following test,

1. Angiotensin Converting Enzyme (ACE)
2. Plasma Homocysteine.
3. Microalbumin/UACR
4. Routine urine analysis/ Urine Sugar/Urine LFT

3. Instructions to Patients coming for serum Vitamin A testing:

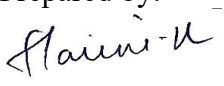
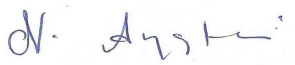
Should not take vitamin A tablet, Blood should be collected in Fasting Condition (10-12 hours fasting) or Random. No alcohol intake is allowed.


4. Instructions to patients coming for Serum Iron, TIBC and Percentage saturation testing:

Should not take iron medication for 3 days. (Fasting / Random). The test is out sourced.

5. IEM (Inborn Errors of metabolism):

Three containers will be provided for the patient, one of the three containers labeled 'F' (fasting) and the other two containers labeled 'R' (Random). Patient should collect the fasting urine in the 'F' container and the random urine in the 'R' containers. Provide 3 urine containers with pinch of sodium azide.

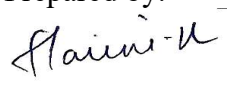
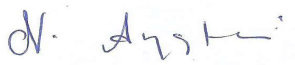
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TEST MASTER LIST

DEPARTMENT OF CLINICAL BIOCHEMISTRY

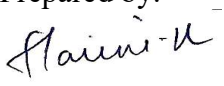
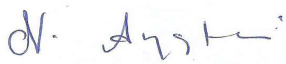
S. No	Lab/ Ref/ Code	Name of the test	Specimen required Blood - volume	Anti coagulants (vacutainer/U rine)	**Reportable interval (TAT)	Storage of examined specimen / temp.	Information to the patients	Tariff
1.	101	Blood Glucose (Glucometer) F/R/PP	Capillary blood	NA	1 hour 2 hours (in package)	NA	F- Fasting- - no caloric intake for at least 10-12 hrs. R- Random- any time PP- 2 hours Postprandial Blood should be collected 2 hrs after intake of food.	150
2.	102	Plasma Glucose F/R/PP	2 ml + Urine to be collected	Sodium Fluoride + Na ₂ EDTA	1 hour 2 hours (in package)	24 hours /2-8°C	F- Fasting- - no caloric intake for at least 10-12 hrs. R- Random- any time PP- 2 hours Postprandial Blood should be collected 2 hrs after intake of food.	150

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3.	103	Oral Glucose Tolerance test (OGTT) Plasma glucose-3 samples	2 ml + Urine to be collected	Sodium Fluoride + Na ₂ EDTA Urine container (No preservative)	4 hours	24 hours / 2-8°C	First sample should be collected in fasting condition. 10 to 12 hrs 2 nd sample -1 hour after 82.5g glucose load. 3 rd sample- 2hrs after 82.5g glucose intake.	570
4.	104	Gestational Diabetes Mellitus (GDM) Plasma glucose-3/4 Samples(depending on glucose load)	2ml + Urine to be collected.	Sodium Fluoride + Na ₂ EDTA Urine container (No preservative)	5 hours	24 hours / 2-8°C	First sample should be collected in fasting condition. 10-12 hours 2 nd sample -1 hour after 82.5g glucose load. 3 rd sample- 2hrs after 82.5 g glucose intake. 4 th samples- 3 hrs after glucose. Intake. (if 100g load of anhydrous glucose)	570

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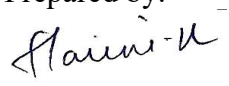



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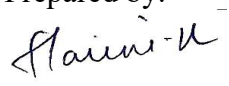
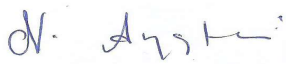
5.	105	Plasma/Serum Urea Creatinine	4 ml	Heparin Plasma/ EDTA plasma (Cobas)/plain	1 hour 2 hours (in a package)	24 hours /- 2-8°C	Random	300
6.	106	Serum/plasma Cholesterol	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Fasting/Rand om	210
7.	108	Plasma/serum Sodium and Potassium	4 ml	Heparin/Plain	1 hour	24 hours / 2-8°C	Random	550
8.	113	Serum/plasma LFT Bilirubin Total/Direct Total Protein & albumin, ALT, AST, ALP, GGT.	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Random	1440
9.	114	Serum/plasma Bilirubin (Total/Direct)	4 ml	Plain/Heparin	2 hours	24 hours /- 2-8°C	Random	320
10.	115	Serum / plasma Total Protein and albumin	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Random	250
11.	116	Serum / plasma Alkaline Phosphatase	4 ml	Plain/ Heparin	2 hours	24 hours / 2-8°C	Random	250
12.	117	Serum/ plasma Alanine amino transferase	4 ml	Plain/ Heparin	2 hours	24 hours / 2-8°C	Random	250
13.	118	Serum / plasma Aspartate amino transferase	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Random	270

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14.	123	<u>Serum/Plasma Lipid profile</u> Total Cholesterol HDL cholesterol Triacylglycerol LDL cholesterol	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Blood should be collected in fasting condition.(10-12 hours overnight)	1060
15.	124	Serum/ plasma Triacyl Glycerol (TGL)	4 ml	Plain/Heparin	2 hours	24 hours / 2-8°C	Blood should be collected in fasting condition	270
16.	126	Angiotensin converting enzyme (ACE)	4 ml	Plain	24 hours	24 hours / -20 °C	For the FFA undergone patients' blood should be collected after 24 hours.	1310
17.	127*	Urine Inborn errors of metabolism 3 samples	20ml urine	Urine container with preservative	8 hours	Discarded on the same day	Provide 3 urine containers with pinch of sodium azide. 1 for fasting and 2 for Random sample	600
18.	128*	CSF– sugar, protein and chloride	CSF- 1.0ml	---	8 hours	24 hours/ 2-8 °C	Should be received as early as possible. (Same day)	780

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19.	132*	Urine-Homocystinuria screening	50ml urine	Urine container	8 hours	Discarded on the same day.	Urine containers should be provided with pinch of sodium azide. Sample should be collected in fasting condition.	350
20.	151*	HbA1c	2 ml	EDTA whole blood	2.5 hours	24 hours 2-8°C	Blood to be collected in fasting / Random condition	400
21.	154	Serum/Plasma GGT (Gamma Glutamyl Transferase)	4ml	Plain/Heparin	2 hours	24 hours 2-8°C	Random	180
22.	158*	Serum/Plasma Bicarbonate	4 ml	Plain/Heparin	1 hour	24 hours 2-8°C	Random	400
23.	159*	Chem 8 Panel- POCT	4 ml	Heparinized Blood	30 minutes	24 hours 2-8°C	Random	1300
24	160*	Trop I – POCT	4 ml	Heparinized Blood	30 minutes	24 hours 2-8°C	Random	2000
25	161	Serum /Plasma Calcium	4 ml	Heparin /Plain	2 hours.	24 hours / 2-8°C	Random	300
26	162	Serum /Plasma Inorganic Phosphorus	4 ml	Heparin /Plain	2 hours.	24 hours / 2-8°C	Random	300
27	164*	Vitamin D(25 Hydroxy)	4 ml	Plain	4 Hours	24 hours / 2-8°C	Random	1600

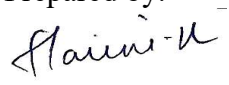

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28	165*	Anti CCP (Cyclic Citrullinated peptide antibodies)	4 ml	Plain	4 Hours	24 hours / 2-8°C	Random	1350
29	166*	Thyroid Profile	4 ml	Plain	4 Hours	24 hours / 2-8°C	Fasting/Rand om	1000
30	Other s *	BNP – POCT	2 ml	EDTA Blood	30 minutes	24 hours 2-8°C	Random	2500

*** NOT IN NABL SCOPE**

F- Fasting- -no caloric intake for at least 10-12 hrs. R- Random-any time PP- 2 hours Postprandial
FFA: Fundus Fluorescein Angiogram

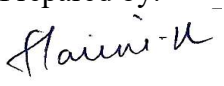
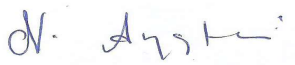
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TEST MASTER LIST

