







CLOZAPINE BLOOD MONITORING

CENTRAL LABORATORY FOR FBC AND CLOZAPINE ASSAYS

Dear Clozapine Nurse/Clinic,

Your central laboratory for analysis of routine clozapine (weekly/fortnightly/4-weekly) blood test monitoring (full blood counts) for Zaponex® patients is **Magna Laboratories**.

The enclosed information provides examples of the supplies involved and sampling instructions.

If your routine monitoring full blood count (FBC) samples are analysed at a local laboratory or on a Pochi system, your normal procedures still apply.

Routine FBC monitoring requests (blue forms)

Please use the enclosed full blood count form (blue)

Results will be reported the same day the sample is received at Magna Laboratories.

Clozapine assay requests for Zaponex® patients (yellow forms)

Please use the enclosed clozapine assay form (yellow)

Results will be reported within 3 working days of the sample being received at Magna Laboratories.

Acceptance or rejection of samples

Samples will be rejected if:

- the sample tube does not contain the correct anticoagulant (EDTA for FBC samples)
- there are not at least 3 patient identifiers out of: first name, family name, date of birth or ZTAS PIN on both the blood sample tube and request form
- the sample is received too long after collection, more than 4 days for FBC and 7 days for clozapine assay
- the FBC sample is clotted before analysis
- the sample is haemolysed before analysis (FBC and clozapine assay)
- the sample is too small for analysis (should be at least 2 mL)

Timeframe for requesting additional tests

Additional tests may be requested initially by 'phoning Magna Laboratories, and then in writing by email to magnalabs.info@nhs.net. It is not possible to perform a FBC after the sample has been processed for clozapine assay, but a clozapine assay can be requested from a FBC sample (up to 7 days old). Please note if the time of sample collection or time of last dose are unknown this makes the interpretation of clozapine plasma level results difficult, as a trough sample (12 hours post-dose) is recommended.

Supplies

To order more supplies please use the order form enclosed. Patient labels can also be ordered with the form enclosed. Alternatively, orders may be placed by using the online ordering system, **www.magnalabs.co.uk** or by sending an email. Please state the number of each item required and the name and address for delivery.

For all confidential patient information please email to magnalabs.info@nhs.net

Note: Prior to use all blood collection tubes, needles and needle holders (in boxes or in prepared kits) must be stored between 4°C and 25°C.

Samples from patients not registered with ZTAS

For information regarding sending plasma assay samples for patients on clozapine brands other than Zaponex® or for other antipsychotic drugs, please see the section on therapeutic drug monitoring (TDM).

Please contact us on tel. 01989 763 333 if you have any questions. Help and clinical advice can also be obtained by contacting ZTAS on tel. 020 73 655 842

We handle confidential data in line with all relevant legislation. For details see the Privacy Notice on our website at www.magnalabs.co.uk









ZAPONEX® (CLOZAPINE) PLASMA ASSAY LEVEL REQUESTS

This test is NOT used for routine (weekly/fortnightly/4-weekly) FBC monitoring of patients taking clozapine.

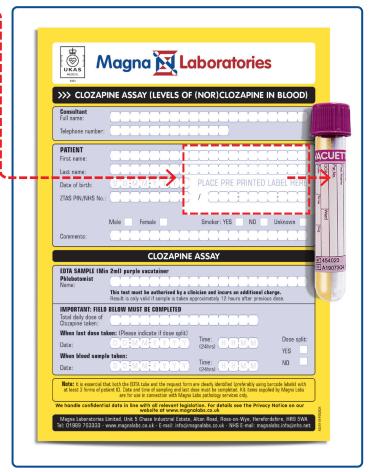
It should only be requested if you have been instructed by a Doctor/Pharmacist.

There is a charge made to the local authority for this service.

For a valid result the sample must be taken approximately 12 hours after the last dose of clozapine.

