

**Why do we do what we do?**

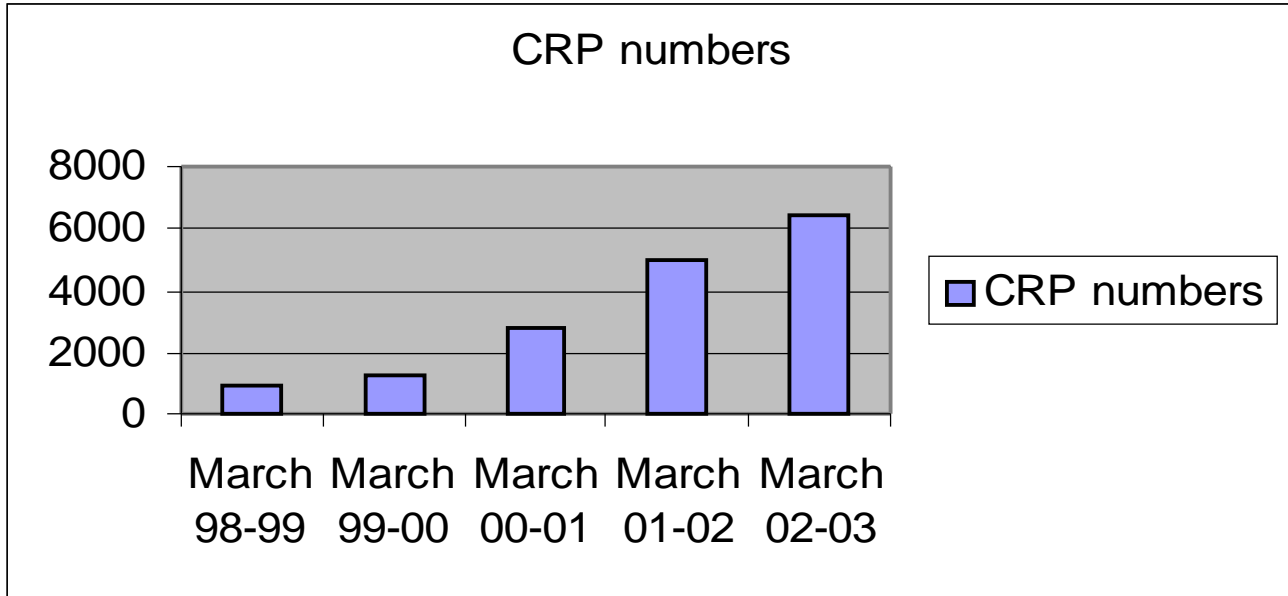
**IEQAS Panel:**

Frank Clarke, John Brady, Gerard  
Boran, Des Kenny

Presentation by

John Brady

# Increase in CRP workload



**Our Lady's Hospital for Sick Children  
Department of Clinical Biochemistry**

For result enquiries phone 6430 or 6675. Other enquiries 6427 or 6699

Clinical details:

Lab number:

Minimum Handling

Male   
Female

Surname:

Forename:

Hospital Number:

Date of Birth:

Consultant:

Ward / Location:

Please fix addressograph label here.  
Please ensure patient location is correct.

*Addressograph label goes here*

Doctors Signature:

Bleep no.:

Time of sampling:

Date:

Ward:

General biochemistry  
(LI Hep or plain tube)

Therapeutic Drug Analysis  
(LI Hep or plain tube)

Endocrine  
(LI Hep or plain tube)

- U/E
- Ca, Mg
- Creatinine
- Inorg Phos
- Glucose  
Fluoride tube
- HbA<sub>1c</sub>  
EDTA tube
- Cholesterol
- Triglycerides
- Lactate  
Red, syringe or fire
- Pyruvate  
Green tube
- Ammonia  
Red, syringe or fire
- pH, Gases  
Depend on syringe
- Protein Electrophoresis

Liver function tests

- Bilirubin
- AST
- ALT
- Alk Phos
- Total Protein
- Albumin

Miscellaneous tests

- Iron
- Osmolality
- $\gamma$ -GT
- Amylase
- CK
- LDH
- Urata

- Valproate
- Carbamazepine
- Phenytoin
- Phenobarbitone
- Primidone
- Theophylline
- Digoxin
- Flecainide  
EDTA tube
- Cyclosporin A  
EDTA tube
- Methotrexate  
Plasma, blue light

Coco information

Time since last dose

Other requests

Please specify tests required below

If other than blood please specify sample type

- Free T4
- TSH
- Cortisol
- 17-OH Progesterone
- Growth Hormone
- LH
- FSH

Specific protein analysis  
(plain tube only)

- IgG
- IgA
- IgM
- CRP
- C3
- C4
- $\alpha$ -FP
- Haptoglobin
- Ceruloplasmin
- Transferrin
- $\alpha$ <sub>1</sub>-Antitrypsin

# Increase in Urate numbers

- April 98 – April 99 2165
- August 01 – August 02 5139
- 6 months to Feb 03 3533

So were heading for 7066 to Aug 03

For the 3 months to end August 03 the number was 447 (X4 for full year=1788)

# Increase in Phosphate numbers

- Apr 98 – Apr 99 3,427
- Aug 01 – Aug 02 11,222
- Aug 02 – Aug 03 14,073
  
- No attempt was made to control numbers

83% of requests from casualty include CRP

27% of requests from casualty include LFT – the vast majority are normal

In the last two years requests for coeliac screening have gone up by 50%

Between the year ending September 2002 and the year ending September 2003 requests for thyroid function tests went up by 28%

# Blood Pyruvate

- About 660 requests per year
- In-house procedure
- Calibrator and control no longer available
- Audit of results showed that > 90% of results had no clinical validity
- Circular outlining change of policy sent out on 11/08/2003
- No requests sent out since then

# Ways of controlling demand?

- Design of request forms
- Investigation protocols
- Lab policies
- Computer flagging of frequent repeats
- Consultant only order of expensive tests
- Audit of test usefulness
- Other?