DEPARTMENT OF SPECIAL BIOCHEMISTRY

S. No	Code No	Name of the Test	Specimen Required	Anti Coagulant	Reportable intervals (TAT)	Temp./ Storage time of examined specimen	Information to the patients	
1	131*	Serum Vitamin A	4 ml serum	Plain	3 days	-20° C/ 3 days	Should not have taken vitamin A tablet 24 h prior, Blood should be collected in fasting Condition (10-12 hours fasting) No alcohol intake.	3000
2	121*	Electrophoresis for protein serum/urine/CSF	4ml serum /5 ml urine /1ml CSF	Plain	2 days	-20° C/ 3 days	Random	750
3	122*	Electrophoresis for Lipoprotein	4 ml serum	Plain	2 days	-20° C/ 3 days	Fasting condition (10- 12 hours fasting)	850
4	125*	Blood Pyruvate and Lactate	2 ml whole blood	4ml of 0.6M per chloric acid.	2 days	-20° C/ 3 days	4 hours Fasting is preferred / Random	1800
5	133*	Paper chromatography for Galactose/any sugars 2 samples plasma/urine	2 ml plasma /5 ml urine	Fluoride NaF& Na2 EDTA	2 days	-20° C/ 3 days	1. Fasting 2. 2hrs PP Blood and urine to be collected.	800

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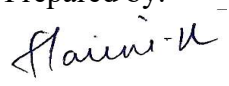




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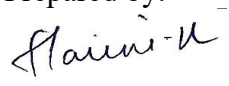
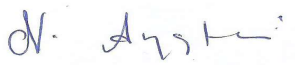
6	134*	Paper chromatography for Ornithine / amino acids	2ml Plasma/ 5 ml urine	ACD 300 µL	3 days	-20° C/ 3 days	Blood should be collected in fasting condition. (10- 12 hours fasting)	1300
7	141*	Serum Vitamin E	4 ml serum	Plain	3 days	-20° C/ 3 days	Fasting/random	3000
8	142*	Plasma vitamin C	4 ml plasma	Heparin	2 days	4° C/ 24 hours	Fasting(10- 12 hours fasting) or Random	1300
9	143*	Blood Glutathione	2 ml whole blood	EDTA	3 days	-20° C/ 3 days	Fasting (10- 12 hours) or Random	650
10	144*	Blood Glutathione Peroxidase	2 ml whole blood	EDTA	3 days	-20° C/ 3 days	Fasting(10- 12 hours fasting) or Random	1070
11	145*	Blood Superoxide dismutase	4 ml whole blood	Heparin	3 days	-20° C/ 3 days	Fasting (10- 12 hours fasting) or Random	650
12	146*	Blood Thio Barbituric Acid Reactive Substances	2 ml whole blood	EDTA	3 days	-20° C/ 3 days	Fasting(10- 12 hours fasting) or Random	300
13	112*	Serum Ceruloplasm in	4 ml serum	Plain	3 days	3 days /2-8° C	--	1100
14	135*	Amino acid profile – plasma	2 ml plasma	ACD (Acid citrate dextrose) 300 µL	7 days	-20° C/15 days (Plasma)	Blood should be collected in fasting condition	2600

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15	136*	Amino acid profile- Urine	5 ml Urine With preservative	----	7 days	-20°C/ 15 days after centrifugation 2500 rpm / 10 minutes.	Urine container Provided with pinch of sodium azide. Sample should be collected in fasting condition. (10- 12 hours fasting)	2600
16	138*	Serum Homocysteine	2 ml Serum	Plain	2 days.	-20° C/3 days	Blood should be collected in fasting condition. (10-12 hours fasting)	1500
17	180*	Zinc	4 ml serum	Plain	2 days	4°C / 24 hours	Random	700
18	181*	Serum Neuron Specific Enolase	4 ml serum	Plain	Every Tuesday	-20° C/30 days	Random	2900

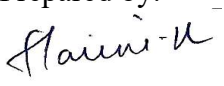
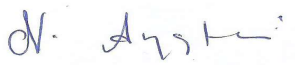
*** NOT IN NABL SCOPE**

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ACCEPTANCE / REJECTION CRITERIA FOR BIOCHEMISTRY

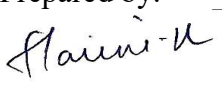
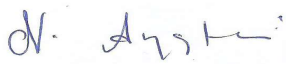
S. No	Specimen acceptance criteria	Specimen rejection criteria	Action taken
1	Labelled Samples with the patient ID and test details with correct barcode	Unlabeled /wrongly labeled samples	If specimen obtained by non-invasive procedure (Urine, Sputum or throat swab) – Recollect the sample. If specimen is obtained by invasive procedure like needle aspiration, or if it is body fluids, then process after consulting with the referring physician.
2.	Sample matches with the Test Request form	If sample does not match with the Test Request form	Do not Process. Inform the referring physician and ask for a sample rework
3	Proper and non leaking Specimen container	Improper/broken/ Leaking Specimen container	Do not Process. Inform the referring physician and ask for a sample rework
4	Sample received at appropriate time after collection	Prolonged transport time beyond acceptable limits and in improper transport conditions for all samples	Do not Process. Inform the referring physician and ask for a sample rework
5	Specimen suitable for test requested	Specimen unsuitable for the test requested	Do not Process. Inform the referring physician and ask for a sample rework.

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6	Specimen collected fulfills the sufficient volume criteria for all tests requested	Insufficient sample volume	Process as much as possible. Inform the referring physician and ask for a sample rework.
7	Specimen collected in appropriate vacutainer under appropriate conditions as required by the tests requested	Specimen collected in inappropriate or wrong vacutainer under inappropriate conditions as required by the tests requested	Do not Process. Inform the referring physician and ask for a sample rework If precious sample process with approval from authorized signatory with comments in report.
8	Specimen collected after appropriate patient preparation fulfillment for the tests requested	Sample collected from a patient who had not fulfilled the preparation criteria for test requested	Do not process. Inform the referring physician and ask for a sample rework.
9	Specimen with no contamination	Contamination of specimen collected. Eg: IV line sample collection- blood Urine- contamination with vaginal secretion or fecal matter	Do not process. Inform the referring physician and ask for a sample rework.

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10	Sample non hemolysed, non lipemic, non-icteric	<ul style="list-style-type: none"> • Hemolysed • Lipemia • Highly icteric sample • samples will be rejected based on the degree of HIL and the test requested. 	<p>Do no process. Inform the referring physician and ask for a sample rework.</p> <p>Also follow the below enumerated criteria on need as per case by case basis and tests requested.</p> <p>If precious sample or in special cases with partial hemolysis after approval by authorized signatory sample can be processed with comment in the report.</p>
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Effects of Hemolysis/ Lipemic / Icteric interference on Biochemical parameters

Hemolysed samples:	Lipemic samples:	Highly icteric samples:
<p>Hemolysis interference is approximately linearly dependent on the final concentration of free Hb in the specimen.</p> <p>• <u>It generates a consistent trend towards overestimation of:</u></p> <ul style="list-style-type: none"> – ALT & AST – Creatinine – Creatine kinase (CK) 	<p>slight lipemia to marked lipemia:</p> <p><u>Falsely increased:</u> Direct bilirubin and TIBC</p> <p><u>Falsely decreased:</u> sodium, chloride and comparatively less effect potassium Unknown sometimes increased or decreased:</p>	<p><u>Falsely decreased:</u></p> <p>>= 6 total protein and Triglyceride and in very rare instances of highly icteric samples cholesterol, creatinine, GGT, Uric acid are also affected.</p> <p><u>Unknown or increased:</u> Fructosamine is affected in slight to high icteric index</p>

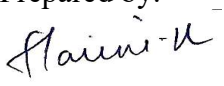
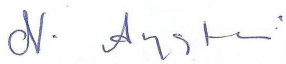
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<ul style="list-style-type: none"> – Iron – LDH – Lipase – Magnesium – Phosphorus – Potassium – Urea -Neuron Specific Enolase • <u>It generates a consistent trend towards underestimation of:</u> – Albumin – ALP – Chloride & Sodium – GGT – Glucose • Clinically meaningful variations of AST, chloride, LDH, potassium and sodium were observed in specimens with mild hemolysis (free Hb ~60 mg/dL). 	ALT, AST, Albumin, Calcium, CK, Cholinesterase, BUN, Phosphate, Total Bilirubin	only in very high icteric Direct bilirubin and phosphate is affected.
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* Record the problem in the sample rejection register if sample is rejected and document the corrective action taken

