### CLS Quick Test Menu Reference Guide for Out-Patient Phlebotomy

#### 4.0 mL Red Top with Clot Activator
- Alcohol (ALCO)
- C-Reactive Protein
- Haptoglobin (HPT)
- High Sensitive CRP (HSCRP)
- Osmolality
- Prealbumin (PAB)
- Procalcitonin
- Testosterone (TES)
- Rubella IgG Antibody (RUB)

#### Therapeutic Drugs
- Acetaminophen (ACEM)
- Carbamazepine (CARM)
- Digoxin (DIG)
- Dilantin (PTN)
- Gentamicin (GENT, GENP)
- Lithium (LI)
- Phenobarbital (PHNO)
- Salicylate (SALI)
- Valproic Acid (VALP)
- Vancomycin (VANCO, VANT)

#### Tumor Markers
- Alpha Fetal Protein (AFP)
- CEA
- PSA
- CA125

#### Thyroid Markers
- Total T3 (TT3)
- T4, total (T4)
- T4, free (FT4)
- TSH and TSH Reflex T4

#### Green on Ice
- Ammonia
- Lactate (LA)
- Lactate Acid Reflex (LARF)
- pH venous

#### Order of Draw:
This is the manufacturer recommended guideline to avoid test error due to additive carryover when drawing multiple tubes during a single venipuncture. Allow additive tubes to fill until the vacuum is exhausted to ensure there is a correct ratio of blood to additive.

Mix tubes by gentle inversion 8 to 10 times immediately after collection.

Commonly: Blue > Red > Green > Lavender

#### Note:
When using a winged blood collection set for venipuncture and a coagulation tube is the first tube to be drawn, first draw a blue discard tube. The discard tube is used to fill the tubing's "dead space" with blood, which will assure proper blood-to-additive ratio. The discard tube does not need to be completely filled.