- 1. Ensure you have:
 - a clozapine assay request form (yellow)
 - a collection pack with a pre-addressed envelope and blood tube within its expiry date
 - a set of patient labels
- 2. Identify the patient, obtain consent, and collect the blood sample (purple top EDTA tube) using your local protocol.
- 3. Attach the patient's **PRE-PRINTED LABELS** to the specimen bottle and to the clozapine assay request form.
- 4. If you do not have a set of pre-printed labels fill out the form and bottle details manually. At least 3 patient identifiers are required out of; first name, family name, date of birth or ZTAS PIN.
- 5. Enter the patient's consultant's first name and family name.
- 6. It is important that:
 - dosage
 - the date and time of LAST dosage
 - the date and time the blood sample was taken is recorded on the request form.
- 7. Remember to **PRINT** your name on the request form.
- 8. Place sample in re-sealable poly bag with absorbent pad and seal.
- 9. Place sample in box with request form and close. Up to 3 specimens may be placed in each container.
- 10. Place box (including request forms) in the pre-paid, pre-addressed envelope supplied and seal.
- 11. Ensure the envelope is sent to Magna Laboratories as soon as possible, using Royal Mail.





Our contact number is 01989 763 333 (Magna Laboratories)

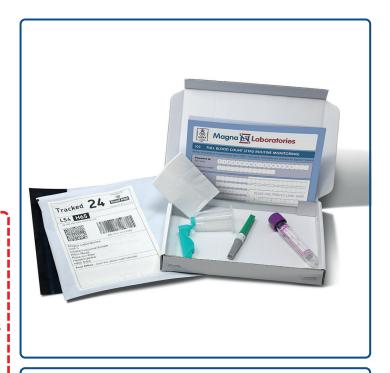


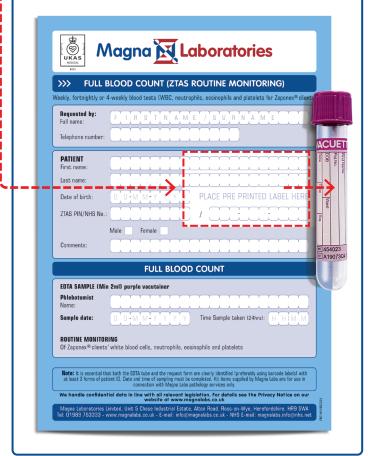




>>> ROUTINE FULL BLOOD COUNT FOR PATIENTS TAKING ZAPONEX® (CLOZAPINE)

- 1. Ensure you have:
 - a routine (weekly/fortnightly/4 weekly) FBC request form (blue)
 - a collection pack with a pre-addressed envelope and blood tube within its expiry date
 - a set of patient labels
- 2. Identify the patient, obtain consent, and collect the blood sample (purple top EDTA tube) following your local protocol.
- 3. Attach the patient's **PRE-PRINTED LABELS** to the specimen bottle and to the FBC request form.
- 4. If you do not have a set of pre-printed labels fill out the form and bottle details manually. At least 3 patient identifiers are required out of; first name, family name, date of birth or ZTAS PIN.
- 5. Remember to record the **DATE/TIME** the blood sample was taken and to **PRINT** your name on the request form.
- 6. Place sample in re-sealable poly bag with absorbent pad and seal.
- 7. Place sample in box with request form and close. Up to 3 specimens may be placed in each container.
- 8. Place box (including request forms) in the pre-paid, pre-addressed envelope supplied and seal.
- 9. Ensure the envelope is sent to Magna Laboratories as soon as possible, using Royal Mail.





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THERAPEUTIC DRUG MONITORING

Therapeutic Drug Monitoring

This includes clozapine assay requests for patients on brands of clozapine other than Zaponex® (e.g. Clozaril® and Denzapine®), and patients on other antipsychotic drugs; aripiprazole, haloperidol, quetiapine, olanzapine, risperidone/paliperidone. Please use the enclosed therapeutic drug monitoring form (green).