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2025

DEPARTMENT OF HISTOPATHOLOGY & CYTOPATHOLOGY



Dr.Jyotirmay Biswas MD
Director, Ocular Histopathology




Dr.S.Krihnakumar MD
**Professor, Histopathology & Cytopathology
CI.Hematology & CI.Pathology**



LOCATION OF DEPARTMENT OF HISTOPATHOLOGY & CYTOPATHOLOGY

SN Main Campus, KNBIRVO Building 3rd Floor

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Prepared by: Dr.S.Krihnakumar MD HOD, Histopathology & Cytopathology		Approved & Issued by: Dr.J.Biswas MD Director - Histopathology & Cytopathology	

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TEST MASTER LIST

DEPARTMENT OF HISTOPATHOLOGY

Histopathology Tests (Specimens) under Scope of NABL

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3.	Acceptance and Rejection Criteria	10 - 10

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Prepared by: Dr.S.Krihnakumar MD HOD, Histopathology & Cytopathology		Approved & Issued by: Dr.J.Biswas MD Director - Histopathology & Cytopathology	

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TEST MASTER LIST

DEPARTMENT OF HISTOPATHOLOGY

Histopathology Tests (Specimens) under Scope of NABL

Code No	Specimen	Turn around time	Fixative Used/Acceptance Criteria	Tariff
501	Eyeball	4 working Days	10%Neutral buffered formalin	3000
502	Exenterated specimen	4 working Days	10%Neutral buffered formalin	10000
503	Eviscerated specimen	4 working Days	10%Neutral buffered formalin	1000
504	Corneal button	4 working Days	10%Neutral buffered formalin	1000
505	Epiretinal membrane	4 working Days	10% Neutral buffered formalin	720
506	Sub retinal membrane	4 working Days	10%Neutral buffered formalin	720
507	Biopsy-lid	4 working Days	10% Neutral buffered formalin	720
508	Biopsy -Conjunctiva	4 working Days	10% Neutral buffered formalin	720
509	Biopsy -Cornea	4 working Days	10%Neutral buffered formalin	1000
510	Biopsy- Orbit	4 working Days	10%Neutral buffered formalin	3000
511	Iris tissue	4 working Days	10%Neutral buffered formalin	720
524	Amyloid stain	24 Hours	Paraffin block/Paraffin sections	620
525	Mucin stain	24 Hours	Paraffin block/ Paraffin sections	620
526	Collagen stain	24 Hours	Paraffin block/ Paraffin sections	620
528	GMS stain	24 Hours	Paraffin block/ Paraffin sections	620
529	Gram stain	24 Hours	Paraffin block /Paraffin sections	620
530	Calcium stain	24 Hours	Paraffin block/ Paraffin sections	620
531	AFB stain	24 Hours	Paraffin block/ Paraffin sections	620
533	Perl's stain	24 Hours	Paraffin block/ Paraffin sections	620
537	Small sized specimen (3mm-5mm)	4 working Days	10%Neutral buffered formalin	720

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538	Medium Sized specimens (10mm)	4 working Days	10%Neutral buffered formalin	1000
539	Large sized specimens (>20mm)	4 working Days	10%Neutral buffered formalin	2000
576	Slide for second opinion	24 – 48 Hours	-	1000
578	Package Test – Irrespective of Size Frozen and Permanent sections for diagnosis - Lid, Conjunctiva, Orbit + Oil O Red stain	30 minutes for frozen section 4working Days for Permanent sections	Fresh unfixed tissue	3000
579	Package Test – Irrespective of Size Frozen and Permanent sections for Margin Clearance - Lid, Conjunctiva, Orbit + Oil O Red stain	1 hour for frozen section 4 working Days for Permanent sections	Fresh unfixed tissue	10000
580	PAS stain	24 Hours	Paraffin block/ Paraffin sections	620

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TEST MASTER LIST

DEPARTMENT OF CYTOPATHOLOGY

Cytopathology Tests (Specimens) Under Scope of NABL

Code No	Specimen	Turn around time	Fixative Used/Acceptance Criteria	Tariff
512	Aqueous aspirate	3 working Days	Unfixed sample sent in cool pack /smears	380
513	Vitreous aspirate	3 working Days	Unfixed sample sent in cool pack /smears	380
514	Sub retinal fluid	3 working Days	Unfixed sample sent in cool pack /smears	380
515	Smear cytology-lid	3 working Days	Unfixed sample sent in cool pack /smears	380
516	Smear cytology-Conjunctiva	3 working Days	Unfixed sample sent in cool pack /smears	380
517	Smear cytology-cornea	3 working Days	Unfixed sample sent in cool pack /smears	380
521	IOL Cytology	3 working Days	70% or 95% Alcohol	380
519	FNAC	3 working Days	Unfixed sample sent in cool pack /smears	380
524	Amyloid stain	24 Hours	Unfixed sample sent in cool pack /smears	620
525	Mucin stain	24 Hours	Unfixed sample sent in cool pack /smears	620
526	Collagen stain	24 Hours	Unfixed sample sent in cool pack /smears	620
528	GMS stain	24 Hours	Unfixed sample sent in cool pack /smears	620
529	Gram stain	24 Hours	Unfixed sample sent in cool pack /smears	620
530	Calcium stain	24 Hours	Unfixed sample sent in cool pack /smears	620
531	AFB stain	24 Hours	Unfixed sample sent in cool pack /smears	620
533	Perl's stain	24 Hours	Unfixed sample sent in cool pack /smears	620

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TEST MASTER LIST

DEPARTMENT OF HISTOPATHOLOGY & CYTOPATHOLOGY

Tests (Specimens from External patients) not under scope of NABL

Code No	Specimen	Turn around time	Fixative Used/Acceptance Criteria	Tariff
520	Immunohistochemistry (Markers-Ki67/ Adipophilin/Synaptophysin/BAP1)	4 working Days	10%Neutral buffered formalin	2000
537	Small sized-Skin biopsies, Any other tissue measuring 3mm- 5mm	4 working Days	10%Neutral buffered formalin	720
538	Medium sized Skin biopsies, Any other tissue measuring 10mm	4 working Days	10%Neutral buffered formalin	1000
539	Large sized Skin biopsies, Any other tissue measuring >20mm	4 working Days	10%Neutral buffered formalin	2000
522	Aspirates - vitreous, aqueous, CSF, Pleural fluid, Bronchial alveolar lavage and any other body fluids	3 working Days	Unfixed sample sent in cool pack /smears	380
524-533	All special stains (Amyloid stain, Mucin stain, Collagen stain, GMS stain, Gram stain, Calcium stain, AFB stain and Perl's stain)	24 Hours	Paraffin block, Unfixed sample sent in cool pack /smears	620
576	Slide for second opinion	24 – 48 Hours		1000
577	Package of Bone marrow Aspirate cytology + Perl's iron stain+ cell block + Immuno histochemistry for synaptophysin	4 working Days	Smears + EDTA samples	3000
578	Package Test – Irrespective of Size Frozen and Permanent sections for diagnosis - Lid, Conjunctiva, Orbit + Oil O Red stain	30 minutes for frozen section 4 working Days for Permanent sections	Fresh unfixed tissue	3000
579	Package Test – Irrespective of Size Frozen and Permanent sections for Margin Clearance - Lid, Conjunctiva, Orbit + Oil O Red stain	1 hour for frozen section 4 Days for Permanent sections	Fresh unfixed tissue	10000
581	Immunohistochemistry for per marker	4 working Days	10%Neutral buffered formalin	3000

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Specimens for histopathology and cytopathology including the impression cytology smears are collected by the surgeons at operation theater/out patient department are directly received in person or by mail at SNSC lab-Histopathology 3rd floor New Building (KNBIRVO block)

