

Dear Colleagues,

01/04/2020

RE Pathology provision update

As part of a phased laboratory response to COVID-19, the senior clinicians in South 4 Pathology Partnership have reviewed all laboratory testing activities in respect of:

- Public Health England Health and Safety advice on laboratory sample processing in potentially infected COVID-19 samples
- Protecting the sustainability of the laboratory service
- Ensuring continuity of provision of in-patient laboratory testing

In order to accommodate these we have had to make adjustments to working practices. These will apply for at least the next 12 weeks.

This situation will be under regular active review. Please always consider when requesting whether tests are really required.

Please do not hesitate to contact us if you have any questions regarding this temporary amendment to the service. We will update you with further developments and we look forward to offering a fully restored clinical service once the current situation improves.

	Specimens accepted and processed normally	Specimens accepted with likely delay in processing.
Biochemistry and Haematology		
	<ul style="list-style-type: none"> Automated Haematology and Biochemistry assays will be performed in most instances as usual. Neonatal and Downs screening will continue as normal in line with National screening committee recommendations Tests for time critical cancer pathways including FIT <p>Some specialist assays involving manual processes will also be performed as normal where immediate patient management is critical including:</p> <ul style="list-style-type: none"> Immunosuppressant drug levels Methotrexate New blood films 	<ul style="list-style-type: none"> Specialist endocrine tests Metals including copper, zinc and selenium Referred biochemistry tests unless immediate clinical management necessary (suspected and critical inborn error of metabolism in a child for example 17OHP for ?CAH) HbA1c Antenatal Blood Group Testing Repeated Blood films Specialist coagulation e.g. Thrombophilia testing, specific coagulation factor assays Jak-2 BCR-ABL
Immunology		
Blood - Serum	<ul style="list-style-type: none"> ANCA (MPO&PR3)/GBM Tryptase <ul style="list-style-type: none"> IgGAM, Electrophoresis and Complement (C3 and C4). Serum Free lite (FLITE) Biologic Drug levels and antibodies (Infliximab/Adalimumab) ANA, DNA and ENA NMDA-R Antibodies MOG and Aquaporin-4 antibodies 	<ul style="list-style-type: none"> Specimens for the remainder of the Immunology repertoire will be accepted. However there may be delays to turnaround time. In the event of further reduced workload capacity due to covid-19, these samples may have to be stored and we will aim, but cannot guarantee, to process after storage.
Whole Blood	<ul style="list-style-type: none"> Lymphocyte subsets CD4 counts Interferon gamma release assays for latent TB (quantiferons and T- 	

	spots) <ul style="list-style-type: none"> Complex testing for primary immunodeficiency available ONLY after discussion and agreement with the lab. These tests may be referred to other laboratories if necessary. 	
Urine		<ul style="list-style-type: none"> Urine Electrophoresis accepted but processing may be subject to delay.
CSF	<ul style="list-style-type: none"> NMDA-R Antibodies MOG and Aquaporin-4 antibodies 	<ul style="list-style-type: none"> All tests other tests accepted but processing may be subject to delay.
Non-urgent highly specialized analyses requiring referral to other labs		<ul style="list-style-type: none"> Where the external laboratory is continuing to perform testing, however there may be delays to processing and testing by external laboratories.
	Specimens accepted and processed normally	Specimens accepted with likely delay in processing.
Microbiology		
	<p>Essential tests to be maintained:</p> <ul style="list-style-type: none"> Blood Cultures CSF / VPCR Sterile Sites Sterility Checks TB / IFTB / ZN Fungal Cultures (NOT DERM) BAL MC&S Serology / Antenatal Screens Viral Loads C. difficile Testing Micro PCR (OPCR / EPCR) Respiratory PCR (RPCR) / Influenza (FRAB) <p>Important tests (maintained but maybe delayed):</p> <ul style="list-style-type: none"> PMC Samples (excl. wound swabs) Triage swabs only MRSA / CPE Maintain for Critical Care units / High Risk Areas Urine Cultures Nephrostomy, SPA, MSU – culture Urine Microscopy All Paediatric samples - process Throat Swabs 	<p>Non-essential tests to cease first:</p> <ul style="list-style-type: none"> CSU Ova, Cysts, Parasites / Faecal Microscopy Wound Swabs / Superficial Genital MC&S RESP – Sputum Dermatophyte Cultures (DERMS) H pylori (HPA) Referral Samples

	<ul style="list-style-type: none"> • Enteric PCR Can stop GP non-bloody stools (RCPath) • Crypto / Giardia Use CGHP rather than CGA test • CT / NG Screening Batch test 	
Genetics		
	Following national guidance (see link below) http://goto.rsb.org.uk/rsb0rohe	
Cellular Pathology		
	<ul style="list-style-type: none"> • Frozen section service - Histology 	<ul style="list-style-type: none"> • Frozen section service is available only where clinically imperative. • Frozen section must be agreed by both the pathologist and clinician • If the clinical need is in dispute , a senior pathologist will arbitrate
	<ul style="list-style-type: none"> • BMS FNA service (ROSE) - Cytology 	<ul style="list-style-type: none"> • Service is available by agreement between the pathologist and clinician in specific cases only. • Arbitration will be as for frozen section service
	<ul style="list-style-type: none"> • IMF service - Histology 	<ul style="list-style-type: none"> • Suspended

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