Results will be reported within 3 working days of the sample being received at Magna Laboratories.

Acceptance or rejection of samples

Samples will be rejected if:

- there are not at least 3 patient identifiers out of: first name, family name, date of birth or NHS/CHI/H&C number on both the blood sample tube and request form
- the blood is not in a suitable tube type for plasma or serum samples (should be EDTA or serum separator)
- the sample is received too long after collection; more than 4 days for olanzapine and 7 days for all other drug assays. Note: olanzapine samples can be stored frozen (-20°C) as plasma or serum, if not to be sent immediately
- the sample is haemolysed before analysis
- the sample is too small for analysis (should be at least 1 mL)

For a valid result, the sample should be taken as a trough level (before taking next dose);

- clozapine approximately 12 hours post-oral dose (for twice daily dosing)
- aripiprazole approximately 24 hours post-oral dose or immediately before the next long-acting injection (depot)
- haloperidol approximately 12 hours post-oral dose or immediately before the next long-acting injection (depot)
- risperidone/paliperidone approximately 12 hours post-oral dose or immediately before the next long-acting injection (depot)
- olanzapine approximately 12 hours post-oral dose or immediately before the next long-acting injection (depot)
- quetiapine approximately 12 hours post-oral dose or approximately 24 hours post-dose and immediately before the next extended-release dose

Please contact us on tel. 01989 763 333 if you have any questions. Help and clinical advice can also be obtained by contacting ZTAS on tel. 020 73 655 842





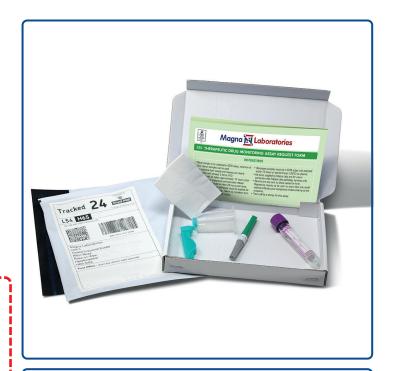


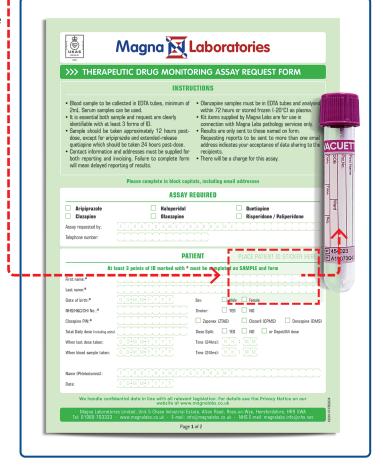
THERAPEUTIC DRUG MONITORING REQUESTS

This test should only be requested if you have been instructed by a doctor/pharmacist.

There will be a charge made to the local authority for this service.

- 1. Ensure you have:
 - a therapeutic drug monitoring request form (green)
 - a collection pack with a pre-paid, pre-addressed envelope and a blood tube within its expiry date
 - a set of patient labels, if available
- 2. Identify the patient, obtain consent, and collect the blood sample (purple top EDTA tube) using your local protocol.
- 3. Attach the patient's **PRE-PRINTED LABELS** to the specimen bottle and to the assay request form.
- 4. If you do not have a set of pre-printed labels fill out the sample bottle and form details manually, in block capitals. At least 3 patient identifiers are required out of; first name, family name, date of birth or NHS/CHI/H&C number.
- 5. Double check the sample tube is labelled and place it in the re-sealable poly bag with absorbent pad and seal.
- 6. Place sample in box with request form and close. Up to 3 specimens may be placed in each container.
- 7. Place box (including request forms) in the pre-paid, pre-addressed envelope supplied and seal.
- 8. Ensure the envelope is sent to Magna Laboratories as soon as possible, using Royal Mail.