THINGS TO BE DONE WHILE SENDING OCULAR PATHOLOGY SPECIMENS


- Proper labelling of the specimen with following information in the requisition form.
 - Name of the patient
 - Age and gender of the patient
 - The type of material
 - The eye
 - Date and time of collection
 - Doctor's name
- Adequate clinical summary and clinical diagnosis
- Proper fixation in proper preservative

PRESERVATION OF THE SPECIMEN

- Tissue should be preserved immediately in the proper fixative in a suitable sized container as drying of the tissue causes artifacts.
- For routine surgical specimens 10% neutral buffered formalin is used, 70 or 95% alcohol for IOL's
- Approximate volume of the fixative required for different kinds of specimens are:

A. Cornea	-	5 to 10 ml
B. Eyeball	-	150 to 200 ml
C. Exenterated specimen	-	500 ml
D. Other biopsy material	-	according to the size of the specimen

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MAILING OF SPECIMENS:

The specimen collected should be placed in suitable sized containers (preferably plastic container), with adequate fixative. The lid of the container should be sealed with help of adhesive tape (preferable plaster) to prevent leaking of the fixative. To avoid leakage, fixed tissue can be wrapped in gauze soaked in 10 % Neutral buffered formalin. The container should bear the label with details like Name, Age/sex of the patient, specimen, written legibly in a permanent marker.

The specimen should be mailed to Sri Nathella Sampathu Chetty Clinical Laboratory – Histopathology Laboratory, 3rd Floor, New Building, and No: 41, College Road, Nungambakkam, Chennai-600 006 with proper requisition from the surgeon providing the required details mentioned above along with the address for communication. (E-mail/ telephone no. /Fax). The charges intimated to be sent as Demand Draft/Cheque/NEFT payable to Medical Research Foundation.

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Instructions to Surgeons/Asst. Surgeons/OT staff for sending specimens to Histopathology

Size of container	Volume of Formalin to be added		Frozen section	Cytology (aspirates / fluids)	Labels on Bottle	Mandatory Information In Requisition form
1.Small sized specimen	BHIB bottles	5-10 ml	Formalin Not Required	1. No Fixative	Required	1 .Name of the patient
2.Medium sized specimen	Wide mouthed Container (50-100 ml capacity)	20-50-ml		2. To be sent immediately (if delayed, sample must be sent with cool pack)		2. Age/gender 3. MRD No.
3.Large sized specimens	Wide mouthed Container (100-200 ml capacity)	150-200 ml				4. The type of specimen sent OD/OS and site of the specimen 5. Date and Time of collection of sample 6. Surgeon's name 7. Adequate clinical summary with clinical diagnosis

NOTE: *If the same sample required for Microbiology and Histopathology Investigations send the sample in sterile container without formalin first to Microbiology along with histopathology requisition form and Information about sending specimen to histopathology.*

Storage:

Histopathology:


Specimens (If available)-30 days

Paraffin blocks-Permanent

Cytopathology:

Fluids/Aspirates-24 hrs. at 2-8°C

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Acceptance & Rejection Criteria

S. No.	Acceptance Criteria	Rejection Criteria
1.	Unstained sections /Smears will be accepted	-
2.	Paraffin block, stained sections/smears will be accepted	Samples too tiny for processing/not visible samples.

Note:

However Histopathology specimens are not rejected on grounds of poor specimen integrity. They are accessioned and remarks are incorporated in final report.

If the specimens are sent for both microbiological as well as histopathological Investigation, the specimen would be received in unfixed condition.

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DEPARTMENT OF MICROBIOLOGY & SEROLOGY



Dr.AR.Anand Ph.D

Professor and Head
Microbiology & Serology



Dr.Dhanurekha Ph.D


Senior Scientist
Molecular Diagnostics Lab



LOCATION OF OF DEPARTMENT OF MICROBIOLOGY & SEROLOGY

SN Main Campus, KNBIRVO Building 6th Floor

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GENERAL INSTRUCTION ON SAMPLE COLLECTION

MICROBIOLOGY: The patients coming for Microbiological test should not take any antibiotic therapy prior to investigation. Ref: Test master list SNSC/CM/12A, 12B, 12C, 12D, 12E and 12F / Departmental manual for more details.

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TEST MASTER LIST

DEPARTMENT OF MICROBIOLOGY

Collection procedure for tests under scope of NABL for SNSC Clinical Microbiology and Serology laboratory


S. No	Test code	Name of Test	Name of clinical specimen	Volume Criteria	Criteria for Acceptance of clinical specimen	Criteria for Rejection of Clinical specimen	Turn around time*	Temperature of Storage	Tariff
1	401	Grams Stain	Conjunctival Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	250
			Sputum	3-5mL	Freshly collected sputum	Contaminated with saliva	6-8 hours	2-8°C	
			Throat Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	6-8 hours	2-8°C	
2	402	KOH / Calcofluor Stain	Conjunctival Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	350
			Sputum	3-5mL	Freshly collected sputum	Contaminated with saliva	6-8 hours	2-8°C	
			Throat Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	6-8 hours	2-8°C	

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3	403	Giemsa Stain	Conjunctival Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	250
			Throat Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	6-8 hours	2-8°C	
4	404	AFB Stain	Sputum	3-5mL	Freshly collected sputum	Contaminated with saliva	6-8 hours	2-8°C	250
			Throat Swab	One Swab Stick meant for direct smear	** (NA)	** (NA)	6-8 hours	2-8°C	
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	6-8 hours	2-8°C	
5	411	Aerobic Bacterial culture	Conjunctival Swab	One Swab Stick meant for culture	To be collected and transported in HBSS	If collected in a unsterile container	48 - 56 hours	2-8°C	1700
			Sputum	3-5mL	Freshly collected sputum in a sterile container	Contaminated with saliva	48 - 56 hours	2-8°C	
			Throat Swab	One Swab Stick meant for culture	To be collected in a sterile container	If collected in a unsterile container	48 - 56 hours	2-8°C	
6	436	Aerobic culture	Urine	5-10mL	Mid stream urine to be collected in a sterile container	If collected in a unsterile container, if the patient is on antibiotic therapy	2 days	2-8°C	800

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7	437	Anaerobic Culture	Urine	5-10mL	Mid stream urine to be collected in a sterile container	If collected in a unsterile container, if the patient is on antibiotic therapy	48 - 56 hours	2-8°C	900
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	48 - 56 hours	2-8°C	
8	412	Fungal culture	Conjunctival Swab	One Swab Stick meant for culture	To be collected in a sterile container	If collected in a unsterile container	12 days	2-8°C	900
			Sputum	3-5mL for inoculation to all plates	Freshly collected sputum in a sterile container	Contaminated with saliva	12 days	2-8°C	
			Throat Swab	One Swab Stick meant for culture	To be collected in a sterile container	If collected in a unsterile container	12 days	2-8°C	
			Ocular specimens, non ocular specimens and biopsy	** (NA)	** (NA)	** (NA)	12 days	2-8°C	
9	414	Acanthamoeba culture	Corneal scraping, Corneal biopsy, Contact lens solution, Contact lens	** (NA)	** (NA)	** (NA)	10 days	2-8°C	340

* Time taken from the receipt of specimen(s) in the Microbiology and Serology department to the time, soft copy of the reports will be available in the HMS format of the department

** The intraocular specimens are directly received in the Microbiology laboratory from the OPD or from OT

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Ocular specimens: Conjunctival swab, Conjunctival scraping, Corneal scraping, Corneal button, Aqueous aspirate, Vitreous aspirate, Lens aspirate, Infected Suture, Infected buckle, Donor corneal rim (DCR), Iris tissue, Intra ocular lens (IOL), Contact lens, Capsular bag, Eviscerated material, Canalicular pus and orbital pus and any other ocular biopsy tissue, Sub retinal mass, and Scleral nodule, Lasik flap and Orbital biopsy.

Non-ocular and other clinical specimens: Throat swab, Sputum, Pus, Urine, Cerebro spinal fluid (CSF), Biopsy*, Nail clippings, Hair, Scrapings from genital lesions, Amniotic fluid, Bronchial wash, Ascitic fluid, Pleural fluid, Bronchoalveolar Lavage, Tracheal aspirate, Nasopharyngeal aspirate, Vesicle fluid, Synovial fluid, CAPD, Skin scraping, Gastric washing.

***Biopsy** – Bone marrow, Bone, Lymph node, Fine needle aspiration biopsy (FNAB), Sub retinal mass, Abscess fluid, Gastric biopsy, Lung biopsy, Liver biopsy, Brain biopsy, Ileo caecal biopsy, Granuloma, Endometrial biopsy, Skin nodule or any other biopsy specimens.

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TEST MASTER LIST

DEPARTMENT OF SEROLOGY

Collection procedure for Serological tests under scope of NABL for SNSC Clinical Microbiology and Serology laboratory

S. No	Test code	Name of Test	Sample to be collected (Vacutainer)	Volume Criteria ^a	Criteria for Acceptance of serum/plasma	Criteria for Rejection of serum/plasma	Turn around time*	Temperature of Storage	Tariff
1.	202	Non Treponemal (RPR) and treponemal (TPHA) antibodies	Plain blood/ EDTA, Heparinized/ citrated Blood	2-4 mL	Free from RBCs, and of required volume	Grossly Haemolysed / contaminate d/lipemic	2-3 days [#]	2-8°C	1000
2.	203	Rheumatoid arthritis (RA) Factor (Nephelometry)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed / contaminate d/lipemic	2-3 days [#]	2-8°C	400
3.	218	C - Reactive protein (CRP) (Nephelometry)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed / contaminate d/lipemic	2-3 days [#]	2-8°C	400
4	317	HBs Ag, Antibodies to HCV, Non Treponemal (RPR) and Treponemal (TPHA) antibodies	Plain blood/ EDTA, Heparinized/ Citrated Blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed / contaminate d/lipemic	24-36hours ^{\$}	2-8°C	3200

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5	220	Antibodies to HIV 1 and HIV 2 and HIV-1 p24 antigen (Screening and ELISA)	Plain blood/ EDTA, Heparinized/ citrated Blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	24-36 hours ^s	2-8°C	1000
6	222	Hepatitis B surface antigen (HBsAg) (Screening and ELISA)	Plain blood/ EDTA, Heparinized/ citrated Blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	24-36 hours ^s	2-8°C	1000
7	260	Antibodies to HBsAg	Plain blood/ EDTA, Heparinized/ Citrated Blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	3 days or two samples whichever is earlier	2-8°C	880
8	223	Antibodies to Hepatitis C virus (HCV) (Screening and ELISA)	Plain blood/ EDTA, Heparinized/ citrated Blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	24-36 hours ^s	2-8°C	1200
9	206	Anti nuclear antibody (Fluorescent and ELISA)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	2-3 days [#]	2-8°C	2240
10	234	IgG antibodies to cANCA (Proteinase3)	Plain blood/ EDTA, Heparinized/ Citrated plasma	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	2-3 days [#]	2-8°C	1900
11	235	IgG antibodies to pANCA (Myeloperoxidase)	Plain blood/ EDTA/ Heparin/ Citrated plasma	2-4mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminate d/lipemic	2-3 days [#]	2-8°C	1830
12	233 A	Antibodies to Aquaporin 4 (NMO – IgG) Antibodies to Myelin oligodendrocyte glycoprotein (MOG)	Plain blood/ EDTA, Heparinized/ Citrated Blood	2-4 mL	Free from RBCs and of required volume Transportation at 2-4°C	Grossly Haemolysed/ Contaminate d /lipemic	3 – 4 days or five samples whichever is earlier	-20°C	8500
			CSF	Not applicable	Transportation at 2 – 4°C	Not applicable		2-8°C	

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TEST MASTER LIST

DEPARTMENT OF MICROBIOLOGY AND SEROLOGY

Collection procedure for tests NOT UNDER SCOPE of NABL for SNSC Clinical Microbiology and Serology laboratory

S.No	Test code	Name of Test	Sample to be collected (Vacutainer)	Volume Criteria ^a	Criteria for Acceptance of serum/plasma	Criteria for Rejection of serum/plasma	Turn around time*	Temperature of Storage	Tariff
1	205	Widal Test	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/contaminated/lipemic	24-30 hours	2-8°C	350
2	217	Anti streptolysin O (ASO) (Latex)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/contaminated/lipemic	2-3 days [#]	2-8°C	500
3	219	Serum Lysozyme assay	Plain blood	2-4mL	Free from RBCs and of required volume	Grossly Haemolysed/contaminated/lipemic	2-3 days [#]	2-8°C	460
4	276	Antibodies to dsDNA (Fluorescent)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/contaminated/li pemic	2-3 days [#]	2-8°C	1500
5	277	Antibodies to SSA and SSB (LIA)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/contaminated/lipemic	2-3 days [#]	2-8°C	3000
6	458	Bacterial culture- Blood culture by BACTEC (Fungi, Aerobic and Anaerobic bacteria)	Blood	10 mL for adults 5 mL for children below 5 yrs	Collected and inoculated immediately aseptically	Collected in a vacutainer with or without anticoagulant	14 days	Not applicable	1600
7.	455	AFB culture (LJ medium)	Ocular specimens (Refer to page 5)	Not applicable	Collected in a sterile container	Not collected in a sterile container, leaky container	42 days	2-8°C	530

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8.	490	INVITRO ANTIFUNGAL SENSITIVITY TEST	Fungal isolate from Ocular specimens, non ocular specimens and biopsy (Refer to page 5)	** (NA)	Pure fungal isolate of a single organism	Contaminated fungal isolate	12 days	25°C	1160
9	207	Antibodies to <i>Toxoplasma gondii</i> (IgG and IgM)	Plain blood/ EDTA/ Heparin/ Citrated plasma	2-4mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2-3 days [#]	2-8°C	1760
10	210	Antibodies to Rubella virus (IgG and IgM)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2-3 days [#]	2-8°C	1760
11	211	Antibodies to CMV (IgG and IgM)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2-3 days [#]	2-8°C	1760
12	212	Antibodies to HSV (IgG and IgM)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2-3 days [#]	2-8°C	1760
13	274	QuantiFERON – TB test Platinum IGRA test	Blood – Use only BD vacutainer heparin tubes provided with the kit.	2-4 mL	Collected in only BD vacutainer heparin tubes provided with the kit	Collected in ordinary anticoagulated vacutainer	2-3 days [#]	22-26°C	3500
14	316	TORCHES SCREENING	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2-3 days @	2-8°C	8040
15	282	Autologous serum preparation (for topical use)	Plain blood	2-4 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	2 hours	2-8°C	750
16	283	PRP preparation (for topical use)	ACD tube	7-8 mL	Free from RBCs and of required volume	Grossly Haemolysed/ contaminated/ lipemic	4-6 hours	2-8°C	1000

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*: Time taken from the receipt of specimen(s) in the Microbiology and Serology department to the time, soft copy of the reports will be available in the HMS format of the department

: Serology days: Tuesday/Thursday/Saturday: Samples received in the Microbiology department till 10.00am on the day of testing will be included and the report will be generated by 5.30 pm on the day of testing.