Our contact number is 01989 763 333 (Magna Laboratories)









REQUEST FOR CLOZAPINE LABELS

Please complete the details below to ensure you receive the patients labels you require. You will receive your labels in approximately 3-4 working days.						
Requested by:	FIRST	N A M E / S	U R N A M E			
Facility name:						
Address:						
Town / City:						
Postcode:			Telephone number:*			
* It is essential to fill in th	e telephone number.			CLCMATUDE		
Date:	D D M M Y	YYY	Signature:	SIGNATURE		
Clozapine patient labels required: PLACE REQUIRED LABEL HERE		PLACE REQUIR	ED LABEL HERE	PLACE REQUIRED LABEL HERE		
PLACE REQUIRED LABEL HERE		PLACE REQUIR	ED LABEL HERE	PLACE REQUIRED LABEL HERE		
lf you don't have lal	pels, enter details belov	v or add more label	ls if required.			
Patient name/initials		DOB ZTAS PIN		Consultant Psychiatrist		
				<i>)</i> (

Should you have any queries, please contact Magna Laboratories.

PLEASE EMAIL / POST THIS FORM TO MAGNA LABORATORIES

We handle confidential data in line with all relevant legislation. For details see the Privacy Notice on our website at www.magnalabs.co.uk









ZAPONEX° (CLOZAPINE) - CONSUMABLES REQUEST FORM

Please complete the details below to ensure you receive the consumables you require.

Requested by:

First Name / Surname

Address:

Town / City:

Postcode:

* It is essential to fill in the telephone number:

Please dispatch the following consumables to the address above.

Please dispatch the following consumables to the address above. (PLEASE INDICATE NUMBER OF ITEMS REQUIRED IN THE BOXES BELOW.)

Vacutainer Collection Kit: Full Blood Count (ZTAS Routine Monitoring) (Contains all items listed below except G and I)	2. Vacutainer Collection Kit: Clozapine assay (Blood levels) (Contains all items listed below except G and H)	
A. Plastic Postal envelope:	F. Rigid transporter:	
B. Re-sealable polybag:	G. Large Postal/courier envelope:	
C. Vacutainer Needle holder:	H. FBC request form:	
D. Vacutainer Needles (green)	I. Clozapine assay request form	
E. EDTA blood tube (purple top) Vacutainer for FBC's & Clozapine assay testing.		

Should you have any queries, please contact Magna Laboratories.

PLEASE EMAIL / POST THIS FORM TO MAGNA LABORATORIES

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CONTACT DETAILS

Zaponex® monitoring

For all enquiries relating to patients including :

- patient currently on treatment
- advice on registering new patients
- medical advice
- full blood count results (weekly / fortnightly / 4-weekly)
- all changes to patient details (e.g. sampling location or consultant changes)

Or any other matter relating to patient care



Contact the ZTAS office on:

Tel. : 020 7365 5842

E-mail : info@ztas.co.uk Website : www.ztas.co.uk

The ZTAS office is open Monday to Friday 08:30 - 17:00 For all emergency enquiries outside office hours : telephone 020 7365 5842

Central Laboratory

For all enquiries relating to:

- the re-ordering of haematological kits, including needle holders, needles, blood tubes, sample request forms and post/packaging materials
- Pre-printed ID labels for ZTAS patients
- clozapine and other therapeutic drug monitoring supplies and results
- courier collections

Magna Laboratories

Contact Magna Laboratories on:

Tel. : 01989 763 333

E-mail : info@magnalabs.co.uk Website : www.magnalabs.co.uk

For patient sensitive information:

E-mail: magnalabs.info@nhs.net

Magna Laboratories is open Monday to Friday 08:30 - 17:00 $\,$

Clinical advice and interpretation of results for all examinations performed by Magna Laboratories can be obtained by calling the ZTAS number above.



If you have any complaints or comments regarding Magna Laboratories services, we would like to hear them. Please contact us by phone, post or email.