\$: Serum Samples received in the Microbiology department till 10.00am will be included in that day for testing by ELISA for Antibodies to HIV 1 and HIV2, HBsAg and antibodies to HCV and the report generated by 5.30 pm on the day of testing. Samples received after 10.00 am will be included in the next working day.

a: volume of blood for patients \leq 1 yr is 1.0-1.5ml

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ACCEPTANCE / REJECTION CRITERIA FOR RECEIVING SPECIMEN
AT SNSC LAB – MICROBIOLOGY AND SEROLOGY

	Acceptance Criteria	Rejection Criteria
1.	Microbiology Collections: Proper Collection and Transportation	1. Swabs submitted for culture not identified its source 2. Improper transport: a. Urine specimens for culture left at room temperature for more than two hours or refrigerated for more than 24 hours. b. Anaerobic cultures not transported in an anaerobic environment.
2.	All clinical specimen collected in sterile container for microbiology tests	Culture specimen received in unsterile containers/non-laboratory containers as evidenced by contamination of containers, leaking containers and containers with foreign material.
3.	Clinical specimen transported in appropriate transport medium for tests requested.	Samples which are not sufficient / Single swab submitted for multiple requests (for eg. direct smear study and culture for aerobic and anaerobic bacteria fungus and <i>Mycobacterium tuberculosis</i> ./isolation of viruses etc)
4.	Samples collected before initiation of antibiotic therapy.	Samples collected after initiation of antibiotic therapy.
5.	Mid stream urine samples for pyogenic bacterial culture collected with aseptic precautions and transported within half an hour to laboratory	Urine samples (for pyogenic bacterial culture) collected immediately after performing fundus fluorescence angiogram. Twenty four-hour specimen collections for pyogenic urine culture
6.	Sputum sample should be examined by Grams stain and score of leucocytes and squamous epithelial cells to be determined as in procedure N of manual. The sample grouped under 4,5,6 grade is accepted for testing.	Sputum sample should be examined by Grams stain and score of leucocytes and squamous epithelial cells to be determined as in procedure N of manual. The sample grouped under 1,2,3 grade is not accepted for testing.


Note: If the specimens are sent for both Microbiological as well as Histopathological investigation, the specimen would be received in unfixed condition and half of the specimen should be sent to Histopathology lab from Microbiology laboratory.

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	Acceptance Criteria	Rejection Criteria
	Serum samples that are clear without lysis or lipemic	Serum samples that are lysed, serum that look lipemic and turbid with bacterial growth.
	Serum sample sufficient for test requested	Serum sample insufficient for test requested
	Primary /Secondary sample as given in table 1 for respective tests.	Primary /Secondary sample not as given in table 1 for respective tests.

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DEPARTMENT OF MOLECULAR DIAGNOSTICS LABORATORY



Dr.A.R.Anand, Ph.D
Professor and Head
Microbiology & Serology



Dr.L.Dhanurekha, Ph.D
Senior Scientist
Molecular Diagnostics Lab




Dr.G.Srividya, Ph.D
Molecular Biologist
Molecular Diagnostics Lab



LOCATION OF MOLECULAR DIAGNOSTICS LABORATORY


SN Main Campus, Venugopal Block (VG Block) 1st Floor

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PATIENT REGISTRATION:

- The patient reports to the “Reception” counter with requisition form. For SN OPD/OT patients, the amount to be paid, the bill number and the receipt numbers are handled at the billing counter situated in the respective OPD sections.
- For external patients the secretary at MDL checks the prescription form referred by the concerned consultant, receives the required testing amount from the patients/patient’s attendee.
- The secretary fills up the required details in the Chronology data record book for specimen entry (R/SNSC/MDL/CDRSE): The following details are entered into the record:

Unique identification of the patient.

- Name or other unique identifier of physician or other person legally authorized to request examinations or use medical information together with the destination for the report. The requesting clinician’s address is provided as part of the request form information when it is different from that of the receiving laboratory.
- Type of primary sample and the anatomic site of origin, where appropriate;
- Examinations requested;
- Clinical information relevant to the patient, which should include gender and date of birth etc for interpretation purposes;
- Date and time of primary sample collection;
- Date and time of receipt of samples to the laboratory.
- The laboratory will not receive specimen based on verbal request.
- Instructions on sample collection are provided to the patients / attendant and when required suitable containers are provided for the sample collection upon request.
- Finally the bill amount of the tests requested is collected and the receipt is handed over to the personnel stating the details of reports collection along with the lab contact number and lab id of the patient.


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General Instruction on Sample Collection

1. Properly label the specimen (a minimum two patient identifiers are required) and complete the test request form. The requisition will include the patient name, hospital number, hospital/ doctor contact number, date and time of collection, specimen type and tests requested. A requisition needs to accompany each different specimen type. The specific source of specimen is required. Example: wound, left leg.
2. Maintain an appropriate environment between collection of specimens and delivery to the laboratory (E.g. Specimens for PCR must be transported to the laboratory immediately on wet/dry ice. Blood should be collected in EDTA (purple cap tubes), body fluids and transported in wet ice. Tissue must be snap frozen and transported on dry ice). The specimen should be collected in sterile containers
3. Specimens may be hand delivered to the laboratory or through courier adhering to proper guidelines.
4. If appropriate, decontaminate the skin surface. Use 70-95% alcohol and 2% chlorhexidine or 1-2% tincture of iodine (TIO) to prepare the site. Allow a contact time of two minutes to maximize the antiseptic effect.
5. For the requests with more than one test, ensure that the proper transport is utilized and volume is appropriate.

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INSTRUCTION ON TRANSPORTATION OF CLINICAL SPECIMENS:

Package of clinical specimens after collection procedure from various hospitals / institutions to Molecular Diagnostics Laboratory:

Primary Package: The clinical samples should be placed in a sealed container, for example a sealed Vacutainer™ or a sterile specimen container.

Secondary Package: If the sample is liquid, then the sealed primary container should be placed inside a sealed leak proof secondary package such as a sealed plastic bag or another watertight container which would be sufficient to contain all of the liquid content if the primary container breaks. One bag per patient is advisable. Request form must be separately kept in a compartment/pouch/pocket such that, it was not put together with the sample in same pouch


Tertiary Package: A rigid sealed/secured outer container (polystyrene box to house the secondary package. The pack should contain a biohazard label.

Special Requirement for Frozen Samples: For temperature sensitive samples the outer container may also be a polystyrene box containing wet/dry ice. The box should be sealed with tape with proper labeling. In the final package box to be dispatched, laboratory address should be clearly labeled and transported.

Procedure for mailing of samples

- Name of the patient
- Age of the patient
- The type of material (specimen with site specification)
- Proper container- sterile, leak proof
- Date and time of collection

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- Doctor's name/ contact details (phone/mail id)
- Adequate clinical summary and clinical diagnosis with antibiotic history if relevant.
- **Note:** If the specimens are sent for both microbiological as well as for histopathological in addition to molecular diagnostic investigation, the specimen would be received in unfixed condition without formalin.
- The outer container should have a bio-hazard label stuck on it.
- The specimen should be mailed to,

MOLECULAR DIAGNOSTICS LABORATORY

Venugopal Block, First Floor,

NO.41, College Road, Nungambakkam,

Chennai – 600006


Phone: 044- 42201987/ 42271500 Extn No: 1153/1154

E-mail: moleculardiagnosics@snmail.org

Stipulated time frame for receiving the clinical specimens from other hospitals/Institutions:

It is advisable to transport the clinical specimens immediately after collection procedure. The stipulated time for transportation of samples from other hospitals/Institutions to our Laboratory should be within 24- 72 hours in cold chain, in order to maintain the integrity of the clinical specimens to provide quality reports to the patients.

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Detailed instructions for collection and transportation of clinical specimens from other laboratories and hospitals

- Use of appropriate packaging material, of suitable and well insulated container of coolants (4-8°C) and dry ice (for ultra-cold temperature) must be maintained for the stability of the samples.
- Any body fluid / fresh tissue shall be chilled immediately and transported on wet ice to the laboratory for DNA studies.
- Any body fluid for RNA studies shall be chilled immediately on wet ice and the RNA to be extracted within 1 to 4 hours of collection.
- If RNA is to be extracted from a tissue sample, it shall be either snap frozen prior to storage at -70°C or lower, placed in a stabilizing solution, or processed for RNA extraction within 1 hour of collection.


Transport of clinical Samples from SNSC to the Laboratory:

Please follow instruction as for Primary Package and should be transported within 1hr 15 minutes from time of collection. If in case the specimen collected after working hours, the sample should be stored at 4-8°C at the respective OT and transported next day morning to the Laboratory.

Transport of clinical Samples from JKCN OPD/OT to the Laboratory:

Please follow instruction as for Primary and secondary package. Samples should be transported within 2hr 30 minutes. Transport sheet is to be duly filled by the technician before sending the sample. Samples are sent during the scheduled trips to our laboratory, if unable to send it, they are stored at 4-8°C at collection centre and transport the clinical specimens to the Laboratory next day morning before 9AM.

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MOLECULAR DIAGNOSTICS LABORATORY TEST MASTER LIST

S. No	Test Code	Name of Test	Sample to be collected	Volume Criteria	Turn around time*	Temperature of Storage	Schedule of reporting/ testing	Tariff
1.	461 #	Real-time PCR for Cytomegalovirus (CMV)*#	EDTA blood, Urine, body fluids, tissue, biopsy, corneal scrapings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Friday	8000
2.	422 #	Real-time PCR for Herpes Simplex Virus (HSV) (Qualitative)*#	Body fluids, tissue, biopsy, corneal scrapings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Tuesday & Friday	4500
3.	420	PCR for <i>Mycobacterium tuberculosis</i> (M.tb) – MPB64 & IS6110 Gene	Ocular specimens, CSF, BAL, Amniotic fluid, Sputum, other body fluids and biopsy.	CSF, BAL, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48 hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4500

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4.	421	PCR for Cytomegalovirus (CMV)	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, , other body fluids, Vitreous aspirate & other ocular specimens.	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate - 0.1 – 0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4500
5.	423	PCR for Varicella Zoster Virus(VZV)	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, , other body fluids, Vitreous aspirate & other ocular specimens.	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate– 0. –0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4500
6.	424	PCR for Adenovirus	EDTA blood, conjunctival swab, Throat swab, Nasopharyngeal aspirate,urine, Sputum, BAL	2-3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4000
7.	425	PCR for <i>Chlamydia trachomatis</i>	EDTA blood, Conjunctival swab/ scraping, Pharyngeal aspirate, Endocervical swab, Urethral swab	EDTA blood: 2-3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
8..	426	PCR for Eubacterial genome	Any ocular & extra ocular specimens Blood & Body fluids Biopsy / Tissue	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate–0.1–0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500

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9.	427	PCR for Pan fungal genome	Any ocular & extra ocular specimens Blood & Body fluids Biopsy / Tissue	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
10.	428	PCR for <i>Propionibacterium acnes</i> (current name- <i>Cutibacterium acnes</i>)	Any ocular & extra ocular specimens Blood & Body fluids Biopsy / Tissue	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24 -48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
11	429	PCR for <i>Toxoplasma gondii</i>	Any ocular specimens, Blood & Body fluids, Subretinal abscess	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
12.	491	PCR for Non-Tuberculous Mycobacteria targeting hsp65 gene	Any clinical Specimen	CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate–0.1 – 0.3 ml	24- 48 hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
13.	275	PCR for <i>Acanthamoeba</i> Sps	Corneal scraping, Vitreous aspirate, AC Tap & other ocular specimens.	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48 hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500

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14.	492	DNA sequencing for Amplified products*	PCR amplified products	---	72-96 hrs	2-8°C	4 working days	4000
15.	498	PCR for sequencing for MYD88 L265 Mutation*	AC Tap, Vitreous aspirate Sub retinal biopsy	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	72-96 hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	4 working days from the day of PCR completion	7500
16.	497	Product for DNA sequencing loading*	PCR product	-----	72-96 hrs	2-8°C	4 working days	500
17.	462	Quantitative real time PCR for HSV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	7000
18.	452	RT - PCR for Rubella Virus	Ocular specimens, EDTA Blood, Urine, CSF, Amniotic fluid	EDTA blood, CSF, Amniotic Fluid - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Transported in Dry ice and stored at -70°C or lower	Daily	6000

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19.	273	Real Time PCR for <i>Toxoplasma gondii</i>	Any ocular specimens, EDTA Blood & Body fluids, Subretinal abscess	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	6000
20.	453 #	PCR for HLA B27 [^] #	EDTA blood	2- 3 ml	Same day of testing	Blood – transported & stored in 2-8°C	Tuesday, Thursday & Saturday	4000
21.	459	Real-time PCR for HIV-1	EDTA blood , Amniotic membrane	2-3ml	24-48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	9000
22.	460	Real time PCR for Chikungunya virus	EDTA Blood , CSF	2-3 ml	24-48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	5000
23.	463	Real-time PCR for <i>M.tuberculosis</i> *	EDTA blood/ Ac tap/ Vitreous aspirate Any clinical specimen	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue– transported in wet ice and stored at 2-8°C	Wednesday	8500
24.	464	Real-time PCR for Hepatitis B Virus	EDTA blood, Amniotic membrane	2-3 ml	24-48hrs	Blood – transported & stored in 2-8°C	Daily	9000

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25.	465	Real time PCR for Hepatitis C virus	EDTA blood, Amniotic membrane	2-3 ml	24-48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	9000
26.	467	PCR based DNA Sequencing*	Any unidentifiable bacteria/ fungi for the identification of species level from clinical specimens/ isolates	----	Same day of testing	2-8°C	4 working days from the completion of PCR	7000
27.	474	PCR for <i>Salmonella typhi</i>	EDTA blood , Ocular specimens	EDTA blood, - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
28.	486	PCR for <i>Pneumocystis jirovecii</i>	Broncho alveolar lavage / Respiratory secretions Ocular & extra ocular specimens	2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4000
29.	489	Real-time PCR for Dengue Virus	Blood , CSF, ocular specimens	2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	5000

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30.	496 #	Real-time PCR for Varicella Zoster Virus (VZV)*#	EDTA blood, body fluids, tissue, biopsy, corneal scrapings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Wednesday & Saturday	6000
31.	499	PCR for <i>Pythium insidiosum</i>	Corneal scraping, Vitreous aspirate, AC Tap & other ocular specimens.	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
32	278	Urgent Real Time Quantitative PCR for CMV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	13000
33	279	Urgent Real Time Quantitative PCR for HSV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate–0.1– 0.3 ml	24-48hrs	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	12000

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34	280	Urgent Real Time Quantitative PCR for VZV	EDTA blood, Urine, AC Tap, CSF, Amniotic fluid, , other body fluids, Vitreous aspirate & other ocular specimens.	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	11000
35	281	Urgent Real Time Quantitative PCR for MTB	EDTA blood/ Ac tap/ Vitreous aspirate Any clinical specimen	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	13500
36	284	Real time Qualitative PCR for <i>Treponema Pallidum</i>	EDTA blood/ Ac tap/ Vitreous aspirate Any clinical specimen	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at - 20°C Body fluid – transported in wet ice and stored at 2-8°C	Daily	5000
37	286	HLAB51 Real time PCR	EDTA blood	2- 3 ml	Same day of testing	Blood – transported & stored in 2-8°C	Daily	5500

* - BATCH TEST PERFORMED IN MDL


Tests under NABL scope

NOTE: Time limit for the additional tests for a given sample, if requested by the clinician, will be accepted, is as follows:

Samples received in molecular diagnostic section :10 days

After this time period, the request to perform additional tests for a given sample will not be accepted


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ACCEPTANCE / REJECTION CRITERIA FOR RECEIVING SPECIMEN


S.No	Acceptance Criteria	Rejection Criteria
1.	Properly labeled specimens. 1. Full patient name, age, sex 2. Patient identification number. 3. Date and time of collection	Improperly labeled specimens: 1. Specimens not labeled 2. Specimens labeled with the incorrect patient identification 3. Specimens, that do not match the patient information on the laboratory requisition.
2.	Correct Specimen Collection 1. All clinical specimen collected in sterile container 2. Specimens collected with proper preservative or anticoagulant. 3. Correct volume 4. Collected specimen without any hemolysis or particulate matter 5. Specimen without any contamination 6. Specimen sent in normal saline, without formalin 7. Specimens collected from proper venipuncture site	Improper Collection: 1. Specimen for culture received in unsterile containers/ non-laboratory containers as evidenced by contamination of containers. 2. Specimens collected with the improper preservative or anticoagulant 3. Quantity of specimens insufficient to perform testing 4. Specimens which are hemolyzed, or contain particulate matter. 5. Specimens which are obviously or subsequently prove to be contaminated. 6. Samples sent in formalin 7. Specimens collected from intravenous tubing and specimens collected in heparin tubes for PCR. 8. Formalin fixed paraffin embedded block/sections for PCR

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3. Appropriate transportation of the clinical specimens to the Laboratory 1. Specimen sent within the time limit prescribed by the laboratory. Specimen transportation with appropriate packing. 2. Transportation of Specimens in 3 tier packing system. 3. Clinical specimen transported in appropriate transport medium for tests requested	Delay in Transportation to the laboratory: 1.Specimens not in compliance with universal precaution, (e.g. Not Bagged) 2. Specimens leaking or grossly contaminated on the exterior portion of container. Note: Irretrievable specimens, such as Cerebrospinal fluid (CSF), operating room specimen, biopsy specimens will not be discarded. 3. Samples which are not sufficient/ single swab submitted for multiple requests (for e.g. direct smear study and culture for aerobic and anaerobic bacteria, fungus and <i>Mycobacterium tuberculosis</i> / isolation of viruses etc)
4. Mid-stream urine samples for PCR collected with aseptic precautions and transported within one hour to laboratory.	Urine specimens left at room temperature for more than one hour.
5. Sputum sample should be collected with mucus.	Sputum sample with saliva


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Reasons for rejection of these samples and action to be taken:

Rejection Criteria	Action to be taken
No specimen received / No request form provided with specimen	User (sender hospital or lab) to be informed of the event by telephone. Requested to send specimen/request form
Inadequate or incorrect patient identifiers in specimen label or in requisition form	User (sender hospital or lab) to be informed of the event by telephone. Requested to send a second specimen.
Time of specimen collection is not indicated in requisition form or specimen label.	The user/sender to be asked to provide specimen collection time.
Leaking container	Inform the sender/user about the event, and reject the sample.
Specimen not transported under appropriate conditions	Inform the sender/user about the event, and reject the sample
Wrong specimen container used	Inform the sender/user about the event. Verify the possibility of processing the sample (depending on the test). Reject the sample if inevitable.

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Handling of Feedback forms / Suggestions received at SNSC Molecular Diagnostics Laboratory (MDL)

Patients / Customers can give their suggestions / feedback / complaints to the SNSC Molecular Diagnostics Laboratory, Sankara Nethralaya through:

- (a) Feedback form at the Laboratory registration counter,
- (b) Complaint box in the laboratory registration counter,
- (c) Through e-mail (moleculardiagnosics@snmail.org).
- (d) If verbal it shall be documented in the respective departments of the laboratory.

A suitable response will be ensured on complaints and suggestions after discussion at the fortnightly laboratory services meeting. Feed backs are reviewed by the management through periodic meetings and yearly Management Review meeting. Actions are ensured relevantly until settled. The feedback is one of the “Quality Indicator” of the lab service and shall be analyzed statistically for management information so as to ensure quality system in patient service at laboratory

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Laboratory policy on patient's confidentiality:

- Patient confidentiality is in respecting the privacy of the patient
- Maintaining the entire patient related details and the patient health condition as closely guarded information.
- SNSC Clinical Laboratory, SN ensures that the test results of patients under insurance claims are sent directly to the employer concerned.
- SNSC Clinical Laboratory, SN do not disclose patient's personal and medical information to others unless the patient concerned has given specific permission for such release.

Laboratory complaint procedure:

Any complaints/suggestions regarding our Laboratory activity can be communicated through following modes:

Mail ids: moleculardiagnosics@snmail.org , drdhanu@snmail.org

Contact numbers: 044-28271616 Extn no: 1153/1154

Direct Land line number: 044-42271987

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SANKARA NETHRALAYA
(UNIT OF MEDICAL RESEARCH FOUNDATION)**

2025

DIRECTORY OF SERVICES

DEPARTMENT OF GENETICS




Dr.S.Sripriya Ph.D

Head Incharge - Genetics & Molecular Biology



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GENERAL INSTRUCTION ON SAMPLE COLLECTION

CYTOGENETICS (INSTRUCTIONS TO CHROMOSOMAL STUDY):

1. Random blood collection is done for above mentioned test.
2. The patient should not be under any chemotherapy, immunosuppressive drugs or affected by immunosuppressive disease and septicemia, which affect mitotic index and sterility of the culture.

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TEST MASTER LIST

DEPARTMENT OF GENETICS & MOLECULAR BIOLOGY (NOT UNDER NABL SCOPE)

S No.	Code No.	Name of the test	Specimen required	Anticoagulant (Vaccutainer tubes)	Turn Around Time	Storage / Temperature	Tariff
1	701	Chromosomal Study (PBLC Method)	4ml blood	Sodium Heparin	4-5 Weeks	6 days / 2-8°C	3160
2	712	Genomic DNA Extraction (Mini kit)	4ml blood	Sodium Heparin/ACD	5 Days	6 days / 2-8°C	1560
3	713	Genomic DNA Extraction (Maxi kit)	8ml blood	ACD	5 Days	6 days / 2-8°C	3500
4	723	Screening the three Primary mitochondrial mutations for Leber's Hereditary Optic Neuropathy (LHON)	8ml blood	ACD	4-6 Weeks	6 days / 2-8°C	7100
5	736	MST (Mutation Specific Test)	8ml blood	ACD	10-12 Weeks	6 days / 2-8°C	8000
6	751	MST additional variants (without DNA) inhouse	-	-	10-12 Weeks	-	3000

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OUTSOURCE TESTS

S No.	Code No.	Name of the test	Specimen required	Anticoagulant (Vacutainer tubes)	Turn Around Time	Storage / Temperature	Tariff
7	737	MLPA (Multiplex Ligation Dependent Probe Amplification)	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	9500
8	741	Clinical Exome Sequencing by NGS	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	17500
9	742	NGS panel Eye Diseases	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	16500
10	743	Mitochondrial Genome Screening	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	11500
11	744	<i>RBI</i> Gene Screening	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	14000
12	745	WES- Whole Exome Sequencing	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	19500
13	746	CES+Mito	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	18500
14	747	WES+Mito	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	27500
15	748	MLPA without DNA	-	-	10-12 Weeks	-	6000
16	749	Cancer Panel	8 ml blood	ACD	10-12 Weeks	6 days / 2-8°C	14500
17	750	MST additional variant (without DNA) outsource	-	-	10-12 Weeks	-	4500

Blood will be collected at the main lab. Further processing, outsourcing for the relevant tests (codes 741,742,743,745,737), report generation and communication to the patients will be the responsibility of the Genetics department. .

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SPECIMEN ACCEPTANCE & REJECTION CRITERIA FOR – CYTOGENETICS


ACCEPTANCE CRITERIA:

1. It is preferable not to collect the blood sample from patient under chemotherapy, immune-suppressive drugs or affected by immune-suppressive disease and septicemia. Appreciable cytogenetic analysis could not be guaranteed during such time as these conditions lower the mitotic index and culture may get contaminated during the incubation thus hindering the results. Blood samples are accepted from such patients after discontinuation of those medications.
2. It is a random blood collection, 4 ml of blood sample to be collected in sterile sodium heparin vacutainer.
3. Blood sample should be collected without any hemolysis and clot.
4. The details on the patient's name, age, sex, diagnosis, referral doctor and date of collection should be provided along with the sample. Preferably a label that contains all these details should be stuck on the sample tube.
5. The sample should be sent immediately after the collection at room temperature along with the requisition form, also the history of the patient diagnosis should be mentioned.
6. Address to send the sample is as follows,

SN ONGC DEPARTMENT OF GENETICS & MOLECULAR BIOLOGY
 SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA
 (UNIT OF MEDICAL RESEARCH FOUNDATION)
 41, College Road, Nungambakkam
 Chennai - 600006
 Ph.: 044-28271616, 28279435

7. Cost for the cytogenetic test payment can be made either by cash at the Register counter (or) by a DD addressed to Medical Research Foundation, payable at Chennai.

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8. Analysis request for specific chromosomal region, if any, should be mentioned with the request letter.
9. In case of pediatric blood sample, 0.5ml is accepted but if there is any contamination in the blood sample, culture cannot be performed and hence money would be reimbursed accordingly.

REJECTION CRITERIA:

Samples are rejected if:

1. Received with hemolysis and clot.
2. Received more than 2 days from the day of blood collection.
3. Less than 1 ml (except for pediatric blood samples).
4. Not received in room temperature.

Note: Blood is received from other centers if the test is requested from the customer, however, the sample should be received in proper condition as instructed.

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